



ACA/FAMILY MEDICAID 201-11 Qualified Pregnant Woman

Supersedes: FMA 201-3 (01/01/08)

Reference: ARM 37.82.101, .701 and 1101; 42 CFR 435.116; 42 USC 1396b

Overview: Pregnant women whose countable income exceeds the allowable limit for categorically needy Medicaid coverage may be eligible for medically needy coverage under the Qualified Pregnant Woman (QP) program. Once a spend down is established, it cannot be increased. If income decreases, the spend down must also be decreased, and must remain at the lower amount, as long as there isn't a break in Medicaid eligibility.

EMANCIPATION:

A child who is emancipated by court action or marriage is no longer considered a dependent child. Do not include an emancipated pregnant minor's parents in the filing unit.

NON-FINANCIAL CRITERIA:

Medicaid standard nonfinancial requirements are listed in section CMA 300. In addition to the standard criteria that applies to all Medicaid programs, the following nonfinancial criteria are specific to Qualified Pregnant Woman:

- Must be a pregnant woman (self-attestation is acceptable verification)

FILING UNIT:

The Qualified Pregnant Woman's filing unit must include the following:

1. Pregnant woman;
2. Unborn child;
3. Unborn's father (if living in the same home) and
4. Pregnant woman's spouse (if living in the same home).

The following individuals are not required, but may be included in the QP filing unit:

1. Minor siblings of either the pregnant woman or unborn; and
2. Pregnant woman's minor stepchildren.

If the QP woman is under age 19, lives with her natural/adoptive parents and is not married (or otherwise emancipated), the following must also be included in her filing unit:

1. Pregnant woman's natural/adoptive parents; and
2. Pregnant woman's stepparents (stepparent income is deemed – see CMA 603-1).

NOTE: Medical bills of all individuals whose income is included in the eligibility determination can be used to reduce/meet the QP spend down.

Effective Date: July 01, 2016