

Medi-Cal 101 – Answering Your Questions about Medi-Cal

FIND OUT WHAT MEDI-CAL HAS TO
OFFER AND SEE IF YOU CAN GET IT



*Coverage for
every stage of life™*



Many Californians are facing income changes due to COVID-19. The reduced income could be from working fewer hours, not having a job, or loss of employer health coverage. If this is you, you may want to learn about Medi-Cal and if you are able to get it. Use this brochure to help answer some of your questions about Medi-Cal and what it has to offer.

📍 My Medi-Cal Roadmap – Summary

APPLY FOR MEDI-CAL AND MAKE A PLAN TO BE HEALTHY

1. You can apply for Medi-Cal through CoveredCA.com, by mail, by phone or in person. Once you submit your application it will be sent to your local county human services agency. They will decide if you are able to receive Medi-Cal. Or, if more information is needed.
2. If you do qualify, you will receive a Medi-Cal benefits identification card (BIC) in the mail.
3. Select a health plan and pick a doctor.
4. Receive your ID card.
5. Start using your Medi-Cal benefits!



What benefits does Medi-Cal offer?

Medi-Cal benefits include:

- Case management
- Dental care
- Durable medical equipment
- Outpatient services
- Emergency services
- Hospitalization
- Hospice care
- Lab and radiology services, such as X-rays
- Mental health services
- Maternity and newborn care
- Nurse Advice Line
- Prescription drugs
- Transportation

And much more!



Medi-Cal 101 – Overview

Q. What is Medi-Cal?

Medi-Cal is a state health program that offers no-cost or low cost health coverage to California:

- Adults
- Families with children
- Seniors
- Persons with disabilities
- Pregnant women
- Children in foster care
- Former foster youth up to age 26

Qualified people can enroll in Medi-Cal year-round.



All children living in California that are able to get Medi-Cal can get Medi-Cal regardless of immigration status. Their complete health care coverage includes:



\$0 doctor visits

\$0 prescription drug coverage

\$0 monthly plan premiums

\$0 health education programs







\$0 vaccinations



Q. Why should I enroll in Medi-Cal?

Because health care is a part of life, Medi-Cal offers medical and dental coverage whether you can pay or not. Maintaining preventive health care can help you reach your best long-term health goals. Plus, access to health care can better affect your social skills, and your mental and physical health. It can also help to increase your overall standard of living.

Rest assured in knowing that health insurance through Medi-Cal is offered to all Californians who qualify.

 Keep your body and mind healthy with:	 Get help when sick or hurt with:	 Keep on smiling with:	 Plan & care for your pregnancy and baby:	 Get your medication with:	 Get a no-cost ride for:
<ul style="list-style-type: none"> • Health screenings • Vaccines • Routine health checkups • Behavioral health • Diet and exercise plans • Physical therapy • Dental and vision care 	<ul style="list-style-type: none"> • Primary care doctor's visit • Telehealth appointments • Urgent care • ER 	<ul style="list-style-type: none"> • Teeth cleaning • Emergency services • Fluoride treatment • Dental exam 	<ul style="list-style-type: none"> • Family planning • Pregnancy testing • Prenatal care • Vaccines and screening • Well-child visits and school physicals 	<ul style="list-style-type: none"> • No cost prescriptions 	<ul style="list-style-type: none"> • Medical appointments • Dental visits • Pharmacy • Dialysis and other sustained care • Therapist, including substance use help visits • Specialist appointments • Medical equipment pick up • Hospital discharge

Q. What are some Medi-Cal preventive care screenings?



- **Initial Health Assessment (IHA)** – Your family has better health when you are healthy. Your IHA includes an age-suitable history, physical exam and Individual Health Education Behavioral Assessment (IHEBA). Put wellness visits at the top of your list for your health and your family’s health.
- **Well-child visits and vaccinations** – It’s important to follow the American Academy of Pediatrics (AAP) well-care schedule. Well child visits and vaccinations help ensure your children’s health is taken care of before they get sick.
- **Teen visits and vaccinations** – It’s important to have teenagers get their checkups. Keep your teens healthy! Schedule a teen well child visit for their current and ongoing health.
- **Women’s health** – Mammograms can help detect lumps. Cervical cancer is slow growing so routine screenings are needed to stay healthy. Make a plan to be healthy and stick to it.
- **General health** – Includes complete diabetes prevention and care along with blood pressure control. Make preventive care a top goal and feel good about taking care of you.



Q. What is Federal Poverty Level?

The Federal Poverty Level (FPL) is a standard of measure. It’s used by the U. S. Department of Health and Human Services (DHHS) to find out if a person or family is able to receive government-controlled programs and services like Medi-Cal. FPL amounts are revised every year. They are published by many government agencies. You can visit the Department of Health Care Services (DHCS) website at www.dhcs.ca.gov/services/medi-cal/Pages/DoYouQualifyForMedi-Cal.aspx for the latest FPL information.

Program Eligibility by Federal Poverty Level for 2020

MEDI-CAL AND COVERED CALIFORNIA HAVE VARIOUS PROGRAMS WITH OVERLAPPING INCOME LIMITS

		California State Subsidy											
		Federal Tax Credit											
		American Indian / Alaska Native (AIAN) Zero Cost Share					AIAN Limited Cost Share						

Note: Most consumers up to 138% FPL will be eligible for Medi-Cal. If ineligible for Medi-Cal, consumers may qualify for a Covered California health plan with financial help including: federal tax credit, California state subsidy, Enhanced Silver plans and AIAN plans.



Medi-Cal Programs

Medi-Cal uses FPL limits of the current year to determine eligibility for its programs. The column headings shaded in purple are associated with eligibility ranges for Medi-Cal programs:

Medi-Cal for Adults	up to 138% FPL
Medi-Cal for Children	up to 266% FPL
Medi-Cal for Pregnant Women	up to 213% FPL
MCAP	over 213%–322% FPL
CCHIP	over 266%–322% FPL

The shaded columns display 2020 FPL values [according to the Department of Health Care Services](#) (see annual values on page 5) which administers the Medi-Cal program.



Q. How would I know if I am able to get reduced payments and cost sharing?

In order to get Medi-Cal, you must meet certain income, family size and age standards. In order to get Medi-Cal, a yearly income must be lower than 138% of the FPL. For a single person, that amount is \$1,467 per month (or \$17,609 per year). For a family of four the amount is \$3,013 per month (or \$36,156 per year).

Q. What if I am not able to get Medi-Cal?

For financial help – such as the federal tax credit or a California state subsidy – singles or families who are not able to get Medi-Cal may qualify for a Covered California health plan. Plans include:

- Enhanced Silver plans
- American Indian/Alaska Native (AIAN) plans

To see if you are able to get Medi-Cal visit

<https://www.coveredca.com/> and update your Covered California account.

Covered California Programs



Covered California uses FPL limits from the prior year to determine eligibility for its programs as required by regulation. The unshaded columns are associated with Covered California eligibility ranges:

California State Subsidy	0%–138% FPL / over 200%–600% FPL
Federal Tax Credit	100%–400% FPL
Enhanced Silver Plans	100%–250% FPL
• Silver 94	100%–150% FPL
• Silver 87	over 150%–200% FPL
• Silver 73	over 200%–250% FPL
AIAN Zero Cost Share	100%–300% FPL
AIAN Limited Cost Share	all income levels

The unshaded columns display 2019 FPL values to determine eligibility for premium tax credits and cost sharing reductions for health plans effective in 2020. The unshaded columns, including the 100% column, display 2019 FPL values as [published by the Department of Health and Human Services](#).





Q. Does unemployment insurance (UI) count as income?

Yes. You must report your expected UI payments when you apply for health coverage through Covered California. You will need to predict your income for the coverage year as best as you can when filling out your application. This will help Covered California make the estimate.

Note: CARES Act supplementary UI benefits – which can increase UI benefits by \$600 per week – does not impact whether or not you can get Medi-Cal programs.

Q. How do I apply for Medi-Cal?

You can apply for Medi-Cal by any of the methods listed below:

Method	How
 Mail	<p>Apply for both Medi-Cal and other health care plans through Covered California. You can use a single streamlined form. To get the form in the language you prefer, visit www.dhcs.ca.gov/services/medi-cal/eligibility/Pages/SingleStreamApps.aspx.</p> <p>Mail the finished form to:</p> <p>Covered California P.O. Box 989725 West Sacramento, CA 95798-9725</p>
 By phone	<p>Apply by calling your local county social services office. Or, call Covered California toll-free at 1-800-300-1506.</p>
 In person	<p>Apply at your local county social services office. You can get help filling out the form. A list of offices can be found at www.dhcs.ca.gov/services/medi-cal/Pages/CountyOffices.aspx</p>
 Online	<p>www.coveredca.com/ www.dhcs.ca.gov/services/medi-cal/Pages/ApplyforMedi-Cal.aspx</p>

Q. Do health plans offer any help with enrollment?

You may contact the Medi-Cal health plan of choice for more information. Call Health Net Enrollment Department toll-free at (800) 327-0502 7:30 a.m. – 6 p.m. Monday through Friday.

Q. What happens after I apply?

You can apply for Medi-Cal through CoveredCA.com, by mail, by phone or in person. Once your application is submitted, it will be sent to your local county human services agency. They will decide if you qualify.

If more information is needed once your application is reviewed the county will contact you. If you are able to receive Medi-Cal, you will get a Medi-Cal benefits identification card (BIC) in the mail.

Within 45-days of getting the BIC, you will receive an information packet in the mail that explains the Medi-Cal health plan options offered in your county and how to enroll.

You will have 30 days to choose a health plan. If one is not chosen, Medi-Cal will choose a plan for you. The health plans offered depend on what county you live in.

Go to <https://www.healthcareoptions.dhcs.ca.gov/> to pick a health plan.

If you're enrolled in Medi-Cal and need to pick a health plan, you can do so on the Health Care Options website at <https://www.healthcareoptions.dhcs.ca.gov/>.

- If you see only one health plan listed, the county has chosen this plan for you. Please wait for your health plan information in the mail.
- If you see more than one health plan listed, explore each plan, and choose the one that suits you and your family's needs. Don't forget, if you do not choose a plan within 30 days of getting your health plan information mailer, Medi-Cal will choose a plan for you.

For more information, visit DHCS website at <https://www.dhcs.ca.gov/individuals/Pages/Steps-to-Medi-Cal.aspx>

Have more questions? Read on.

Q. I had a change in income because of job loss or cut hours. Can I apply for health insurance now?

Yes. You can apply for Medi-Cal at any time. You don't have to wait for open enrollment or until your COBRA ends to apply for Medi-Cal. Visit: <https://www.coveredca.com>. Or, call Covered California toll free at: (800) 300-1506 (TTY: 711) Monday through Friday 8 a.m. to 6 p.m. and Saturday, 8 a.m. to 5 p.m. Pacific time.

Q. What are my options if I am furloughed, on unpaid leave or on a Family leave?

Medi-Cal can provide temporary coverage options until you return to work. To find out more, visit: <https://www.coveredca.com>. Or, call Covered California toll free at: (800) 300-1506 (TTY: 711) Monday through Friday 8 a.m. to 6 p.m. and Saturday, 8 a.m. to 5 p.m. Pacific time to apply. Make sure to update your Covered California account as your status changes (e.g. if you are going back to work.)



Q. I already have coverage through Covered California, but having trouble paying for my plan because of loss of income. Am I able to get extra financial help?

You may be able to get Medi-Cal, or you could be able to get help paying for your Covered California plan. This includes:

- Federal tax credit.
- California state subsidy.
- Enhanced Silver plans.
- American Indian/Alaska.
- AIAN plans.

To see if you're able to get extra help, visit:

<https://www.coveredca.com/> and update your Covered California account. Call Covered California toll free: (800) 300-1506 (TTY: 711) Monday through Friday 8 a.m. to 6 p.m. and Saturday, 8 a.m. to 5 p.m. Pacific time.



Q. Can members of the same family qualify for different coverage?

Yes. Medi-Cal rules for kids to qualify are different than rules for adults. This is so no child is left without health care. It is possible for kids to get Medi-Cal while parents are on a different plan.



Q. I am pregnant. What pregnancy services come with Medi-Cal?

Medi-Cal covers prenatal care, labor and birth, and postpartum care. To find out more, visit: www.CoveredCA.com Call Covered California toll free: (800) 300-1506 (TTY: 711) Monday through Friday 8 a.m. to 6 p.m. and Saturday, 8 a.m. to 5 p.m. Pacific time.

Q. Does immigration status impact whether or not I can get Medi-Cal?

All children 0-18 that are able to get Medi-Cal can get complete health care through Medi-Cal. Their immigration status does not matter.

Now the same goes for young adults! As of January 1, 2020 those ages 19 to 25 who are able to get Medi-Cal can also get complete health care through Medi-Cal. Their immigration status does not matter.

Immigrants that are not documented can receive limited, emergency services. These services include labor and birth for pregnant women and other limited services. For more information, visit: <https://www.coveredca.com/individuals-and-families/getting-covered/immigrants/>

Under the Affordable Care Act, most immigrants can get health coverage. This includes:

- Lawful permanent residents or “green card holders”.
- Lawful temporary residents.
- Persons fleeing persecution. This includes refugees and asylum seekers.
- Other immigrants. This includes those granted temporary protected status.
- Non-immigrant status holders (e.g. worker visas and student visas)



Q. Can a mother enroll her newborn in Medi-Cal?

Yes! Be sure to tell your health care program (Medi-Cal, Medi-Cal Access Program (MCAP) or Covered California), when your baby is born so he or she can get covered right away.

For mothers who have Medi-Cal at the time of birth, call your county Medi-Cal office. The newborn will be able to get Medi-Cal until at least age one if living in California. During the first two months, coverage will be under the mother's Medi-Cal number if the newborn has not yet been enrolled into Medi-Cal.

For mothers who have Medi-Cal Access Program (MCAP) at the time of birth, call MCAP at (800) 433-2611. If living in California, the newborn will be enrolled in the Medi-Cal Access Infant Program until age one even if family income changes. The baby will also be enrolled until age two if family income is at or below the income level allowed for the program.

For Covered California, add your newborn to your plan by calling (800) 300-1506 or update your family information online through your Covered California account.

Q. What happens if I can't get Medi-Cal anymore?

If you get a Medi-Cal Notice of Action telling you that you or a member of your household no longer qualifies for Medi-Cal you may enroll in a health plan through Covered California.

You will have 60 days from the date listed in the Medi-Cal Notice of Action to enroll in Covered California under special enrollment.

Q. If I am enrolled in Medi-Cal, do I have to repay the state?

Estate recovery only affects Medi-Cal members who are 55 and older and who own assets at the time of death. Most Medi-Cal members and their heirs will owe nothing.

Nondiscrimination Notice

Health Net complies with applicable federal civil rights laws and does not discriminate, exclude people or treat them differently on the basis of sex, race, color, religion, ancestry, national origin, ethnic group identification, age, mental disability, physical disability, medical condition, genetic information, marital status, gender, gender identity, or sexual orientation.

Health Net:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters and written information in other formats (large print, accessible electronic formats, other formats).
- Provides free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages.

If you need these services, contact Health Net's Customer Contact Center at 1-800-675-6110 (TTY: 711) from 8 a.m. to 6 p.m. Monday through Friday.

If you believe that Health Net has failed to provide these services or discriminated in another way, you can file a grievance by calling the number above and telling them you need help filing a grievance; Health Net's Customer Contact Center is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW, Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019 (TDD: 1-800-537-7697) if there is a concern of discrimination based on race, color, national origin, age, disability, or sex.

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

English: If you, or someone you're helping, has questions about Health Net Community Solutions, you have the right to get help and information in your language at no cost. To talk to an interpreter, call 1-800-675-6110 (TTY: 711).

Arabic: إذا كان لديك أو شخص ما تساعدك أية استفسارات عن Health Net Community Solutions لديك الحق في تلقي المساعدة والمعلومات بلغتك مجاناً. للتحدث إلى مترجم فوري، اتصل على الرقم 1-800-675-6110 (TTY: 711).

Armenian: Եթե դուք կամ որևէ մեկը, ում դուք օգնում եք, հարցեր ունեք Health Net Community Solutions-ի մասին, դուք իրավունք ունեք ստանալ օգնություն և ձեր լեզվով անվճար տեղեկություններ: Թարգմանչի հետ խոսելու համար զանգահարեք 1-800-675-6110 հեռախոսահամարով (TTY: 711)

Cambodian (Khmer): បើសិនលោកអ្នក ឬនរណាម្នាក់ដែលលោកអ្នកកំពុងជួយមានសំណួរអំពី Health Net Community Solutions លោកអ្នកមានសិទ្ធិទទួលបានជំនួយ និងព័ត៌មានជាភាសារបស់លោកអ្នកដោយឥតគិតថ្លៃ។ ដើម្បីប្រើក្បាជាមួយអ្នកបកប្រែសូមហៅទូរស័ព្ទទៅលេខ 1-800-675-6110 (TTY: 711)។

Chinese (Traditional): 如果您或您協助的人士對 Health Net Community Solutions 有疑問，您有權免費取得以您的語言提供的協助及資訊。如欲取得口譯員協助，請致電 1-800-675-6110 (TTY: 711)。

Hindi: यदि आप, या कोई व्यक्ति जिसकी आप मदद कर रहे हैं, के Health Net Community Solutions (स्वास्थ्य नैट सामुदायिक समाधान) के बारे में प्रश्न हैं, तो आपको अपनी भाषा में निःशुल्क मदद प्राप्त करने और जानकारी प्राप्त करने का अधिकार है। एक अनुवादक से बात करने के लिए, 1-800-675-6110 (TTY: 711) पर कॉल करें।

Hmong (White): Yog koj, lossis lwm tus koj pab, muaj lus nug txog Health Net Community Solutions, koj muaj txoj cai tau kev pab thiab ntaub ntauv ua koj hom lus tsis muaj nqi them. Xav nrog ib tug neeg txhais lus, hu 1-800-675-6110 (TTY: 711).

Japanese: あなたご自身またはあなたが援助している方がHealth Net Community Solutionsに関する質問をお持ちの場合、あなたには無料で日本語によるサポートと情報を得る権利があります。通訳とお話になるには、1-800-675-6110 (TTY : 711) までお電話ください。

Korean: 귀하 또는 귀하가 도와드리고 있는 분이 Health Net Community Solutions에 관한 질문이 있을 경우, 귀하에게는 무료로 본인이 구사하는 언어로 도움과 정보를 받을 권리가 있습니다. 통역사와 통화하려면 1-800-675-6110 (TTY: 711) 번으로 전화해 주십시오.

Laotian: ຖ້າທ່ານ ຫຼື ຜູ້ໃດໜຶ່ງທີ່ທ່ານກຳລັງຊ່ວຍເຫຼືອມີຄຳຖາມກ່ຽວກັບ Health Net Community Solutions, ທ່ານມີສິດໃນການຮັບການຊ່ວຍເຫຼືອ ແລະ ຮັບຂໍ້ມູນເປັນພາສາຂອງທ່ານໂດຍບໍ່ຕ້ອງເສຍຄ່າໃດໆ. ລົມກັບລ່າມພາສາ, ໂທ 1-800-675-6110 (TTY: 711)

Persian (Farsi):

اگر شما یا شخصی که به وی کمک می کنید، سؤالاتی در مورد Health Net Community Solutions دارید، شما حق دارید که کمک و اطلاعات را به زبان خودتان و به طور رایگان دریافت کنید. برای گفتگو با مترجم شفاهی، با شماره 1-800-675-6110 (TTY: 711) تماس بگیرید.

Punjabi (Punjabi): ਜੇ ਤੁਹਾਡੇ, ਜਾਂ ਕਿਸੇ ਅਜਿਹੇ ਵਿਅਕਤੀ, ਜਿਸਦੀ ਤੁਸੀਂ ਮਦਦ ਕਰ ਰਹੇ ਹੋ, ਦੇ Health Net Community Solutions (ਹੈਲਥ ਨੈਟ ਸਾਮੁਦਾਇਕ ਸਮਾਧਾਨ) ਬਾਰੇ ਕੋਈ ਸਵਾਲ ਹਨ, ਤਾਂ ਤੁਹਾਨੂੰ ਮੁਫਤ ਵਿੱਚ ਆਪਣੀ ਭਾਸ਼ਾ ਵਿੱਚ ਮਦਦ ਪ੍ਰਾਪਤ ਕਰਨ ਅਤੇ ਜਾਣਕਾਰੀ ਪ੍ਰਾਪਤ ਕਰਨ ਦਾ ਹੱਕ ਹੈ। ਇੱਕ ਦੁਬਾਰਾ ਨਾਲ ਗੱਲ ਕਰਨ ਲਈ 1-800-675-6110 (TTY: 711) 'ਤੇ ਫ਼ੋਨ ਕਰੋ।

Russian: Если у Вас или у кого-то, кому Вы помогаете, есть вопросы о плане Health Net Community Solutions, Вы имеет право бесплатно получить необходимые сведения в переводе на Ваш язык. Для того чтобы воспользоваться помощью устного переводчика, позвоните по телефону 1-800-675-6110 (TTY: 711).

Spanish: Si usted, o alguna persona a la que asiste, tiene preguntas sobre Health Net Community Solutions, tiene derecho a obtener ayuda e información en su idioma sin cargo. Para hablar con un intérprete, llame al 1-800-675-6110 (TTY: 711).

Tagalog: Kung ikaw o ang isang taong tinutulungan mo ay mayroong mga tanong tungkol sa Health Net Community Solutions, mayroon kang karapatang makakuha ng tulong at impormasyon na nasa wika mo nang walang babayaran. Para makipag-usap sa isang interpreter, tumawag sa 1-800-675-6110 (TTY: 711).

Thai: หากคุณ หรือคนที่คุณกำลังให้ความช่วยเหลือ มีคำถามเกี่ยวกับ Health Net Community Solutions คุณมีสิทธิที่จะขอรับความช่วยเหลือและข้อมูลเป็นภาษาของคุณได้ โดยไม่มีค่าใช้จ่าย หากต้องการคุยกับล่าม โทร 1-800-675-6110 (TTY: 711)

Vietnamese: Nếu quý vị, hoặc một người nào đó quý vị đang giúp đỡ, có thắc mắc về Health Net Community Solutions, quý vị có quyền nhận được trợ giúp và thông tin bằng ngôn ngữ của quý vị miễn phí. Để trao đổi với phiên dịch viên, hãy gọi số 1-800-675-6110 (TTY: 711).

CA Medi-Cal Notice of Language Assistance

Application
confirmation #: _____

Medi-Cal benefits
identification #: _____

Health plan ID #: _____