



November 17, 2023

RE: Medi-Cal Redetermination Provider Communication Data Files November 2023

Dear Participating Physician Group (PPG),

The Continuous Coverage Unwinding is currently at the halfway mark with the sixth cohort of Medi-Cal beneficiaries up for renewal this month. To date, we estimate that over (one) 1 million L.A. Care Health Plan (L.A. Care) Medi-Cal members have gone through their Medi-Cal redetermination and renewal process. Of these members, around 270K (26%) did not respond to the county's request for information and lost their coverage due to procedural reasons. To help mitigate the impact we are seeing, L.A. Care would like to share with you with an important update supporting Medi-Cal redetermination outreach efforts.

The Department of Health Care Services (DHCS) provided L.A. Care with a one-time file including current renewal due date information for all of our Medi-Cal members. L.A. Care believes this data is vital to informing the effective timing of redetermination outreach efforts. To support our PPGs in their outreach to L.A. Care Medi-Cal members, a one-time file has been posted for each PPG to access from the L.A. Care Provider Portal. The file includes renewal due date information for all of the PPG's assigned L.A. Care Medi-Cal members. *The information on this file is current as of November 2023 and is subject to change if the member reports any changes to the Department of Public Social Services that could cause their renewal due date to be impacted.* L.A. Care is requesting for each PPG to access their file and proactively utilize the renewal due date information to inform targeted outreach in support of Medi-Cal renewal awareness and ensuring continuous coverage for eligible individuals.

As a reminder, we urge you to continue sharing the below four key messages with your patients who are going through the Medi-Cal redetermination process:

1. **Update Your Contact Information.** Make sure the county has your current name, mailing address, phone number, email address, or other contact information if it has changed. If your information has changed, you can update it online at benefitscal.com, or by calling 1-866-613-3777 (TTY) 1-800-660-4026. This way, the county can contact you about your Medi-Cal.
2. **Check Your Mail.** The county will mail you a letter about your Medi-Cal eligibility. You may need to complete a renewal form. If you're sent a renewal form, submit your information by mail, phone, in person, or online, so you don't lose your coverage.
3. **Create or Check Your Online Account.** Create or check your BenefitsCal account to sign up to get text or email alerts about your case.

4. **Complete Your Renewal Form (if you get one).** If you received a renewal form in the mail, you may submit your information by mail, phone, in person, or online to help avoid a gap in your Medi-Cal coverage.

In addition to this one-time file, L.A. Care continues to share two (2) monthly files with our PPGs. These include the following:

1. Monthly supplemental renewal packet file
 - This file is posted to the Provider Portal around the 20th of each month with the following naming convention: XXX_renewal packet data_120123
 - This file informs the PPG of which members were mailed a packet who must respond by the upcoming month
 - For example, the November file will include members who have a December renewal month and must respond by mid/late December
 - These members **must respond** by the due date on their packet or **they will lose their coverage**
2. Monthly on-hold file
 - This file is posted to the Provider Portal around the 10th of each month with the following naming convention: XXX_onhold_110823
 - This file informs the PPG of their previously assigned members who recently lost Medi-Cal coverage and are now on-hold and in their 90-day grace period
 - These members lost their coverage for procedural reasons (i.e., not responding to their packet and County's inability to verify their eligibility)
 - The members on this file are inactive and there is no capitation paid
 - These members **must respond during the cure period** for Department of Public Social Services (DPSS) to determine if their Medi-Cal coverage can be reinstated!
 - If the member submits their renewal form before the 90 days, their coverage will be retroactively reinstated to their date of disenrollment if they still qualify
 - If it is more than 90 days after the date on their letter, they will be fully disenrolled and must complete a new Medi-Cal application

L.A. Care continues to update our resources for providers on how to promote continuous coverage among Medi-Cal beneficiaries. Please visit <https://www.lacare.org/providers/medi-cal-redetermination-faqs> to access our most current redetermination provider toolkit and other resources including where you can send your patients if they need technical assistance with their renewal packet.

If you have any questions about the above information shared, please contact Provider Relations at ProviderRelations@lacare.org.

Sincerely,

L.A. Care Health Plan