

Virginia Department of Social Services  
Medicaid Fact Sheet #32  
**PREGNANT WOMEN**

The following information is given as a guideline only. For Medicaid eligibility to be determined, an application must be filed with the local department of social services in your locality.

The Pregnant Women category is for pregnant women of any age.

The local department of social services must have certain information to determine your eligibility for Medicaid. If the required information is taken to the agency or mailed with the application form, the processing time could be shortened. To be eligible for Medicaid as a Pregnant Woman you must:

- Be a resident of Virginia. Your statement will be accepted unless there is reason to question it.
- Be a United States citizen or meet the immigration status requirements for Medicaid. Citizenship and identity or immigration status must be verified.
- Have a Social Security number or show proof of application for a Social Security number.
- Provide the estimated date of your delivery.
- Provide information about the status you use to file your federal income tax return.
- Assign all rights to medical support and payment of medical care from any third party to the Department of Medical Assistance Services (DMAS). This includes providing identifying information about other health insurance you have to the eligibility worker. Also, you must notify DMAS if you receive money meant to cover medical expenses, such as a settlement resulting from a lawsuit, and send DMAS any funds received for medical care that was already paid for by Medicaid.
- Have income below specified levels. Your income and the income of your spouse and children may be counted. Electronic data verification sources including the Federal HUB may verify your income. If your income cannot be verified through the data match, you will be asked to provide verification, such as a pay stubs or a written statement from the employer. Other income must be verified by an appropriate source. Increases in income after the date you are found eligible for Medicaid are not counted.
- Resources, such as real and personal property, are not counted for the Pregnant Woman Medicaid program.

**Pregnant Women Income Limits  
(143% of FPL)  
January 17, 2020**

Medicaid Household Size	Annual	Monthly
A pregnant woman always counts as 2	\$24,654	\$2,055
3	31,060	2,589
4	37,466	3,123
5	43,873	3,657
6	50,279	4,190
7	56,686	4,724
8	63,092	5,258
Each Additional Person Add	6,407	534

If all citizenship and other eligibility factors are met in the month you apply for Medicaid as a Pregnant Woman, eligibility for this program will begin the first day of the application month and you may be entitled to a three month retroactive determination.

One Medicaid has been approved as a Pregnant Woman, coverage continues for two months past the date of delivery. Newborns born to a Medicaid eligible Pregnant Woman are eligible until their 1<sup>st</sup> birthday. After their 1<sup>st</sup> birthday, they will require a redetermination of eligibility for further coverage.

You can file an application for Medicaid online at [www.commonhelp.virginia.gov](http://www.commonhelp.virginia.gov) or by calling the **CoverVA Call Center at 855-242-8282**. Applications are also available online at [http://www.dss.virginia.gov/benefit/medical\\_assistance/forms.cgi](http://www.dss.virginia.gov/benefit/medical_assistance/forms.cgi), and can be completed and mailed/faxed/ or dropped off to the local department of social services. You can also request a Medicaid application be mailed to you.

You can find the address and phone number for your local DSS at <http://www.dss.virginia.gov/localagency/>. You do not need to visit the office to file an application.

If you have questions or need assistance in completing your Medicaid application, contact your local department of social services or the **CoverVA Call Center at 855-242-8282**.

MEDICAID FACT SHEET #32 PREGNANT WOMEN

FORM NUMBER – D032-03-0834-29-eng (01/19)

PURPOSE OF FORM – Is to provide information about Medicaid eligibility requirements for pregnant women.

USE OF FORM - Local agency workers will distribute this form to individuals inquiring about assistance for pregnant women and to pregnant women.

NUMBER OF COPIES - One

DISPOSITION OF FORM - One per inquirer.

INSTRUCTIONS FOR PREPARATION OF FORM - The form does not require the addition of any information by the eligibility worker.