

Medi-Cal Renewals: Frequently Asked Questions (FAQs) for Members

All Medi-Cal members have their eligibility reviewed once per year. Everyone's renewal date is different. Your local Medi-Cal office will send you a notice or an envelope with a renewal form. This may come in a yellow envelope.

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Renewals

When is my renewal due?

- Your local Medi-Cal office reviews program eligibility for all Medi-Cal members once every year.
- o Everyone's renewal date is different.
- You will get a notice in the mail that tells you your renewal date.
- You can check your online account for your renewal date.
 - Log in or create an account on BenefitsCal.com.
- o Or you can call or go in person to your <u>local Medi-Cal office</u>.

Do I need to complete a Medi-Cal renewal form?

- Not all Medi-Cal members must complete a renewal form.
- Some people will be renewed automatically.
 - Your local Medi-Cal office will review the information they have and will check other government databases.
 - If Medi-Cal confirms you are eligible, they will renew you. You will receive a notice that you have been renewed. You do not need to do anything else.
- o Some people will need to provide additional information.
 - Your local Medi-Cal office will send you an envelope that includes a renewal form. This may come in a yellow envelope.
 - If you receive a renewal form, you must complete it. You must also submit any additional requested information to keep your coverage.

How can I submit my renewal?

- The quickest way to complete your form is online at <u>BenefitsCal.com</u>. If you
 do not have an account, you can create one online. You must have your Social
 Security Number or Medi-Cal case number to view your information.
- You can complete your renewal through the mail. Follow the instructions on your renewal form.
- You can complete your renewal over the phone. Call the number on your renewal form. Be advised that there may be long wait times.
- Help is available for free, by phone, or in person at your <u>local Medi-Cal office</u>.
 If you need accommodations or assistance, <u>Medi-Cal Health Navigators</u> can provide support in person and in many languages.

What information do I need to give to my local Medi-Cal office?

- Your local Medi-Cal office will only ask for information that affects your eligibility, such as details and proof of any changes to your household.
- They will need to know if you:
 - Get married or divorced.
 - Have a child, adopt, or place a child for adoption.
 - Have a change in income or property (if applicable).
 - Get any other health coverage, like through a job or Medicare.
 This won't disqualify you from Medi-Cal, but it affects which coverage pays first.
 - Move or have a change in who is living in your home.
 - Have become disabled or had a change in disability status.
 - Have a change in tax filing status, including a change in tax dependents.
 - Have a change in citizenship or immigration status. NOTE: Citizenship status is not required for coverage.
 - Are incarcerated (jail, prison, etc.) or released from incarceration.
 - Have a change in American Indian or Alaska Native status.
 - Have a change in your tribal status.
 - Change your name, date of birth, or Social Security Number.
 - Have any other changes that may affect your income or household size.

 If you receive regular income, you may need to provide proof. The form lists examples. These include pay benefits/awards letters and tax returns.

What happens after I turn in my Medi-Cal renewal information?

- Your local Medi-Cal office will determine your eligibility and contact you by mail after a decision is made.
- If your renewal form is missing key information, they will send you a notice informing you what they still need.
- If they have what they need, they will send you a notice with the decision.
 The notice will tell you if you are still eligible for Medi-Cal.
 - If you are, it will tell you that your Medi-Cal is renewed for one year.
 - If you are not, it will tell you when your Medi-Cal ends.

• How did Medi-Cal get the information on the renewal form?

- o The renewal form contains all the information Medi-Cal knows about you.
- You provided most of the information through previous applications and renewals.
- o Some may come from databases Medi-Cal has access to, including:
 - Internal Revenue Services
 - Social Security
 - Employment Development Department

• What do I need to do with the form that Medi-Cal sent me?

- You must review the information that is already included. If it is wrong, make changes or updates on the form.
- o You may need to provide proof of changes.
- o If you receive regular income, you may need to provide proof. The form lists examples. They include pay stubs, benefits/awards letters, and tax returns.

I got a notice, but not the yellow envelope with a renewal form. What do I need to do?

- o The notice will tell you if your Medi-Cal coverage was renewed.
- o The notice might tell you your coverage was renewed for one year. That means you were renewed automatically. You do not need to do anything.
- o The notice might ask for more information.

- That means your local Medi-Cal office needs more information.
 The notice will tell you what information they need. You must provide this information.
- You do not need to complete a full renewal form. You must respond to the notice to keep your Medi-Cal coverage.

• How do I submit the proof for my renewal?

- o You can submit proof by mail, phone, in person, or online.
- You may also contact a <u>Health Enrollment Navigator</u> for free assistance.
 There is never a fee to apply for Medi-Cal. No one can charge fees to submit Medi-Cal applications, renewals, or proof.
- Local Medi-Cal office workers are available to help in person or by phone.
 They can explain materials and program requirements. They can also help you complete your renewal form.
 - There may be long wait times at the office and on the phone.
- You may also request free help in any language. Language services are available in person or by phone.
 - Medi-Cal offices have bilingual staff.
 - They also use a language services telephone service.

Somebody asked me for money to complete my Medi-Cal renewal. Is this a scam?

 Medi-Cal will never require payment to submit a renewal form or enrollment application. If you get a call asking for payment to complete your renewal, report it by calling the Medi-Cal Fraud Hotline at 1-800-822-6222.

I am no longer covered

- I did not submit my renewal form or information. I got a notice that my coverage is ending. What can I do?
 - If you get a renewal form and do not complete it, your Medi-Cal coverage will end.
 - If it is less than 90 days from the date on the notice:
 - Submit your renewal form or missing information. Your local Medi-Cal office will determine if you still qualify. You do not need to complete a new application.

- o If it is more than 90 days after the date on the notice:
 - You must <u>complete a new Medi-Cal application</u>.

I received a notice that I am no longer eligible. I think I am still eligible. What can I do?

- You can ask your local Medi-Cal office to review your case. <u>Contact your local Medi-Cal office</u>.
- o If they cannot help you, you can ask for a Medi-Cal Fair Hearing.
 - You can submit an <u>online request here</u>.
 - You can also call the State Hearings Division toll free at 1-800-743-8525.

• What can I do if I am over the income limit for Medi-Cal?

- You may be eligible for a private health plan through Covered California.
 You could also qualify for financial assistance.
- o If you qualify, your local Medi-Cal office will share your information with Covered California, which will enroll you in a quality plan. They will select a plan that provides the best value at the lowest cost.
- Watch for important notices from Covered California. The envelope may say
 "Stay Covered with Covered California."
- If you receive a notice asking to confirm your plan, respond right away.
 You will have the option to change your plan or cancel.
- Visit <u>CoveredCA.com</u> or call Covered California's service center at 1-800-300-1506 to learn more.

Access to Care During My Renewal

- I have a medical, dental, or eye doctor appointment. My renewal form is due this month. What can I do?
 - You may continue your care. You have Medi-Cal coverage while your renewal form is being reviewed. Your coverage will only end if you are no longer eligible.
 - If you are not eligible, you will receive a notice of action. It will say when your coverage ends. You can get covered care until this effective date.

• I believe my coverage ended in error. I requested a hearing. Do I still have Medi-Cal coverage?

- You can ask your local Medi-Cal office to review your case if you are being denied coverage. <u>Contact your local Medi-Cal office</u>.
- If you asked for a hearing before your coverage ended, you are still covered.
 Medi-Cal will continue to cover services through the hearing.

For Caretakers and Parents

Do I need to complete separate renewals for me and my children with Medi-Cal coverage?

- Some household members may have a renewal that is due when other household members do not. The form will tell you who needs a renewal.
 Remember, children may be eligible for coverage even if you are not. Make sure you submit renewal information if children in the household have Medi-Cal.
- What if a child is not eligible for Medi-Cal?
 - If a child no longer qualifies, your notice will explain why and when coverage will end.
 - Even if you don't think you're eligible, complete the Medi-Cal renewal form.
 Kids may still qualify for Medi-Cal even if adults do not qualify. Medi-Cal income limits are different for kids.
 - Do you live in San Francisco County, San Mateo County, or Santa Clara County? Even if you're not eligible for Medi-Cal, children could be eligible for the County Children's Health Initiative Program (CCHIP). For more information, contact your local Medi-Cal office.

Dual-Eligible Medicare/Medi-Cal Recipients

- What if I get health insurance through Medicare and Medi-Cal to cover my medical expenses?
 - To keep your Medi-Cal coverage, you'll need to complete the Medi-Cal renewal process. Medi-Cal helps pay for services Medicare doesn't cover, like nursing facility care, adult daycare, home health aides, transportation, and more. Even if you also have Medicare, you'll need to make sure you renew your Medi-Cal so you can keep your Medi-Cal coverage.

Supplemental Security Income/In-Home Supportive Services Recipients

- How do I report a change if I have Supplemental Security Income (SSI)
 - o If you get SSI, do not have a U.S. mailing address, and are unable to change your address online, you can:
 - Call Social Security Administration at 1-800-772-1213 (TTY at 1-800-325-0778), Monday through Friday between 8 a.m.-7 p.m. PDT
 - Contact your <u>local Social Security office</u>.
- Can I receive In-Home Supportive Services (IHSS) if I do not have Medi-Cal?
 - No, only Medi-Cal members can get IHSS. You must complete the Medi-Cal renewal process to keep IHSS.
- What is the eligibility criteria for IHSS?
 - o You must:
 - Physically reside in the United States.
 - Be a California resident.
 - Have a Medi-Cal eligibility determination.
 - Live at a home of your own choosing (acute care hospitals, long-term care facilities, and licensed community care facilities are not considered "own home").
- How do I apply for IHSS?
 - o Contact your <u>county IHSS program</u>.
 - o Submit a completed Health Care Certification form.
- What if I have questions about my IHSS services?
 - For questions about your IHSS services, please contact your IHSS social worker. Their contact information is included on the last Notice of Action you received. You can also view the lists of county IHSS offices.

Medi-Cal American Indian/Alaska Natives (AI/AN)

- I receive my care at an Indian Health Care Program (IHCP). Do I need to renew my Medi-Cal?
 - Yes, all Medi-Cal members have their eligibility reviewed once per year.
 Everyone's renewal date is different.

You will get a notice in the mail that tells you your renewal date.

• How do I know if I am eligible for Medi-Cal?

- Medi-Cal covers any Al/AN who has received (or is eligible to receive) services at a tribal or urban Indian health program. You can get eligibility information by contacting the IHCP closest to you or by visiting the eligibility page.
- What types of income are generally excluded when determining Medi-Cal eligibility for AI/AN members based on Modified Adjusted Gross Income (MAGI) rules?
 - o The following categories of income are generally excluded:
 - Distributions from Alaska Native Claims Settlement Act (ANCSA)
 Corporations and Settlement Trusts
 - Distributions from trust/reservation property
 - Income from property and rights related to hunting, fishing, and natural resources
 - Income from the sale and use of cultural/subsistence property
 - Student financial assistance provided by the Bureau of Indian Affairs and/or a tribe
 - Income that falls within the IRS General Welfare Doctrine
 - Any other income that is non-taxable according to federal law or IRS guidance.

Can I get help completing the renewal?

 Some IHCPs have patient navigators or may offer transportation to county eligibility offices to assist AI/AN patients going through the renewal process.
 Reach out to your IHCP for assistance.