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ALERT!

Women Who Want to Keep Covered CA During Pregnancy

Background: Women enrolled in a Covered California plan are not required to report a pregnancy since pregnancy has nothing to do with Covered California eligibility.

If a woman does report that she has become pregnant after enrolling in a Covered California plan, she has the right to remain in her Covered California plan even if her household income is within the Medi-Cal limit for pregnant women.¹

- **ALERT:** But the computer system has been mis-programmed to switch Covered California women to no-cost Medi-Cal when they report a pregnancy and their income is at or below the Medi-Cal limit, which is 213% of poverty for pregnant women. Women are not informed they **have a choice** to stay in Covered California instead of moving to Medi-Cal.

What this means: The switch to Medi-Cal makes coverage much more affordable, since Medi-Cal has no premiums or any copayments, deductibles or coinsurance for pregnant women. The switch also lets the woman use Medi-Cal's Comprehensive Perinatal Services Program (CPSP) and adult dental benefits. It also links her newborn to automatic eligibility for Medi-Cal for the entire first year.

But if the woman's doctor, midwife or hospital does not participate in Medi-Cal, then she will not be able to continue receiving or arranging services from them if she is no longer enrolled in Covered California.

What to do: For a woman who has had her Covered California automatically switched to Medi-Cal during pregnancy or the postpartum period:

- Check to see if the woman's clinic, doctor(s), or midwife and the hospital where she plans to deliver her baby will accept her as a Medi-Cal patient.
- If for ANY reason the woman wants to return to Covered California, she should do both of the following:

¹ CMS SHO # 14-002 (November 7, 2014), p. 5, available at <http://www.medicaid.gov/federal-policy-guidance/downloads/sho-14-002.pdf>.

- 1) Ask the county Medi-Cal program (we can help you figure out who to call) to put her back into her Covered California plan; and
- 2) Request an “Expedited Fair Hearing” by calling [1-855-795- 0634](tel:1-855-795-0634) or [1-800-743-8525](tel:1-800-743-8525) or, for the speech impaired, (TDD) [1-800-952-8349](tel:1-800-952-8349). Or fax the request to [\(916\) 651-2789](tel:916-651-2789).
 - Explain that there is an “Immediate Need” for “continuity of care” for a pregnant (or postpartum) woman.
 - These fair hearings are supposed to happen in 10 days. They can be done either over the telephone or in person. You do not need a lawyer or other representative.
 - Asking for the Expedited Fair Hearing might speed up the woman’s return to her Covered California plan.
 - The request for a Fair Hearing might also help with paying for medical bills if the woman continued to use her Covered California clinic, doctor, midwife and/or hospital in situations where the county wasn’t able to get her back into her Covered California plan quickly enough.

Questions? Please contact Lynn Kersey at lynnk@mchaccess.org or Lucy Quacinella at lucyqmas@gmail.com.