Date of Hearing: April 25, 2023

# ASSEMBLY COMMITTEE ON HEALTH Jim Wood, Chair AB 1481 (Boerner) – As Amended, 2023

**SUBJECT**: Medi-Cal: presumptive eligibility.

**SUMMARY**: Requires the Department of Health Care Services (DHCS), for a pregnant person covered under the Presumptive Eligibility for Pregnant Women (PE4PW) program who applies for full-scope Medi-Cal benefits within 60 days of receiving a presumptive eligibility determination, to ensure the pregnant person is covered under the PE4PW program until the pregnant person is either enrolled in full-scope Medi-Cal benefits or has received a written denial notice in response to their application for full-scope Medi-Cal benefits, and renames the program as Presumptive Eligibility for Pregnant People (PE4PP).

### **EXISTING LAW:**

- 1) Establishes the Medi-Cal Program, administered by DHCS, to provide comprehensive health benefits to low-income individuals who meet specified eligibility criteria. [Welfare and Institutions Code (WIC) § 14000 et seq.]
- 2) Requires DHCS to implement the federal option to grant presumptive eligibility for a Medi-Cal temporary benefits program that covers prenatal services for pregnant women (PE4PW). [WIC § 14148.7]
- 3) Establishes the PE4PW option under federal law and specifies that the program covers ambulatory prenatal care. [42 U.S. Code § 1396r–1]

FISCAL EFFECT: Unknown. This bill has not yet been analyzed by a fiscal committee.

### **COMMENTS**:

1) PURPOSE OF THIS BILL. According to the author, this bill implements a recommendation from the Future of Abortion (FAB) Council report, ensuring pregnant people who qualify for pregnancy-related presumptive eligibility for Medi-Cal retain eligibility until their application for full Medi-Cal coverage is adjudicated. The author states this bill also renames the program from PE4PW to PE4PP to make the program name more inclusive of individuals who may become pregnant but who do not identify as women.

### 2) BACKGROUND.

a) PE4PW. DHCS administers the PE4PW program, which provides immediate, temporary ambulatory prenatal health care, including abortion and miscarriage, related to pregnancy for low-income pregnant people. 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. The program is designed to ensure immediate access to a limited range of services important for pregnant people. The program allows qualified providers to grant immediate, temporary Medi-Cal coverage for ambulatory prenatal care and prescription drugs for conditions related to pregnancy to low-income pregnant applicants at or below

213% of the federal poverty level, based on self-attested information collected by the provider from the applicant, pending their formal Medi-Cal application.

To qualify for the PE4PW Program, the applicant must be a California resident, not currently enrolled in Medi-Cal, meet the income and household composition requirements, and not have had a PE enrollment for the current pregnancy. Providers are required to provide beneficiaries of the PE4PW Program with an insurance affordability program application, which allows them to apply for Medi-Cal or subsidized coverage through Covered California. PE4PW beneficiaries must submit a completed application no later than the last day of the month following the month in which presumptive eligibility was granted.

b) California FAB Council Report. In September 2021, more than 40 organizations joined together to form the FAB Council. Sexual and reproductive health care providers, reproductive rights and reproductive justice advocacy organizations, legal and policy experts, researchers, and advocates, as well as representatives from the Office of Governor Newsom and legislative leaders, convened to identify barriers to abortion services and reproductive health care. The Council made a number of policy recommendations to improve equitable and affordable access to abortion care for Californians and all who seek care in the state. The Council cited several institutional and administrative barriers that stand in the way of reproductive freedom.

Specific to this bill, one of the Council recommendations called to modernize the PE4PW program. According to the report, while the program does provide vital access to timesensitive services, some aspects of the program, including eligibility requirements, coverage limitations, and a web-based enrollment system that frequently experiences technical difficulties must be updated to ensure that patients receive timely care and equitable access to services available for enrollees in full-scope Medi-Cal, and that providers are adequately reimbursed for services provided to PE4PW patients. DHCS has administrative authority to address changes to the web-based enrollment system and to add coverage of specific codes as needed to update the program to address ambulatory prenatal care services not specifically identified as covered benefits. Current Medi-Cal policy, as communicated in a DHCS All-County Welfare Directors Letter, stipulates to the extent an insurance affordability application is submitted during the PE4PW period, a beneficiary's PE4PW coverage can be extended pending the Medi-Cal determination. However, this eligibility policy is not established in statute. This bill would establish this policy as a statutory protection and ensure continuous eligibility for all individuals who submit an application within the 60-day time period.

3) SUPPORT. The California Legislative Women's Caucus, California Hospital Association, California Nurse Midwives Association, and NARAL Pro-Choice California express support for this bill. The California Legislative Women's Caucus states PE4PW provides a pregnant person with a low-income immediate, temporary coverage for up to 60 days while they are applying for full-scope Medi-Cal, but it often can take longer than 60 days for a Medi-Cal application to be approved and, in that time, PE4PW coverage can lapse leading to a gap in coverage. The California Legislative Women's Caucus indicates many people are then left without coverage and either have to pay out of pocket for services, or forgo medical care entirely while they wait for their Medi-Cal determination. Supporters also indicate this bill

would also update the program name to a gender-neutral term that is more inclusive to non-binary, transgender, and gender, non-conforming Californians.

4) **PREVIOUS LEGISLATION.** AB 2729 (Bauer-Kahan) of 2020 would have expanded the presumptive eligibility for pregnant women to all pregnant people; renamed the program; made a presumptively eligible pregnant person eligible for coverage of all medical care, services, prescriptions, and supplies available under the Medi-Cal program, except for inpatient services and institutional long-term care; required DHCS to ensure that a pregnant person receiving coverage under PE4PP who applies for full-scope Medi-Cal benefits within 60 days receives coverage under PE4PP until their full-scope Medi-Cal application is approved or denied; and allowed a pregnant individual under 26 years of age who can consent to services without parental approval to receive presumptive eligibility by a qualified hospital. Due to the shortened Legislative calendar brought on by the COVID-19 pandemic, AB 2729 was not set for a hearing.

## **REGISTERED SUPPORT / OPPOSITION:**

## **Support**

California Hospital Association California Legislative Women's Caucus California Nurse Midwives Association NARAL Pro-choice California

# **Opposition**

None on file.

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