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Medi-Cal Eligibility Division Information Letter No.: I-15-30

TO: ALL COUNTY WELFARE DIRECTORS
ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS

SUBJECT: Pregnancy Program Expansion and Minimum Essential Coverage
Determination

The purpose of this letter is to provide information on the recent full-scope Medi-Cal pregnancy expansion and the change to the federal Minimum Essential Coverage (MEC) determination for Pregnancy Related Medi-Cal, and related changes to the Aid Code Master Chart.

Background

Full Scope Services

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 income from up to and including 60 percent Federal Poverty Level (FPL) to up to and including 138 percent of the FPL.

The Centers for Medicare and Medicaid Services (CMS) approved a State Plan Amendment (SPA) 14-0021 and a § 1115 Waiver amendment, both effective August 1, 2015, that authorizes this expansion. The SPA authorized the Department of Health Care Services (DHCS) to expand full-scope Medi-Cal for pregnant women with incomes up to and including 109 percent of the FPL. The § 1115 Waiver amendment expanded full-scope Medi-Cal benefits to pregnant women with incomes from 109 percent up to and including 138 percent of the FPL.

All County Welfare Directors Letter (ACWDL) 15-35 provides more information on the full scope expansion for pregnant women.

MEC Change

CMS verbally confirmed Pregnancy Related Medi-Cal is MEC effective October 12, 2015, and the California Healthcare Eligibility, Enrollment and Retention System business rules engine logic was updated with the new federal determination on that date too. CMS provided California written confirmation of the MEC determination on February 12, 2016. Pregnancy Related Medi-Cal is provided to pregnant women who have satisfactory citizenship or immigration status with incomes above 138 percent and up to and including 213 percent, and those pregnant women who do not have satisfactory immigration status, with income up to and including 213 percent.

Pregnancy-related services are defined as “services required to assure the health of the pregnant woman and the fetus, or that have become necessary as a result of the woman having been pregnant. These include, but are not limited to, prenatal care, delivery, postpartum care, family planning services and services for other conditions that might complicate the pregnancy. Services for other conditions that might complicate the pregnancy include those for diagnoses, illnesses, or medical conditions which might threaten the carrying of the fetus to full term or the safe delivery of the fetus. Pregnancy-related services may be provided prenatally from the day that pregnancy is reported and postnatally to the end of the month in which the 60-day period following termination of pregnancy ends.”

ACWDL 15-35 provides more information on the Pregnancy-related services for pregnant women.

Aid Code Master File

The Aid Code Master Chart will be updated to reflect all the changes to the pregnancy aid codes including updating the FPLs, aid codes descriptions, and MEC determination. These changes are currently under review and once completed, a notice describing these changes, including an updated Aid Code Master Chart, will be released by DHCS.

If you have any questions, or if we can provide further information, please contact Ms. Cynthia Cannon by telephone at (916) 552-9499 or by email at Cynthia.Cannon@dhcs.ca.gov.

Sandra Williams, Chief
Medi-Cal Eligibility Division