

Article 4  
Maternal Child Health Program Eligibility  
Standards for Prenatal Patients

- §1401. Program Requirements.
- §1402. Income Asset Limitations.
- §1403. Application.
- §1404. Eligibility Periods.
- §1405. Issuance of MCH Program Authorization Card.
- §1406. Selection of Physician.

**NOTE:** Rule-making authority originally cited for formulation of regulations for the Maternal Child Health Program Eligibility Standards for Prenatal Patients by the Department of Public Health and Social Services, §9701 Chapter 9, Article 7, 10 GCA. These Rules and Regulations were filed with the Legislative Secretary on May 6, 1988.

**§1401. Program Requirements.** To be eligible for coverage for the Maternal Child Health Program maternity care services, the client must be a resident of Guam who applies for and qualifies for services as determined by the MCH Program eligibility standards according to the following criteria:

- (a) Is not eligible for Medicaid (MAP) or Medically Indigent Program (MIP) coverage;
- (b) Has neither medical insurance coverage nor the financial ability to pay for medical services as determined by the MCH Program;
- (c) Has income resources which exceed MIP eligibility requirements, but within the MCH eligibility requirements;

**§1402. Income Asset Limitations.** The following chart indicates the monthly income and resource limitations of all immediate family members (husband, wife and children). Liquid resources shall include: cash on hand, check or savings account amount, stocks or bonds, shares in credit union, lump sum payments, time certificates:

(1) Family Size	MIP Monthly Income Limitations	MCH Allowable Gross Income Monthly	MCH Resource Limitations
1	\$410	\$760	1200
2	542	892	1500
3	648	998	1650
4	754	1,104	1800
5	845	1,195	1950
6	935	1,285	2100
7	1,027	1,377	2250
8	1,106	1,456	2500
9	1,184	1,534	2650

26 GAR - PUBLIC HEALTH & SOCIAL SERVICES  
DIV. 1 - DIRECTOR OF PUBLIC HEALTH & SOCIAL SERVICES

10	1,264	1,614	2800
Additional Members	+60	+70	+150

(2) Total value of additional property (other than the one being lived on) shall not exceed \$30,000 based on the real estate tax assessment value. The property shall not be generating any income.

**§1403. Application.** The client can apply anytime during her pregnancy. She is required to complete the information and data sheet as required by the MCH Program and consent for release of information on cases denied for MIP.

**§1404. Eligibility Periods.** Eligibility period shall cover the present prenatal period (starts on the first prenatal visit) to postpartum (6 weeks after delivery).

**§1405. Issuance of MCH Program Authorization Card.** An MCH Program Authorization Card will be issued to the prenatal patient. The authorization card will indicate the authorization period coverage and name of authorized physician.

**§1406. Selection of Physician.** The MCH Office will designate the attending physician from a list of physicians contracted by the MCH Program. Selection of physician will be based on the next physician on the list.

DEPARTMENT OF PUBLIC HEALTH  
AND SOCIAL SERVICES  
GOVERNMENT OF GUAM  
MATERNAL CHILD HEALTH PROGRAM  
CONSENT FOR RELEASE OF MAP/MIP RECORDS

DATE: \_\_\_\_\_  
RE: \_\_\_\_\_  
DOB: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
SS#: \_\_\_\_\_

TO: Medicaid/Medically Indigent Program

I hereby authorize and request you to release to Maternal Child Health Program (MCH), Bureau of Community Health and Nursing Services copies of my application for medical assistance and any other information relating to my eligibility (as needed).

\_\_\_\_\_

Signature of Client or Guardian

Date: \_\_\_\_\_

WITNESS: \_\_\_\_\_

\_\_\_\_\_

## **WHAT IS MATERNAL CHILD HEALTH PROGRAM**

The Maternal and Child Health (MCH) Program is a Public Health Program that provides a plan for the development, implementation and evaluation of services related to improving the health status of women and children on Guam. The primary responsibility of the MCH Program is to assure access to quality health care for all mothers and children of Guam. To accomplish this responsibility, the Program offers a continuum of care that includes maternal and child health, as well as family planning services. All these services are provided within austerity budgets necessitating careful planning to provide the most cost effective and efficient MCH service. The Program encourages health care delivery methods which are comprehensive, interdisciplinary and stresses continuity of care. It also places a high value on services that are available, accessible and offers high quality health care to the mothers and children of Guam.

## **LEGAL BASIS**

The Maternal Child Health Services is a federally mandated program contained in the Social Security Act of 1935, PL 74-271 (Title V).

## **GENERAL SCOPE OF SERVICES**

The Maternal-Child Health Program provides quality prenatal, natal and postpartum care, as well as family planning services; and continuing health care maintenance and supervision of children from birth through infancy, childhood and adolescence. The target population are the low-income, high-risk, women and children.

## **MATERNITY CARE SERVICES**

1. Prenatal interview including risk assessment to determine high-risk pregnancy.
2. Prenatal laboratory tests per MCH standing order, at PH Laboratory.
3. Diagnostic procedures, x-rays and other special laboratory tests ordered by attending physician and authorized by MCH based on availability of funds.
4. Vitamins and iron supply at a Public Health Pharmacy or Public Health Clinic, per MCH standing order.
5. Referral to Medical Social Worker for screening and assistance identifying financial options for prenatal care coverage/service.
6. Early Prenatal Counseling Classes and Prepared Childbirth Classes (Lamaze).
7. Physicians' fees for prenatal clinic visits, hospital delivery and postpartum visit, routine hospital newborn care and 6-weeks post-partum clinic visit will be authorized by the MCH Program based on availability of funds.
8. Community Health Nursing follow-up during the prenatal and postpartum period (nursing clinic and home visits).

## **EXCLUSIONS.**

The following are services not covered by the MCH Program:

1. Cost of hospital rooms, laboratory, drugs and medical/surgical supplies.
2. Services not authorized by MCH, including emergency treatment.

3. Physician's fee for hospitalization and medical care other than the services authorized by the program.
4. Physician's fee of doctors not authorized by the program.
5. Cost of interrupted pregnancy and medical complications.