

THE PRESUMPTIVE ELIGIBILITY (PE) FOR PREGNANT WOMEN PROGRAM FORMS

MC 263 PE for Pregnancy Application Package

This form is used to enroll eligible patients into the Presumptive Eligibility for Pregnant Women Program and must be ordered directly from the Department of Health Care Services (DHCS), PE Program Support. These forms are printed by DHCS with provider specific information and shipped directly to you. To order the MC 263 PE for Pregnancy Applications, complete the MC 285 - Forms Order for Presumptive Eligibility (PE) for Pregnant Women Program and return by fax or email.

Fax to (916) 364-6612

Email medpublicationsorders@maximus.com

PE for Pregnant Women Program Supplemental Forms

The following forms are available for download from the DHCS website or Medi-Cal website. These forms are used to determine your patient's eligibility, report eligible patients to DHCS and provide information to your patients and staff. If unable to access the websites, you may contact the PE Support Unit and an original will be faxed or mailed to you for reproduction at your convenience.

MC 263 S-R	Statement of California Residency
MC 263 S-R SP	Statement of California Residency (Spanish)
MC 264	PE Patient Fact Sheet
MC 264 SP	PE Patient Fact Sheet (Spanish)
MC 265	Patient Directions for PE Application
MC 265 SP	Patient Directions for PE Application (Spanish)
MC 266	Directions for Medi-Cal Application
MC 267	Explanation of ineligibility for PE
MC 267 SP	Explanation of Ineligibility for PE (Spanish)
MC 283	Weekly PE Enrollment Summary
MC 285	PE Forms Order
MC 286	PE Provider Fact Sheet

These forms are available for download from the DHCS website.

<http://www.dhcs.ca.gov/formsandpubs/forms/Pages/MCEBbyNumber.aspx>

<http://www.dhcs.ca.gov/formsandpubs/forms/Pages/MCEBTranslatedForms.aspx>

These forms are also available for download from the Medi-Cal website under the Presumptive Eligibility for Pregnant Women section

<http://files.medi-cal.ca.gov/pubsdoco/forms.asp>