

Presumptive Eligibility for Pregnant Women Program

PATIENT FACT SHEET

What is Presumptive Eligibility (PE)?

PE is immediate, temporary pregnancy related health care for low-income women.

Who is eligible for PE?

Any woman who thinks she is pregnant and whose family income is under a certain amount is eligible for PE. (For example, from April 2009 to March 2010, monthly income is \$2429 for a family size of two; a pregnant woman counts as two.) You must apply through a participating PE provider. Ask your health care provider if they offer PE. PE coverage starts the day of your first health care visit.

How long can I get PE?

PE is good for the month you apply and all of the following month. Your PE card will have the exact end date written on it. Your PE will end on that date unless you apply for Medi-Cal. You must bring proof of your Medi-Cal application to your PE provider to extend your PE coverage. You only need to bring the proof one time. Your PE will be extended until you get your plastic Medi-Cal card in the mail or the county denies your application.

What health care does PE cover?

PE pays for pregnancy related care, including abortion and miscarriage. Most doctor, clinic, and emergency room visits are covered. Prenatal vitamins and most medications are covered. PE covers some dental and mental health visits related to pregnancy. PE does NOT cover hospital labor and delivery care or any other hospital in-patient care.

What if I get bills for health care services?

You might get care that PE does not pay for. **Apply for Medi-Cal before your PE ends OR within three months of the date of the service (NOT the date of the bill—that might be too late).** Answer “yes” to the question on the Medi-Cal application form about medical expenses in the last three months, even if you have not received any bills yet. If you do not want Medi-Cal after PE because you had a miscarriage or for any other reason, you should still apply and check “yes” for the three-month Medi-Cal coverage. Medi-Cal may cover health care received during the three months before your Medi-Cal application that PE does not cover.

What if I have already paid for my health care?

After you apply and get Medi-Cal, ask your provider to bill Medi-Cal and give you back your money. If the provider will not, call or write the Medi-Cal Program in Sacramento about the *Conlan* Beneficiary Reimbursement Program.

For Medical Claims
Department of Health Care Services
Beneficiary Services
P.O. Box 138008
Sacramento, CA 95813-8008
(916) 403-2007
TDD: (916) 635-6491

For Dental Claims
Denti-Cal
Beneficiary Services
P.O. Box 526026
Sacramento, CA 95852-6026
(916) 403-2007
TDD: (916) 635-6491

IF YOU WOULD LIKE PE OR TO APPLY FOR MEDI-CAL, ASK YOUR PROVIDER.