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OF OBSTETRICIANS
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January 9, 2014

Governor's Budget Proposal for Pregnant Women's Coverage: Applause But Improvements Needed

We applaud the Governor's proposal to expand from 60% to 100% of the federal poverty level the income eligibility limit for full Medi-Cal coverage for women who are pregnant at the time of application.

- However, we ask that, like all other adults, adult pregnant applicants be granted **full Medi-Cal to 138% of poverty**. Pregnant applicants must not be left out of health care reform.

We also look forward to working with the Administration to ensure all of the following regarding a pregnant woman's election to enroll in both an Exchange plan and Medi-Cal if her income is over 100% up to 200% of poverty:

- Women must be provided with **clear, timely information** at the time of applying and renewing benefits about their program enrollment choices and the impacts of each choice on consumer costs, benefits, and provider access.
- Women in the Exchange who also qualify for Medi-Cal must **not lose access to any of Medi-Cal's benefits**, including but not limited to Medi-Cal's Comprehensive Perinatal Services Program benefits, either in law or practice.
- Women in the Exchange who also qualify for Medi-Cal must also have **out of network access to family planning and other reproductive health services**, even if in-network providers are available.

For women who opt to enroll solely in pregnancy-only Medi-Cal, the scope of services must conform with all federal requirements. **California should, as most other states do, provide all Medicaid "services [and] items for pregnant women that it covers for other adults."**¹

Our organizations look forward to continuing to work with the Administration.

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¹ Vol.77 Fed. Reg. No. 57, 17144, 17149 (March 23, 2012).