## DEPARTMENT OF HEALTH SERVICES

714/744 P STREET 2.O. BOX 942732 CRAMENTO, CA 94234-7320



December 29, 1989 Letter No.: 89-119

To: All County Welfare Directors

All County Administrative Officers

Subject: VERIFICATION OF PREGNANCY

Reference: ACWDL 89-50, ACWDL 89-103

This is to inform you that the regulation concerning verification of pregnancy, which was addressed in ACWDL 89-50 (page 2) and at the 185 Percent program training, has been filed with the Secretary of State. Therefore, effective February 1, 1990, counties shall implement the revision to Section 50167(a)(8), Title 22, CCR which reads:

"Except for women applying for minor consent services under Section 50147.1, a woman whose eligibility or share of cost is based on pregnancy shall provide a letter of verification from either a physician or a person certified as a nurse practitioner, midwife or physician's assistant."

A woman is not considered pregnant until medical verification is presented. Therefore, unless the woman is: (1) under age 21, or (2) the parent or caretaker of a deprived child (AFDC-linked), or (3) eligible on a basis other than pregnancy, her Medi-Cal application shall be denied.

If a woman is otherwise eligible for Medi-Cal and verification of pregnancy was not submitted, her maintenance need level and federal poverty level shall <u>not</u> include the unborn. The maintenance need and the federal poverty level may be retroactively adjusted to include the unborn provided that the pregnancy verification is submitted timely (within 10 calendar days from the date of the written pregnancy verification).

In situations where there is medical confirmation of multiple unborns, the maintenance need shall be increased by the number of unborns. As stated earlier, the maintenance need and the federal poverty level may be retroactively adjusted if medical verification of the multiple unborns is submitted timely.

All County Welfare Directors All County Administrative Officers Page 2

The Medi-Cal Eligibility Manual will be revised to reflect the regulation change. If there are any questions, please contact Yvonne Lee at (916) 324-4954/ ATSS: 454-4954.

Sincerely,

ORIGINAL SIGNED BY ANGELINA MRVA for

FRANK S. MARTUCCI, Chief Medi-Cal Eligibility Branch

cc: Medi-Cal Liaisons

Medi-Cal Program Consultants

Expiration Date: 6/30/91