



1111 W. Sixth Street, Suite 400
Los Angeles, CA 90017-1800
Tel 213. 749.4261
Fax 213. 745.1040
info@mchaccess.org
www.mchaccess.org

January 12, 2021

New Managed Care Rule Starting January 1 for Certain Pregnant Medi-Cal Applicants

What is the new rule? Starting January 1, 2022, all pregnant Medi-Cal applicants who are U.S. citizens or lawfully present residents (LPRs) will be enrolled into a managed care plan. This new “mandatory managed care” rule applies only to new applicants, not pregnant individuals already enrolled in Medi-Cal as of January 1.

How is the new rule different? Before January 1, 2022 all pregnant individuals, including citizens and LPRs, with income over 138% through 213% of poverty received “regular” Medi-Cal (fee-for-service). So, starting January 1, only pregnant applicants who are undocumented will get enrolled into fee-for-service when they apply for Medi-Cal.

Are there any exceptions to the new mandatory managed care rule for pregnant citizen and LPR Medi-Cal applicants? Yes. A person can make a “**Medical Exemption Request**” (MER) in order to preserve “continuity of care” with a provider who the person has already started to see. Breaking the continuity of care may cause harm to a patient. A person whose Medical Exemption Request is approved will stay out of a managed care plan until the end of their pregnancy plus 90 days after the pregnancy ends.

Use [this form](#) or call Health Care Options at 1-800-430-4263 to submit a MER. It should be approved if:

- the person has already been seen by a Medi-Cal provider during the pregnancy who does not accept any Medi-Cal managed care plans in the person’s county;
- the treating provider does not come to an agreement with any Medi-Cal managed care plan about providing care to the person out of the plan’s network;
- the person has not been in a Medi-Cal plan continuously for over 90 days; AND
- the person is pregnant in any trimester.

IMPORTANT NOTES: No. 13, A. of the MER form incorrectly has a **requirement for pregnancy complications or being in third trimester**. **Pregnant in any trimester should qualify for a MER.**

But if the person *is* in their **third trimester**, **be sure to mention** the special “Third Trimester Delay in Mandatory Enrollment” program. Otherwise, even though they shouldn’t, the state will require additional medical proof, beyond being pregnant in any trimester.

If you or someone you know has been denied a MER during any trimester of pregnancy, please contact lucyqmas@gmail.com or lynnk@mchaccess.org.

What if a person is already in a managed care plan when they are pregnant and need to see a doctor who accepts only fee-for-service Medi-Cal? The person may request to disenroll from the plan if they need treatment from a fee-for-service doctor or there is “good cause.” Good cause includes many reasons, such as a lack of any other specialist qualified to treat the person’s specific condition.