
Presumptive Eligibility for Pregnant Women

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This section includes information about applicant income eligibility, pregnancy test requirements and provider participation for Presumptive Eligibility for Pregnant Women (PE4PW). Important information is also available in the following provider manual sections:

- *Presumptive Eligibility for Pregnant Women: Billing Codes*
- *Presumptive Eligibility for Pregnant Women Program Process*
- *Presumptive Eligibility for Pregnant Women Provider Enrollment Instructions*
- *Presumptive Eligibility for Pregnant Women Provider Enrollment Checklist*

PE4PW Program

PE4PW is designed for California residents who believe they are pregnant and who appear eligible for and do not have Medi-Cal coverage for prenatal care. Program overview information is located in the *Presumptive Eligibility for Pregnant Women Program Process* provider manual section.

Eligibility Criteria

Applicants to PE4PW who believe they are pregnant should be given the *Presumptive Eligibility Patient Fact Sheet* (MC 264) by a Qualified Provider (QP). The QP should explain that this program provides temporary Medi-Cal coverage for ambulatory prenatal care services. The applicant must be told that to continue eligibility for these services, the applicant must formally apply for health insurance affordability programs, including Medi-Cal. If the applicant has already applied for health insurance affordability programs but has not yet been determined eligible, the applicant may still apply for PE4PW.

For additional information, refer to “Applicant Criteria” in the *Presumptive Eligibility for Pregnant Women Program Process* section of this provider manual.

Definitions of Family Members and Income

The following definitions apply when the patient is filling out the *Application for Presumptive Eligibility for Pregnant Women Program* and when the provider is determining eligibility:

- “Family Members” are persons living in the patient’s household who are either:
 - The spouse of the applicant,
 - The natural, adopted or step-children of the applicant,
 - The parents of the applicant if applicant is under 21, unmarried and living with parents; or
 - The unborn (also considered a person when determining the applicant’s family size and income level).

“Family Income” is the income of the applicant and/or spouse. If under 21, unmarried and living with the applicant’s parents, the income of the parents is also considered “family income.”

Minors Applying for PE

Minors who apply for PE4PW must include family members and gross family income on the application as indicated in “Definitions of Family Members and Income” in this section.

- If the applicant is younger than 21, unmarried and living alone with no children, only the applicant’s income is counted.
- If the applicant is younger than 21 and married, both the applicant and spouse’s income are counted. Children living in the applicant’s household are only included as family members.
- If the applicant is younger than 21, unmarried and living with parents, the applicant’s and parents’ incomes are counted. Siblings living in the applicant’s household are only included as family members.
- If the applicant is younger than 21, married and living with parents, the applicant’s, spouse’s and parents’ income are counted. Siblings living in the applicant’s household are only included as family members.
- If the applicant is younger than 21, unmarried, and does not know the parents’ income or cannot obtain their income to avoid them knowing about the PE4PW program application, the applicant can apply for the Minor Consent Program at the local county social services office. The Minor Consent Program provides basic benefits, including pregnancy-related services, based solely on the applicant’s income and resources. The minor’s parents are not contacted or included in the determination for Minor Consent Program services. (See the *Eligibility: Recipient Identification Cards* section in the Part 1 manual and the *Minor Consent Program* section of the appropriate Part 2 manual for information about the Minor Consent Program.

Income Eligibility Guidelines

The Federal Poverty Level (FPL) Chart is used to determine whether an applicant's gross family income is at or below the PE4PW program income limits. "Gross Income" is defined as income before taxes and other deductions. The applicant's unborn child is counted as a member of the family; therefore, the guidelines begin with two persons (the mother and the unborn child).

Federal Poverty Level Chart

«Effective January 1, 2021, through December 31, 2021

Numbers of Persons in Family	Monthly Gross Family Income (in dollars)	Annual Gross Family Income (in dollars)
2	3,093	37,105
3	3,898	46,775
4	4,704	56,445
5	5,510	66,116
6	6,316	75,786
7	7,122	85,456
8	7,928	95,126
9	8,733	104,796
10	9,539	114,467
11	10,345	124,137
12	11,151	133,807
For family units of more than 12 members, for each additional member, add:	806	9,671»

Note: The Federal Poverty Level Chart is adjusted on an annual basis.

Example 1

A pregnant applicant is single with two children, with a gross monthly income of \$1,200. The applicant's elderly aunt lives with the applicant and receives \$550 a month from Social Security.

The pregnant applicant and the applicant's two children would be counted as a four-person household: The applicant, the unborn child and the two children. The aunt and her income would not be counted as part of the family income or family size.

The applicant's monthly income of \$1,200 is at or below the gross monthly income for applicant family size as indicated by the FPL chart; therefore, the applicant meets the income criteria for PE4PW.

Example 2

A pregnant applicant lives with a boyfriend (who is the father of the unborn child) and a son from a previous marriage. The boyfriend has an income of \$1,500 a month, and the applicant receives \$250 a month in child support for the son and has no other income.

For PE4PW purposes, the number of persons in the pregnant applicant's household is three: The applicant, unborn child and the existing child. The applicant's boyfriend and his income are not counted because they are not married. The applicant's \$250 a month child support is not counted as income and thus the applicant's income is \$0. The applicant's income of \$0 is at or below the monthly 213 percent amount for the family size and meets the income criteria for PE4PW. If the applicant's pregnancy test is positive or the applicant self-attests to pregnancy, the applicant is eligible.

Pregnancy Test

The applicant is not required to take a pregnancy test. Applicants can self-attest to pregnancy.

Positive Result

If the applicant meets the residency and income criteria for PE4PW, and requests a pregnancy test and the result is positive, the applicant is eligible to receive PE4PW.

Negative Result

If the applicant requests a pregnancy test and the result is negative, the applicant is not eligible for PE4PW going forward, but the office visit and pregnancy test are eligible for reimbursement under PE4PW. The applicant may apply for health insurance affordability programs, including Medi-Cal even if the applicant is not eligible for PE4PW.

Eligibility Limitations

Eligibility for PE4PW is limited to once per pregnancy. If PE4PW is granted to an applicant and the applicant does not apply for a health insurance affordability plan, including Medi-Cal, or if the applicant is determined to be ineligible for Medi-Cal, the applicant should not be re-evaluated for the PE4PW program during that pregnancy. If the applicant is determined to be ineligible for Medi-Cal, providers may arrange for private payments.

When determining eligibility, providers should ensure all items on the *Application for Presumptive Eligibility for Pregnant Women Program* form are complete and legible before entering the information into the PE4PW web portal. The applicant's and each family member's full name, relationship, and the family's gross monthly income must be included.

Billing

CPT® and HCPCS codes used to bill for PE4PW services are in the *Presumptive Eligibility for Pregnant Women: Billing Codes* section of this provider manual.

Non-Benefits

Inpatient services, delivery services and family planning services are not included in the scope of benefits for PE4PW patients.

If an applicant needs a procedure that is not a PE4PW benefit, the applicant can apply for retroactive Medi-Cal benefits, which will cover those services if eligible.

Applying for Participation as a Qualifying Provider

To become a QP, providers complete the *Qualified Provider Application for Presumptive Eligibility Participation and Presumptive Eligibility Qualified Provider Responsibilities and Agreement* (MC 311) form. For additional information, refer to the *Presumptive Eligibility for Pregnant Women Provider Enrollment Instructions* section in this provider manual.

Forms

The following forms are available for download on the Medi-Cal website.

- MC 264: *Presumptive Eligibility for Pregnant Women Patient Fact Sheet*
- MC 311: *Qualified Provider Application for Presumptive Eligibility Participation*
- MC 0026 *Medi-Cal Order Form* (form used to order copies of the single streamline application)

PE4PW Support

General questions regarding the PE program may be directed Unit to the PE4PW Support Unit at PE@dhcs.ca.gov.

<<Legend>>

<<Symbols used in the document above are explained in the following table.>>

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