



## Pregnancy Coverage Quick Guide Certified Enrollers

### Pregnant Women Have Coverage Options

Pregnant women have multiple coverage options when applying on [CoveredCA.com](https://coveredca.com) or when reporting changes in CalHEERS. These options include Medi-Cal for Pregnant Women, the Medi-Cal Access Program (MCAP), and Covered California Health Plans.

When applying for coverage on [CoveredCA.com](https://coveredca.com), pregnant women are **first** evaluated for their eligibility for Medi-Cal and MCAP based on the *monthly* Modified Adjusted Gross Income (MAGI) of their household (the number of expected babies is included in the household size for Medi-Cal).

New applicants who are pregnant with a household income up to 213% of the Federal Poverty Level (FPL) will be determined eligible for Medi-Cal. Pregnant women whose household income is over 213% and up to 322% FPL are eligible for MCAP, or may elect coverage with a Covered California Health Plan during open enrollment or if they have a qualifying life event for special enrollment.

While it is not necessary to report a pregnancy to Covered California, it is necessary to report the birth of a baby to Medi-Cal, MCAP, or Covered California so that eligibility can be re-determined for the household.

### Pregnancy Coverage by Federal Poverty Level (FPL)



### Medi-Cal for Pregnant Women (M9)

Previously was a restricted-scope aid code for pregnancy services only, and not considered Minimum Essential Coverage (MEC). **It is now considered MEC and covers all the same services full-scope Medi-Cal offers.**

- Household monthly income over [138% and up to 213% FPL](#).
- Eligibility ends at the end of the month of the 60 days after the birth of the baby (or end of pregnancy)
- Women must report a birth or end of pregnancy to their County Eligibility Worker within 30 days, at which time eligibility will be re-determined.
- For current Covered California health plan consumers, reporting a pregnancy will re-evaluate eligibility for the pregnant consumer using the above FPL range. **Unless an existing Covered California consumer wants to switch to Medi-Cal or MCAP, reporting a pregnancy is not necessary nor recommended.** If a break in coverage results from reporting a pregnancy, contact the [Covered California Service Center](#).
- Consumers who are interested in switching coverage from Covered California to Medi-Cal can call the Covered California Service Center to have their eligibility re-evaluated.



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### Medi-Cal Access Program (MCAP)

- Household monthly income between [213% and up to 322% FPL](#).
- Must be a resident of California and agree to pay 1.5% of the household MAGI as a subscriber contribution.
- Consumer's information is automatically sent from CalHEERS to the MCAP program (not the local county) and enrollee will be contacted to complete the enrollment.
- Pregnant consumers who are eligible for MCAP are allowed to switch to Covered California during open enrollment or if they have a [Qualifying Life Event \(QLE\)](#) for [special enrollment](#).
- Consumers can contact the MCAP program at their website <http://mcap.dhcs.ca.gov> or at 800-433-2611 for any questions about the program or to check the status of an application.