



Pregnancy Coverage: Medi-Cal, AIM, and Covered California

Pregnancy is an important time for women to get the medical care they need. In California, there are several options for uninsured pregnant women to get health coverage. These options include Medi-Cal, Access for Infants and Mothers (AIM), and Covered California.

Medi-Cal and AIM enroll new members throughout the year, whereas Covered California has an open enrollment period, which closed on March 31, 2014 and will re-open in the fall of 2014. Until then, individuals must experience a “qualifying life event” to be able to enroll in a Covered California health plan. Pregnancy is not considered a qualifying life event for special enrollment, but there are other reasons that may qualify for special enrollment in Covered California.

Read more to see which program might be right for you.

Full-Scope Medi-Cal

If you are pregnant at the time you apply (citizen or qualified alien), you may be able to enroll in full-scope, no-cost Medi-Cal. This coverage includes general medical care, prenatal care and labor and delivery, and also dental care. The newborn is automatically eligible for Medi-Cal at birth with no family income limit for the first year of life.

Eligibility for full-scope Medi-Cal depends on your household income, and whether you have dependent children in the home or meet other requirements, such as being disabled. Check the 2014 monthly income table below to see if you qualify.

	With dependent children in the home	No dependent children in the home	
Family Size	Monthly Income (≤ 109% FPL)	Monthly Income Any Trimester (≤60% FPL)	Monthly Income Trimester 3 Only (≤109% FPL)
2 (applicant + unborn)	\$1494	\$786	\$1428
3	\$1880	\$989	\$1797
4	\$2266		
5	\$2651		
6	\$3037		

If you were enrolled in full-scope Medi-Cal before getting pregnant, you remain in full-scope with income up to 138% of poverty (FPL) regardless of whether you have dependent children in the home. FPL stands for “federal poverty level” and it is a measure of income level published annually by the federal Department of Health and Human Services. Federal poverty levels are used to determine your eligibility for certain programs and benefits.



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Pregnancy-Related Medi-Cal

If you do not qualify for full-scope Medi-Cal, pregnancy-related Medi-Cal may be an option. This coverage includes prenatal care and labor and delivery, dental care, and certain other qualifying medical services. Postpartum coverage is also included and lasts until the end of the month of the 60th day following the end of the pregnancy. The newborn is automatically eligible for Medi-Cal at birth with no family income limit for the first year of life. Your immigration status does not matter.

Eligibility for pregnancy-related Medi-Cal depends on your household income. Check the 2014 monthly income table below to see if you qualify.

Family Size	Monthly Income (≤213% FPL)
2 (applicant + unborn)	\$2792
3	\$3512
4	\$4233
5	\$4954
6	\$5674

Women in pregnancy-related Medi-Cal may also enroll in Medi-Cal’s “share of cost” program for care that is not pregnancy-related and be in both of these Medi-Cal programs at the same time. “Share of cost” is not a premium or other monthly payment. Instead, it is an amount that you are responsible for paying if you use medical services that aren’t pregnancy-related.

It is also possible to be eligible for pregnancy-related Medi-Cal and a Covered California health plan, but you are not required to enroll in both programs. Below are some factors to consider when deciding between Medi-Cal or a Covered California plan:

- What coverage does your clinic or obstetrician accept?
- What hospital will accept your coverage for labor and delivery?
- What is the monthly premium for coverage?
- What pregnancy services are included and at what cost? For example, is there a copay or coinsurance for labor and delivery or any postpartum care?
- What are the costs and plan options for the baby’s coverage during the first year?

Whether you choose pregnancy-related Medi-Cal or Covered California, you will not have to pay a tax penalty. If you enroll in both, you will not be able to use Medi-Cal for your pregnancy-related care unless you pick a Covered California plan that includes Medi-Cal providers. So choose the best option for you based on cost and the availability of doctors and services.

Your local clinic or county Medi-Cal office can help you apply for Medi-Cal.



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Medi-Cal and Newborns

Whether you enroll in pregnancy-related or full-scope Medi-Cal, the newborn is automatically eligible for Medi-Cal at birth with no family income limit for the first year of life.

To get the newborn's own Medi-Cal number and card, be sure to notify Medi-Cal when your pregnancy ends by calling your county Medi-Cal office or completing and returning the Newborn Referral Form, or updating your online account.

When your pregnancy ends, you may be eligible for free Medi-Cal or a Covered California plan with tax credits depending on your family size and household income at that time.

Access for Infants and Mothers (AIM)

AIM covers pregnant women with household incomes over 213% and up to 322% FPL. Immigration status doesn't matter. Women may also qualify if they have private insurance with a maternity-only copayment, deductible, or coinsurance of \$500 or more. See the table below, for 2014.

Family Size	Monthly Income (>213% - ≤322% FPL)
2 (applicant + unborn)	\$2793 - \$4220
3	\$3513 - \$5310
4	\$4234 - \$6399
5	\$4955 - \$7489
6	\$5675 - \$8578

AIM offers low-cost comprehensive coverage, with no copayments, deductibles, or coinsurance. Postpartum coverage is also included and lasts until the end of the month of the 60th day following the end of the pregnancy. In addition, the newborn is automatically eligible for Medi-Cal at birth with no family income limit for the first year of life; in the second year, the infant remains eligible for Medi-Cal with income up to 322% FPL, instead of only 266% FPL, which is the Medi-Cal income limit for other children.

Be sure to notify AIM when your pregnancy ends by completing the appropriate form to register a newborn or in the case of pregnancy loss. You may be eligible for free Medi-Cal or a Covered California plan with tax credits depending on your family size and household income at that time. To learn more about AIM and apply, visit aim.ca.gov (800) 433-2611.

Covered California

All Covered California health plans include prenatal care and labor and delivery services, in addition to a full set of essential health benefits, including postpartum care and breastfeeding support, supplies, and counseling. When considering different Covered California plans, be sure to compare copayments, deductibles, or coinsurance to choose the plan that is right for you. Tax credits are available to lawfully present applicants who are not eligible for other minimum



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essential coverage through a government program (such as full-scope Medi-Cal) or through an employer, and have household incomes at or above 100% through 400% FPL. Cost sharing subsidies are also available to applicants with household incomes at or above 100% through 250% FPL. Unlike Medi-Cal and AIM, Covered California considers a pregnant woman to be a household size of 1. See the table below.

Once you deliver your baby, be sure to notify Covered California to enroll your newborn in health coverage. You or the baby may be eligible for Medi-Cal, or a different amount of tax credits at that time. Either way, the baby's coverage takes effect on the date of birth.

Check the table below, to see if you may be eligible.

Family Size	Monthly Income (100% - 400% FPL)
1 (pregnant applicant, unmarried, no dependents)	\$958 - \$3830
2	\$1293 - \$5170
3	\$1628 - \$6510
4	\$1963 - \$7850
5	\$2298 - \$9190

To apply for Covered California, [click here](#) or call (800) 300-1506.

The table below gives a snapshot of the different coverage programs for pregnant applicants discussed above.

Citizens/Qualified Aliens (or Lawfully Present for Covered California)	
No Dependents in the Home	Dependents in the Home
<ul style="list-style-type: none"> • Pregnancy-related Medi-Cal up to 213% FPL 	<ul style="list-style-type: none"> • Pregnancy-related Medi-Cal up to 213% FPL
<ul style="list-style-type: none"> • Full-scope Medi-Cal up to 60% FPL (any trimester) • 109% FPL (third trimester only) 	<ul style="list-style-type: none"> • Full-scope Medi-Cal up to 109% FPL
<ul style="list-style-type: none"> • Covered California 100% - 400% FPL 	<ul style="list-style-type: none"> • Covered California 100% - 400% FPL
<ul style="list-style-type: none"> • AIM >213%-322% FPL 	<ul style="list-style-type: none"> • AIM >213%-322% FPL
Not Citizen/Qualified Alien/Lawfully Present (Undocumented)	
<ul style="list-style-type: none"> • Pregnancy-related Medi-Cal up to 213% FPL 	
<ul style="list-style-type: none"> • AIM >213%-322% FPL 	