

D. OTHER CHANGES

When a client is found eligible for coverage in the Adult Group, the approval notice informs the client of the option to report changes, including a pregnancy. When a woman reports a pregnancy, coverage is opened in the Pregnant Women Group beginning the following month if otherwise eligible. Coverage will also remain open in the Adult Group as a dual code in the data system.

NOTE: Back-dating does not apply in this situation.

The client receives the same benefits and protections while receiving Adult Group as if receiving Pregnant Women coverage only, including:

- Co-pay exclusions;
- Coverage will not be impacted by changes in income or household composition;
- Exemption from cooperation requirements with the Bureau of Child Support Enforcement; and
- 60-day post-partum coverage.

If a change is reported during the pregnancy that would make the client ineligible for the Adult Group, the Adult Group coverage would end and the client would continue to receive coverage under the Pregnant Women Group through the 60-day post-partum period.

Redetermination for the Adult Group will occur on the regularly scheduled review date. If at that time the client is still pregnant, the Adult Group coverage will close and the client will continue to remain in the Pregnant Women coverage group throughout the post-partum period.