
SENATE COMMITTEE ON HEALTH

Senator Dr. Susan Talamantes Eggman, Chair

BILL NO: AB 1481
AUTHOR: Boerner, Bauer-Kahan
VERSION: April 20, 2023
HEARING DATE: July 12, 2023
CONSULTANT: Jen Flory

SUBJECT: Medi-Cal: presumptive eligibility

SUMMARY: Renames the “Presumptive Eligibility for Pregnant Women (PE4PW)” program the “Presumptive Eligibility for Pregnant People (PE4PP)” program. Requires the Department of Health Care Services 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.

Existing federal law: Authorizes a state to include in its Medicaid state plan the provision of ambulatory prenatal care to a pregnant woman during a presumptive eligibility period. [42 USC §1396r-1]

Existing state law:

- 1) Establishes the Medi-Cal program, administered by the Department of Health Care Services (DHCS), under which qualified low-income individuals receive health care services. [WIC §14000, et seq.]
- 2) Requires DHCS to implement the federal option to grant presumptive eligibility for a Medi-Cal temporary benefits program, PE4PW, that covers prenatal services for pregnant women. [WIC §14148.7]
- 3) Requires a simplified form to determine eligibility for pregnant women under the PE4PW program to grant eligibility for temporary benefits when the woman visits a provider until such time a county can make the final eligibility determination for the Medi-Cal program. [WIC 14148.03]

This bill:

- 1) Renames the PE4PW program the PE4PP program and makes conforming changes replacing “woman” or “women,” with “person” or “people.”
- 2) Requires 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.

FISCAL EFFECT: According to the Assembly Appropriations Committee, this bill has costs of an unknown amount to DHCS, likely in the hundreds of thousands to low millions of dollars, to make systems and policy changes, create and disseminate guidance to providers, and extend coverage until an applicant receives a full-scope Medi-Cal eligibility determination (General Fund, federal funds).

PRIOR VOTES:

Assembly Floor:	66 – 1
Assembly Appropriations Committee:	12 - 0
Assembly Health Committee:	13 - 0

COMMENTS:

- 1) *Author's statement.* According to the author, this bill requires DHCS to ensure a pregnant person is covered under the PE4PW program until that person has either enrolled in full-scope Medi-Cal or has received a written denial notice in response to their application for full-scope Medi-Cal if that person applied for full-scope Medi-Cal within 60 days of receiving a presumptive eligibility determination. This bill also renames the PE4PW program as the PE4PP program. The program provides coverage for all pregnant patients with low-incomes, regardless of gender. The current name can seem alienating to non-binary, transgender, and gender non-conforming pregnant people and does not accurately reflect the inclusiveness of the program.
- 2) *PE4PW.* According to DHCS, the PE4PW program allows qualified providers to grant immediate, temporary Medi-Cal coverage for ambulatory prenatal care (including abortion and miscarriage) and prescription drugs for conditions related to pregnancy to low-income, pregnant patients, pending their formal Medi-Cal application by submitting a simplified application through an online portal. While most doctor, clinic, and emergency room visits are covered, PE4PW does not cover hospital labor and delivery care or other hospital in-patient care. Participants must file a full Medi-Cal application for coverage of these hospital services. The PE4PW program is designed for low-income California residents who believe they are pregnant and who do not have Medi-Cal coverage for prenatal care. Applicants must be California residents with a household income below 213% of the federal poverty level, and have not already used a presumptive eligibility period during the current pregnancy.
- 3) *California Future of Abortion Council (CA FAB Council).* According to the CA FAB Council website, in September 2021 it convened to identify the most pressing barriers to care for patients seeking abortion services in California. More than 40 organizations representing sexual and reproductive health care providers, reproductive rights and reproductive justice advocacy organizations, legal and policy experts, researchers, and advocates, with the support of California policymakers, joined together to recommend policy proposals supporting equitable and affordable access to abortion care for Californians and all who seek care here. The CA FAB Council initially provided 45 policy recommendations, and published an addendum in December of 2022 updating on the progress of those recommendations and adding an additional 16 recommendations. This bill seeks to implement one of those updated recommendations, specifically to modernize the PE4PW program. The report stated that while the program does provide vital access to time sensitive 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, equitable access to services available for enrollees in full-scope Medi-Cal, and that providers are adequately reimbursed for services provided to PE4PW patients. This bill addresses one particular issue in that individuals who enroll in PE4PW sometimes experience a gap in coverage once the presumptive eligibility period ends and their Medi-Cal begins.

- 4) *Prior legislation.* AB 2729 (Bauer-Kahan of 2020) had provisions identical to this bill and also clarified the scope of services in the PE4PP program and made individuals under age 26 who can consent to services without parental approval eligible to receive the services from a qualified hospital. *Due to the shortened Legislative calendar brought on by the COVID-19 pandemic, AB 2729 was not set for a hearing.*

SB 24 (Figueroa, Chapter 895, Statutes of 2003) simplifies the PE4PW application process and requires DHCS to adopt a process to transfer PE4PW applications to the county for the necessary follow up to complete a full Medi-Cal application.

AB 501 (Margolin, Chapter 1127, Statutes of 1992) establishes the PE4PW program with the stated intent to avoid delays in perinatal care to low-income pregnant women.

- 5) *Support.* The California Legislative Women's Caucus, California Hospital Association, California Nurse Midwives Association, NARAL Pro-Choice California and two unions express support for this bill. The California Hospital Association states that this bill would protect continuity of care by preventing gaps in coverage while a beneficiary who is enrolled through presumptive eligibility awaits their full eligibility determination and enrollment into the standard Medi-Cal program. 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 transgender and gender non-conforming Californians.
- 6) *Support if amended.* Maternal and Child Health Access write a support if amended letter expressing support for the intent of this bill in ensuring there are no gaps in coverage but stating that the bill should be expanded to include the Medi-Cal Access Program (MCAP). The Medi-Cal Access Program covers pregnant individuals with incomes between 213-322% of the poverty level. This would capture both those eligible for MCAP as well as those eligible for Medi-Cal but whose current income is verified at a higher income level due to outdated databases that are used to verify income electronically.
- 7) *Amendments.* After meeting with DHCS regarding this bill and efforts to ensure that PE4PP enrollees have access to any Medi-Cal covered service, the author has asked that the following amendment be added to ensure that pregnant people in the PE4PP program know how to expedite their Medi-Cal applications:

(d) The department shall require providers participating in the PE4PP program to provide information to pregnant persons enrolled in PE4PP on how to contact their county to expedite a Medi-Cal application.

SUPPORT AND OPPOSITION:

Support: American College of Obstetricians and Gynecologists District IX
 American Federation of State, County, and Municipal Employees, AFL-CIO
 Attorney General Rob Bonta
 California Association of Public Hospitals & Health Systems
 California Health+ Advocates

California Hospital Association
California Legislative Women's Caucus
California Nurse Midwives Association
California State Council of Service Employees International Union
NARAL Pro-choice California
Planned Parenthood Affiliates of California
San Francisco City Attorney's Office

Oppose: None received.

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