

State of California—Health and Human Services Agency Department of Health Care Services



August 19, 2015:

Medi-Cal Eligibility Division Information Letter No.: I 15-25

TO: ALL COUNTY WELFARE DIRECTORS

ALL COUNTY WELFARE ADMINISTRATIVE OFFICERS

ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS

SUBJECT: Pregnancy Eligibility Full-Scope Medi-Cal Coverage Expansion

The purpose of this letter is to provide information on the new income guidelines for full-scope Medi-Cal for pregnant women.

Background

Senate Bill 857(Chapter 31, Statutes of 2014) added Welfare and Institutions Code Sections 14005.22 and 14005.225, authorizing the expansion of full-scope Medi-Cal coverage to pregnant women with incomes up to and including 138 percent of the Federal Poverty Level (FPL). The full-scope FPL for pregnant women increased from 60 percent FPL to 138 percent FPL effective August 1, 2015, and this change has been implemented into the California Healthcare Eligibility, Enrollment and Retention System.

Program Eligibility

- The Centers for Medicare and Medicaid Services (CMS) approved the State Plan Amendment (SPA) 14-0021 effective August 1, 2015. This SPA authorized DHCS to expand full-scope Medi-Cal for pregnant women with incomes up to and including 109 percent of the FPL.
- CMS also approved an 1115 waiver amendment effective August 1, 2015, expanded full-scope Medi-Cal benefits to pregnant women with incomes from 109 percent up to and including 138 percent of the FPL.

Implementation

 As of August 1, 2015, newly pregnant applicants for Medi-Cal with satisfactory citizenship/immigration status and with incomes up to and including 138 percent FPL will be eligible for full scope Medi-Cal benefits under Aid Code M7 and required to enroll into a Medi-Cal Managed Care Plan.

- DHCS plans to send a Notice of Change in Medi-Cal Benefits to the current beneficiaries eligible for pregnancy-related Medi-Cal, Aid code M9 with satisfactory citizenship/immigration status who have incomes above 60 percent and up to and including 138 percent of the FPL who are now eligible for full-scope Medi-Cal coverage. These beneficiaries are granted an exemption from enrolling into a Medi-Cal managed care plan and can remain with their fee-for-service provider through the remainder of their pregnancy and postpartum period. For these current beneficiaries who want to remain with their current providers, no action is necessary on their case.
- If these pregnant beneficiaries in Aid Code M9 want the option to move to a
 Medi-Cal managed care plan, they can contact their eligibility workers for this
 voluntary option during their pregnancy and post-partum period. However,
 counties must inform the pregnant woman that her eligibility will be re-evaluated
 for all those in her household and it could cause changes in health coverage for
 the members of her household.

The 2015 FPL Chart for income up to and including 138 percent FPL is below.

2015 FPL Chart		
Family Size	Annual	Monthly
1	\$16,243	\$1,354
2	\$21,984	\$1,832
3	\$27,725	\$2,311
4	\$33,465	\$2,789
5	\$39,206	\$3,268
6	\$44,947	\$3,746
7	\$50,688	\$4,224
8	\$56,429	\$4,703
Each	\$5,741	\$479
additional		

The Department of Health Care Services will issue an All County Welfare Directors Letter with additional instructions on the impact of the pregnancy expansion.

Medi-Cal Eligibility Division Information Letter No.: I 15-25 Page 3 August 19, 2015

If you have any questions regarding this pregnancy eligibility expansion, please contact Ms. Cynthia Cannon at 916-552-9499 or email at Cynthia.Cannon@dhcs.ca.gov.

Original Signed By:

Alice Mak, Acting Chief Medi-Cal Eligibility Division