

L.A. Care[®]
Medi-Cal



December 2023

**Medi-Cal Redetermination
Provider Toolkit**



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Dear L.A. Care Provider (Provider),

During the COVID-19 Public Health Emergency (PHE), Medi-Cal beneficiaries have been able to keep their coverage regardless of any change in circumstance (e.g., income eligibility) due to the continuous enrollment requirement that was put into effect to support access to care during the pandemic. On March 31, 2023 the continuous enrollment requirement will be decoupled from the PHE end date, which will set the stage for the resumption of Medi-Cal redeterminations to begin on April 1, 2023. Once routine Medi-Cal renewal operations resume, the county will check to see if beneficiaries still qualify for Medi-Cal and take action following verification of eligibility.

Many beneficiaries have had minimal or no contact with their county eligibility case worker due to the PHE continuous enrollment requirement. It is anticipated that a significant volume of eligible individuals could lose their coverage once redeterminations resume as a result of the County having outdated contact information or beneficiaries being unaware of the renewal process. Managed care plans have received regulatory guidance that presents a unique opportunity for collaboration between States, Counties, managed care plans, and providers to ensure continuous coverage for eligible individuals.

L.A. Care's **call to action** for our providers, as trusted partners to their patients, is to conduct outreach and bring awareness to the resumption of Medi-Cal renewals. The following are two key messages recommended by the California Department of Health Care Services to promote among Medi-Cal beneficiaries. Consistent messaging will help minimize confusion and align efforts across sectors.

1. Keep your contact information up to date with your local county Medi-Cal office by reporting changes to the Los Angeles County Department of Public Social Services at **1.866.613.3777** or visit **benefitscal.com**
2. If you receive important information about your Medi-Cal coverage from the County, complete and submit any requests for information by the due date

To support providers in their outreach and communication efforts, we are excited to share L.A. Care's Redetermination Provider Toolkit. We encourage you to share this information with your provider network, given their opportunity to interact with members often and in-person. To access the Redetermination Provider Toolkit, please visit **<https://www.lacare.org/providers/provider-resources/tools-toolkits/toolkits>**

Included in the Redetermination Provider Toolkit are the following:

1. Redetermination Frequently Asked Questions (FAQs)
2. Access to and guidance to upload educational animation videos including Global Outreach Language (GOL)
 - a. The videos can be shared with members in multiple ways: via social media postings, on websites, displayed in Provider offices or patient exam rooms, etc.
 - b. Link to access and download the videos:
<https://lacarecloud.sharefile.com/d-s3c15c3ec045f4fbe9c2f17203e9bb658>

3. Option to receive a redetermination poster for display in Provider offices
4. The Los Angeles County Department of Public Health Medi-Cal Enrollment Assistance Flyer
 - a. This flyer provides a list of agencies across Los Angeles County with bilingual staff who are able to provide Medi-Cal enrollment assistance
 - b. **CHOIContractorListEngSp.pdf (lacounty.gov)**
5. The Department of Health Care Services Phase 1 and Phase 2 Communication Toolkits including outreach collateral materials with pre-approved GOL
 - a. The Phase 1 **PHE Communication Toolkit 1.0** includes a redetermination website banner, social media graphics, and more that Providers are encouraged to use in their outreach efforts.
 - b. The Phase 2 **Medi-Cal Continuous Coverage Unwinding Toolkit** is included within the Medi-Cal Continuous Coverage Resource page and includes flyers, fact sheets, social media graphics, sample messaging, and more that Providers are encouraged to use in their outreach efforts.
 - c. To sign-up as a DHCS Coverage ambassador, please visit **Planning For the End of the Continuous Coverage Requirement**.
6. The Department of Health Care Services Eligibility Sequencing Map
 - a. The eligibility sequencing map provides a detailed timeline of the renewal activities that will occur over a 14-month time period, in addition to highlighting the specific renewal activities that occur during each renewal period.
 - b. **Appendix A (1).pdf**

L.A. Care greatly appreciates the partnership with each of our providers. Together, we can help raise awareness on redetermination requirements to support continuity of coverage for eligible Medi-Cal beneficiaries. Should you have questions related to the information shared, please contact your assigned L.A. Care Account Manager.

Sincerely,

L.A. Care Health Plan

Provider FAQs: Medi-Cal Redetermination



Q: What is the Medi-Cal annual renewal redetermination process?

A: All Medi-Cal members have their eligibility reviewed once per year. Some people will be renewed automatically. Others will need to provide additional information. The Los Angeles County Department of Public Social Services will contact members two months before their renewal is due. If renewed automatically, they will receive a notice that they have been renewed and do not need to do anything else. If they get a renewal form in a bright yellow envelope, they must complete it. If they don't, they will lose their Medi-Cal coverage! The easiest way to complete the form is online through BenefitsCal. They can also provide their renewal information by mail, in-person at their local Los Angeles County Department of Public Social Services (DPSS) office, or by calling **1.866.613.3777** (TTY) **1.800.660.4026**.

Q: Are Medi-Cal members required to fill out and return renewal packets when they receive them?

A: Yes. It is important that Medi-Cal members respond to county requests for updated information, including renewal packets. Members do not need to return the paper annual renewal form but they must provide the necessary information requested in the form and sign the form through any of the available means indicated.

Members need to read the pre-populated information, if it is wrong, they need to make changes or updates on the renewal form. They will need to give proof when the renewal instructs them to. If they get income, they need to give proof. The renewal form lists examples, which include pay stubs and tax returns.

Members do NOT need to complete the section about non-income assets and property or give proof.



Q: Is there help available for Medi-Cal members who have received a renewal packet in the mail and need assistance completing it?

A: Yes. If a member needs assistance completing their renewal packet, there are agencies across Los Angeles County with bilingual staff who are able to provide Medi-Cal enrollment assistance. To view the list of available agencies, please reference the following link: publichealth.lacounty.gov/mch/choi/CHOIContractorListEngSp.pdf

The following Community Resource Centers (CRC) listed below are currently offering assistance with Medi-Cal enrollment and renewals:

Palmdale

2072 E. Palmdale Blvd.
Palmdale, CA 93550
1.213.438.5580

Panorama City

(Opening January 2024)
7868 Van Nuys Blvd.
Panorama City, CA 91402
1.213.438.5497

West Los Angeles

(Opening January 2024)
11173 W. Pico Blvd.
Los Angeles, CA 90064
1.310.231.3854

Pomona

696 W. Holt Avenue
Pomona, CA 91768
1.909.620.1661

Metro Los Angeles

1233 S. Western Avenue
Los Angeles, CA 90006
1.213.428.1457

Lynwood

3200 East Imperial Hwy.
Lynwood, CA 90262
1.310.661.3000

East Los Angeles

4801 Whittier Blvd.
Los Angeles, CA 90022
1.213.428.1457

Norwalk

11721 Rosecrans Avenue
Norwalk, CA 90650
1.562.651.6060

Inglewood

2864 W. Imperial Hwy,
Inglewood, CA 90303
1.310.330.3130

Long Beach

5599 Atlantic Avenue,
Long Beach, CA 90805
1.562.256.9810

Wilmington

911 North Avalon Blvd.,
Wilmington, CA 90744
1.213.428.1490

If an individual needs help completing their Medi-Cal application or renewal packet, they can call a CRC listed above to schedule an appointment with an application assister.



Q: How does a Medi-Cal member know when their renewal month is?

A: The annual renewal month is the month in which the beneficiary's annual renewal is due. Typically, the annual renewal due month is the 11th month after their application month. Members will receive a letter in the mail indicating when their renewal is due.

Members can find their renewal due date information online by logging in or creating an online account at **benefitscal.com** and linking their Medi-Cal case. The renewal due month will be listed in the member's account under 'Case Information'. Members can also call DPSS at **1.866.613.3777** Monday – Friday from 7:30 a.m. – 6:30 p.m. (excluding holidays) to request this information.

Q: Which members will be renewed through the auto-renewal / ex parte process?

A: DPSS will attempt to verify the member's information through multiple sources available to the county. If DPSS locates the information needed to redetermine eligibility through the ex parte process, DPSS will complete the annual renewal and send the approval Notice of Action letter.

Q: Which members are required to complete an annual renewal packet?

A: An annual renewal form will be sent to the member if DPSS is unable to redetermine continued Medi-Cal eligibility through the ex parte process. Members who do not have a valid social security number will not be able to successfully complete the ex parte process and a packet will be sent to have the member complete their annual Medi-Cal renewal.

Members who do not have a valid social security number will not be able to successfully complete the ex parte process and a packet will be sent to have the member complete their annual Medi-Cal renewal.

Members who receive a renewal packet must complete it and turn in the extra information it requests. This must be done in order for the member to keep their Medi-Cal coverage.

Q: Is there an easy way to identify the renewal packet in the mail?

A: Yes. The packet from DPSS will arrive in a yellow envelope.

Q: What information do members need to give DPSS?

A: DPSS will only ask for the information they need and for things that affect each individual member's Medi-Cal coverage. They will need details and proof of any changes, to include whether a member:

- Gets married or divorced
- Has a child, adopts or places a child for adoption
- Becomes pregnant
- Gets more or less money
- Gets any other health coverage, like through a job or Medicare. This won't stop their Medi-Cal
- Moves, or changes who is living in their home
- Has become disabled or had a change in their disability
- Has a change in how they file their income taxes, such as starting or stopping claiming someone as a tax dependent
- Has a change in citizenship or immigration status
- Are incarcerated (jail, prison, etc.) or released from incarceration
- Has a change in American Indian or Alaska Native status
- Has a change in their tribal status
- Changes their name, date of birth or Social Security Number (SSN)
- Has any other changes that may affect their income or household size

If a member gets income, they may need to give proof. The form lists examples such as pay stubs and tax returns.

Members do **not** need to tell DPSS about non-income assets, which include bank accounts, homes and vehicles. Members do not need to turn in proof of their assets and property. Members do need to report:

- If a new person with property moves in
- If they get money from their property (e.g. rent payments)

Q: How long does a member have to complete their renewal packet before getting disenrolled from Medi-Cal?

A: The member is provided 60 days to provide the requested information to DPSS. If the requested information is not received by the 60-day due date, Medi-Cal benefits will discontinue at the end of the renewal due month. If members get a renewal form, they must complete their renewal by the due date printed on the form. If they don't, they could lose their Medi-Cal coverage.

Q: What happens after renewal packets are returned?

A: DPSS will review the member's renewal and determine if they are still eligible to get Medi-Cal. If the renewal is missing something, DPSS will ask for more information and send the member a notice telling them what information they need.

If DPSS has the information they need, they will send the member a notice to tell them whether or not they still qualify for Medi-Cal coverage. If they do still qualify, the letter will indicate that their Medi-Cal is renewed for one year. If they do not still qualify, the letter will indicate when the member's Medi-Cal coverage ends.

Q: How long does a member have to re-establish Medi-Cal coverage after discontinuance?

A: The Los Angeles County Department of Public Social Services (DPSS) will mail members a letter to let them know if they didn't turn in their renewal form or are missing information. If it is less than 90 days from the date on the letter, members need to send their local Medi-Cal office the renewal form or missing information. DPSS will determine if they still qualify. They do not need to complete a new application. If it is more than 90 days from the date on the letter, they must **complete a new Medi-Cal application**.

Q: How can members update their information and/or respond to county requests for information?

A: Requested information can be submitted by mail, in person, online, or phone. Members can submit information online by logging in or creating an online account at **benefitscal.com**. To submit information by phone, members can call DPSS at **1.866.613.3777** Monday – Friday from 7:30 a.m. – 6:30 p.m. (excluding holidays).

Q: How can Medi-Cal members receive alerts on their Medi-Cal case?

A: Medi-Cal members can receive alerts on their case by creating an online account at **benefitscal.com**

Q: Are there instructions on the Medi-Cal renewal process for members to reference?

A: Yes. DPSS has released a video tutorial and written instructions on the Medi-Cal renewal process. These tools can be accessed on the L.A. Care website at **lacare.org/members/member-support/medi-cal-renewal-faqs**

Q: Can an individual enroll into Medi-Cal without a California ID?

A: Yes. DPSS will accept other forms of identification if a California ID is not available. Accepted documents include passports, bus passes or any other form of identification. As a last resort, DPSS will also accept an affidavit.

Q: If a patient is experiencing homelessness what mailing address can be provided to DPSS?

A: Individuals experiencing homelessness who are in need of a mailing address to receive/send communication to/from the county may utilize a county district office address closest to them. Please reference the office locations listed on the county website: dps.lacounty.gov/en/resources/offices.html

Q: Will the Young Adult Expansion population that turned 26 during the continuous coverage period or will turn 26 during the unwinding lose their coverage prior to January 2024?

A: No, to maintain continuity of coverage for these individuals who would have aged out until the new law takes affect, counties have been instructed to deprioritize these renewals towards the end of the unwinding period.

Q: Will completing a Medi-Cal renewal count as a public charge or affect a member's immigration status? What can these members do?

A: Medi-Cal is not public charge! It does not affect immigration status. Free health insurance is now available to more Californians through Medi-Cal. Immigration status doesn't matter. Applying for or using Medi-Cal is NOT considered in a public charge determination. Learn more at [GetMedi-CalCoverage.dhcs.ca.gov](https://www.dhcs.ca.gov/GetMedi-CalCoverage).

Q: How is Medi-Cal renewed for members who have Supplemental Security Income (SSI)?

A: Individuals who have Supplemental Security Income (SSI) get Medi-Cal through the Social Security Administration. If a member has questions, please advise them to call **1.800.772.1213**, Monday – Friday, 8 a.m. – 7 p.m. or they can visit their local Social Security Office.

Q: How can members who receive SSI report a change?

A: If a member receives SSI, they can report changes by calling **1.800.772.1213**, Monday – Friday, 8 a.m. – 7 p.m. or they can visit their local Social Security Office. ssa.gov/locator

Q: Where can members be directed if they no longer qualify for Medi-Cal coverage?

A: If a member no longer qualifies for Medi-Cal, they may be able to get health coverage through a Covered California plan and could also get financial assistance. If a member qualifies, DPSS will share their information and Covered California will enroll them in a quality plan.

These members should look out for important notices from Covered California. The envelope may say “Stay Covered with Covered California”. If the member gets a notice asking them to confirm their plan, they should respond right away. They will also have the option to change or cancel their plan.

Visit **coveredca.com** or call Covered California’s service center at **1.800.300.1506**, Monday through Friday, excluding holidays, from 8:00 a.m. until 6:00 p.m. to learn more.

Q: Is there a fee for Medi-Cal members to renew their Medi-Cal?

A: Medi-Cal will never ask for money to turn in a renewal. If a member gets a call asking for money to complete their renewal, they can report it to the Medi-Cal fraud hotline at **1.800.822.6222**.

Q: If a member receives a notice that they no longer qualify for Medi-Cal but they think they should still qualify, what can they do?

A: The member can ask DPSS to look at their case, these members should contact DPSS. If they cannot help the member, the member can ask for a **Medi-Cal Fair Hearing**. Members can submit an online request at: **<https://www.cdss.ca.gov/hearing-request>** or call the State Hearings Division toll free at **1.800.743.8525**.

Q: If a member did not turn in their renewal form or information and got a notice that their Medi-Cal is ending, what can they do?

A: If a member gets a renewal form and does not complete it, their Medi-Cal will end.

If it is less than 90 days from the date on the letter they can turn in their renewal form or missing information. DPSS will see if they still qualify for Medi-Cal, these members do not need to turn in a new application.

If it is more than 90 days after the date on the letter, they must turn in a new Medi-Cal application.

Q: If a member believes their Medi-Cal ended in error and asked for a hearing, do they still have Medi-Cal?

A: The member’s notice had a date of when their Medi-Cal ended. If they asked for a hearing before their Medi-Cal ended, they still have Medi-Cal coverage.

Redetermination Animation & Video Guidance



Redetermination animation videos can be accessed via the website at
<https://lacarecloud.sharefile.com/d-s3c15c3ec045f4fbe9c2f17203e9bb658>.

A Quick Guide to Sharing Videos



Sharing on your social media channels

We recommend sharing vertical videos on your social media channels.

- 1 Download the digital files using the link that was shared.
- 2 Select a video from the “9x16_Vertical” folder that you would like to share.
- 3 Upload the video to your channel.



Sharing via email

We recommend using a YouTube link when sharing the videos. A YouTube link is quick to load and won't slow down an email server.

Either vertical or horizontal versions of the videos are fine for email, as an equal number of people check email from a phone as they do from a desktop.

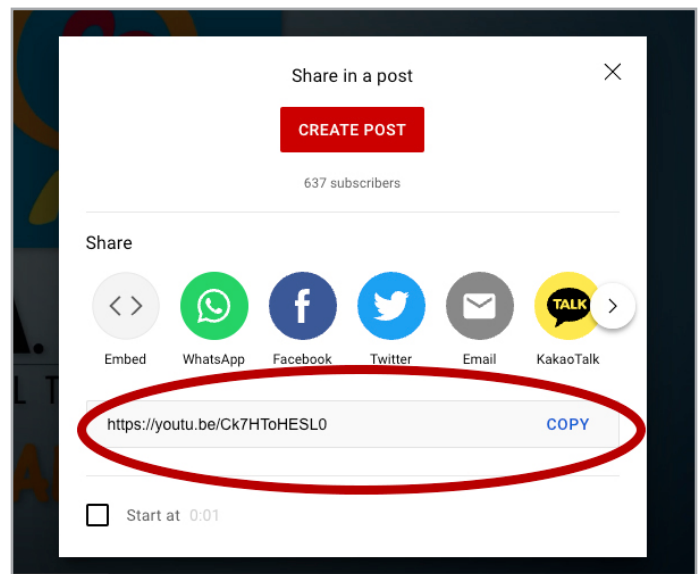
There are two possible methods:

Method 1: Simply copy and paste the original YouTube link that was shared with you into an email

Method 2:

- 1 Navigate to the YouTube video page
- 2 Click the “Share” icon at the bottom of the player

- 3 Copy the URL that appears on the popup





Sharing on a webpage

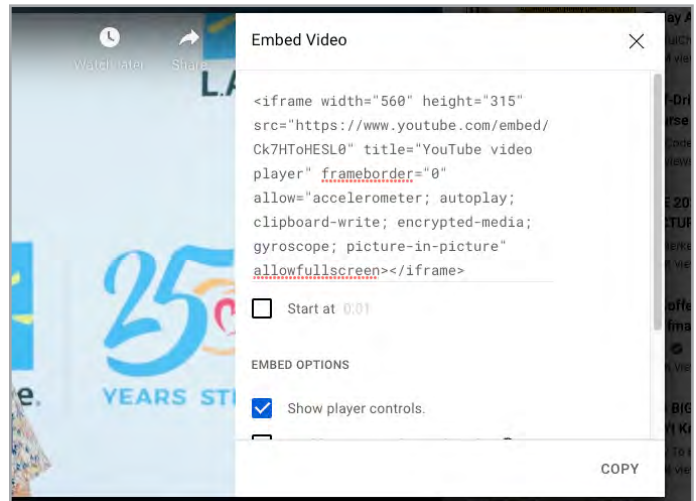
If you would like to share the videos on your webpage, this is how to locate the embed code on YouTube. For websites, we recommend using the horizontal version of the videos.

1 Navigate to the YouTube video page

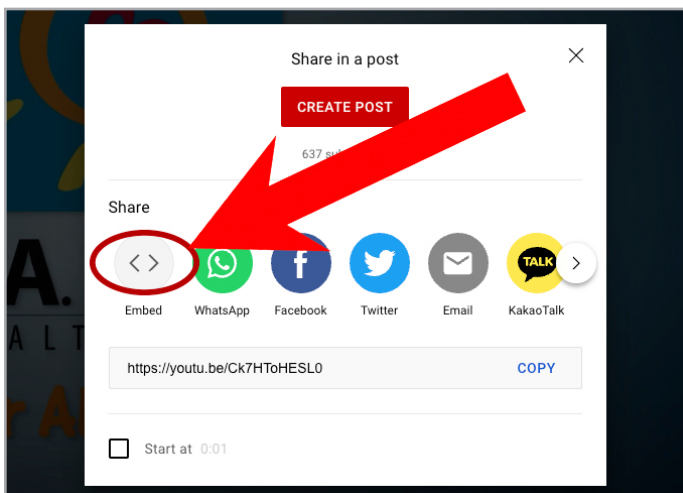
2 Click the “Share” icon at the bottom of the player



4 Copy the embed code



3 Select “Embed”



If you have any questions, please contact Jose Bedoya - Jbedoya@lacare.org

Medi-Cal Redetermination Provider Poster



Redetermination Provider Poster - All Threshold Languages

<https://lacarecloud.sharefile.com/d-sa2d35bb901b94fa1a22be470b96a05df>

Keep Your Medi-Cal

Don't miss important information
about your Medi-Cal health coverage.

**Make sure that your county has your
current information.**



Name



Phone



Address



E-mail

Report any changes to your name, address, phone number,
or e-mail address.

**Los Angeles County Department of
Public Social Services (DPSS)**

1.866.613.3777 (TTY 1.800.660.4026)
Monday–Friday from 7:30 a.m.– 6:30 p.m.
Excluding holidays



Or online at:
Benefitscal.com



L.A. Care
HEALTH PLAN®

Medi-Cal Keep Covered Flyer



Medi-Cal Keep Covered Flyer - All Threshold Languages

<https://lacarecloud.sharefile.com/d-s7a532d555d404a98a27640e1b8376b79>

Keep yourself and your family covered

If you have Medi-Cal,
make sure you renew
it when it's time



Medi-Cal covers vital health care services for you and your family, including doctor visits, prescriptions, vaccinations, mental health care, and more.

1 Update your contact information

Report any new changes to your name, address, phone number, and email address, so your county can contact you.

2 Check your mail

Counties 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 at benefitscal.com, so you don't lose your coverage.

3 Create or check your BenefitsCal online account

You can sign up to receive alerts on your case. Create or log into your BenefitsCal account to get these alerts. You may submit renewals or requested information online at benefitscal.com.

4 Complete your renewal form (if you get one)

If you received a renewal form, submit your information by mail, phone, in person, or online at benefitscal.com to help avoid a gap in your coverage.



For more details and to update your contact information, visit benefitscal.com or

Los Angeles County Department of Public Social Services (DPSS)

1.866.613.3777 (TTY 1.800.660.4026)

Monday–Friday from 7:30 a.m.– 6:30 p.m. Excluding holidays



LA5052 04/23

Medi-Cal Enrollment & Renewal Assistance



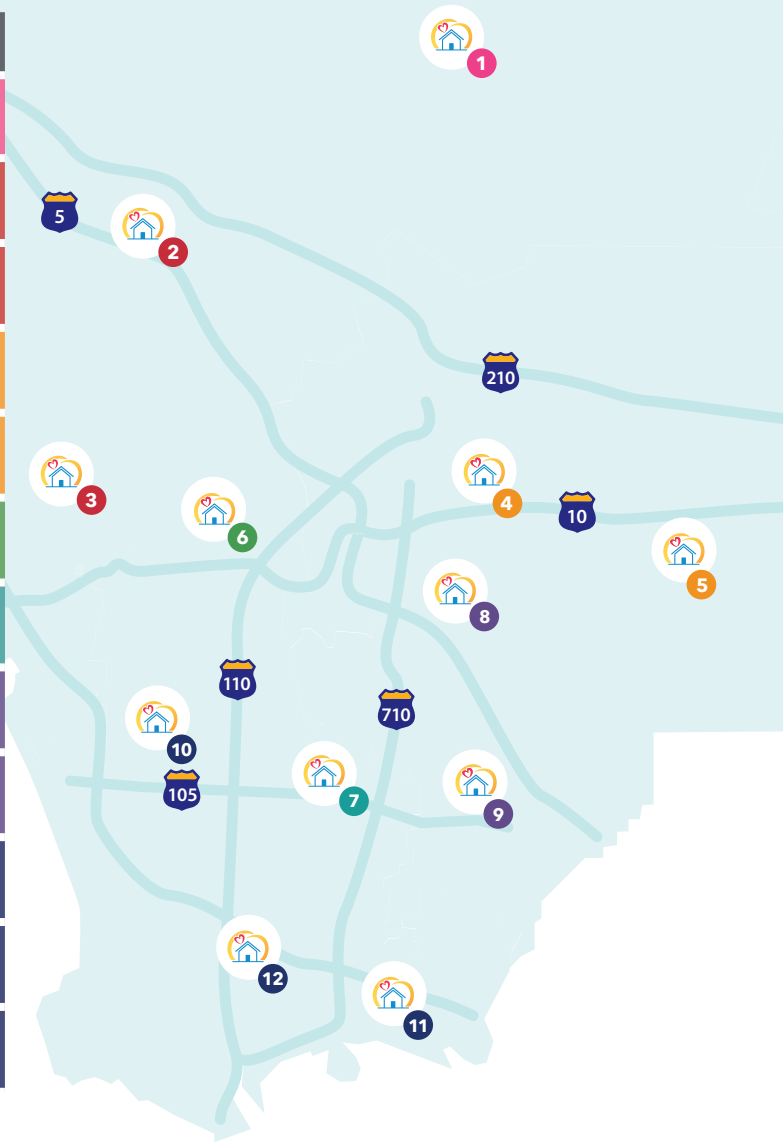


Community Resource Center

Get Help Completing Your Medi-Cal Enrollment or Renewal Application

All Community Resource Centers (CRC) listed below will be offering assistance with Medi-Cal enrollment and renewals. If an individual needs help completing their Medi-Cal application or renewal packet, they can call a CRC listed below to schedule an appointment with an application assister. L.A. Care and Blue Shield Promise CRCs are open to our members and the general public.

CRC Location	Address and Phone Number
1. Palmdale	2072 E. Palmdale Blvd, Palmdale, CA 93550 1.213.438.5580
2. Panorama City (Opening January 2024)	7868 Van Nuys Blvd, Panorama City, CA 91402 1.213.438.5497
3. West L.A. (Opening January 2024)	11173 W. Pico Blvd. Los Angeles, CA 90064 1.310.231.3854
4. El Monte	3570 Santa Anita Avenue, El Monte, CA 91731 1.213.428.1495
5. Pomona	696 W. Holt Avenue, Pomona, CA 91768 1.909.620.1661
6. Metro L.A.	1233 S Western Avenue, Los Angeles, CA 90006 1.213.428.1457
7. Lynwood	3200 East Imperial Hwy, Lynwood, CA 90262 1.310.661.3000
8. East L.A.	4801 Whittier Blvd, Los Angeles, CA 90022 1.213.438.5570
9. Norwalk	11721 Rosecrans Avenue, Norwalk, CA 90650 1.562.651.6060
10. Inglewood	2864 W. Imperial Hwy, Inglewood, CA 90303 1.310.330.3130
11. Long Beach	5599 Atlantic Blvd, Long Beach, CA 90805 1.562.265.3130
12. Wilmington	911 North Avalon Blvd, Wilmington, CA 90744 1.213.428.1490



Blue Shield of California Promise Health Plan and Blue Cross of California are independent entities, contracted with L.A. Care Health Plan to provide Medi-Cal Managed Care services in Los Angeles County.

Blue Shield of California Promise Health Plan is an independent licensee of the Blue Shield Association.



For more information, visit **CommunityResourceCenterLA.org** or call **1.877.287.6290** (TTY 711), Monday through Friday, 9 a.m. to 5 p.m.
Scan the QR code to find a center near you.

Get Help Applying for Free or Low-Cost Health Coverage

All agencies listed below serve clients in Los Angeles County. Bilingual staff assist families with enrollment in public and private health programs. Please contact the agencies listed below for more information.

SPA 1	Antelope Valley, Lancaster, Palmdale, Northern LA County	Tarzana Treatment Center (661) 726-2630, ext 2186, 4323, or 4330
SPA 2	Burbank, Glendale, Northridge, Santa Clarita, San Fernando Valley	<ul style="list-style-type: none"> • Northeast Valley Health Corp (866) 696-3842 • Valley Community Healthcare (818) 763-8836 Ext 1053 • Child & Family Guidance Center (818) 739-5000
SPA 3	El Monte, Monrovia, Pomona, San Gabriel Valley	<ul style="list-style-type: none"> • Emanate Health, G.E.M. (626) 851-2748 • Asian Pacific Health Care Venture (323) 644-3882 • Maternal & Child Health Access (213) 749-4261 • Worksite Wellness LA (323) 758-9480
SPA 4	Boyle Heights, Chinatown, Downtown LA, Echo Park, El Sereno, Elysian Park, Hollywood, Koreatown, Little Toyko, Pico Union, Westlake	<ul style="list-style-type: none"> • Maternal & Child Health Access (213) 749-4261 • Dignity Community Care (213) 742-5537 • Asian Pacific Health Care Venture (323) 644-3882 • Chinatown Service Center (213) 808-1700 • Korean Health Education Information & Research (213) 637-1080 • Worksite Wellness LA (323) 758-9480
SPA 5	Culver City, Santa Monica, Venice, West Los Angeles	Venice Family Clinic (310) 664-7509
SPA 6	Compton, Crenshaw, Exposition Park, Florence, Watts, Jefferson Park, Leimert Park, Lynwood, Paramount, North University Park, South Central LA, University Park	<ul style="list-style-type: none"> • Dignity Community Care (213) 742-5537 • Community Health Councils (323) 295-9372 ext:228 or 256 • Maternal & Child Health Access (213) 749-4261 • Worksite Wellness LA (323) 758-9480
SPA 7	Artesia, Bell, Bellflower, Bell Gardens, Downey, East LA, Huntington Park, Hawaiian Gardens, Lakewood, Lynwood, Montebello, Norwalk, Pico Rivera, Santa Fe Springs, South Gate, Whittier	<ul style="list-style-type: none"> • Human Services Association (562) 806-5400 • Maternal & Child Health Access (213) 749-4261 • St. Francis Medical Center (800) 603-9355 • Worksite Wellness LA (323) 758-9480
SPA 8	Carson, Hawthorne, Inglewood, Lawndale, Lomita, San Pedro, Torrance, Wilmington	<ul style="list-style-type: none"> • Community Health Councils (323) 295-9372 ext:228 or 256 • Crystal Stairs, Inc. (323) 299-9295

For countywide assistance with healthcare advocacy and troubleshooting, call Maternal & Child Health Access at (213) 749-4261 or Neighborhood Legal Services at (800) 896-3202.

For healthcare support through your local public school, call: LA Unified, (213) 241-3840. All other school districts: LA County Office of Education, (562) 922-8954.

City of Long Beach
Dept. of Health & Human Services (562) 570-7979

Altadena, Pasadena & Sierra Madre
Pasadena Public Health Dept. (626)744-6068



Obtenga Asistencia Aplicando Para Cobertura de Salud Gratis o de Bajo Costo

Todas las agencias mencionadas abajo ayudan a los clientes en El Condado de Los Angeles. Empleados bilingües ayudan a las familias con la inscripción en programas de salud públicos y privados. Por favor, póngase en contacto con las agencias para más información. Las agencias se enumeran por áreas de planificación de servicio (SPA).

SPA 1	Antelope Valley, Lancaster, Palmdale, Northern LA County	Tarzana Treatment Center (661) 726-2630, ext 2186, 4323, or 4330
SPA 2	Burbank, Glendale, Northridge, Santa Clarita, San Fernando Valley	<ul style="list-style-type: none"> • Northeast Valley Health Corp (866) 696-3842 • Valley Community Healthcare (818) 763-8836 Ext 1053 • Child & Family Guidance Center (818) 739-5000
SPA 3	El Monte, Monrovia, Pomona, San Gabriel Valley	<ul style="list-style-type: none"> • Emanate Health, G.E.M. (626) 851-2748 • Asian Pacific Health Care Venture (323) 644-3882 • Maternal & Child Health Access (213) 749-4261 • Worksite Wellness LA (323) 758-9480
SPA 4	Boyle Heights, Chinatown, Downtown LA, Echo Park, El Sereno, Elysian Park, Hollywood, Koreatown, Little Toyko, Pico Union, Westlake	<ul style="list-style-type: none"> • Maternal & Child Health Access (213) 749-4261 • Dignity Community Care (213) 742-5537 • Asian Pacific Health Care Venture (323) 644-3882 • Chinatown Service Center (213) 808-1700 • Korean Health Education Information & Research (213) 637-1080 • Worksite Wellness LA (323) 758-9480
SPA 5	Culver City, Santa Monica, Venice, West Los Angeles	Venice Family Clinic (310) 664-7509
SPA 6	Compton, Crenshaw, Exposition Park, Florence, Watts, Jefferson Park, Leimert Park, Lynwood, Paramount, North University Park, South Central LA, University Park	<ul style="list-style-type: none"> • Dignity Community Care (213) 742-5537 • Community Health Councils (323) 295-9372 ext: 228 or 256 • Maternal & Child Health Access (213) 749-4261 • Worksite Wellness LA (323) 758-9480
SPA 7	Artesia, Bell, Bellflower, Bell Gardens, Downey, East LA, Huntington Park, Hawaiian Gardens, Lakewood, Lynwood, Montebello, Norwalk, Pico Rivera, Santa Fe Springs, South Gate, Whittier	<ul style="list-style-type: none"> • Human Services Association (562) 806-5400 • Maternal & Child Health Access (213) 749-4261 • St. Francis Medical Center (800) 603-9355 • Worksite Wellness LA (323) 758-9480
SPA 8	Carson, Hawthorne, Inglewood, Lawndale, Lomita, San Pedro, Torrance, Wilmington	<ul style="list-style-type: none"> • Community Health Councils (323) 295-9372 ext: 228 or 256 • Crystal Stairs, Inc. (323) 299-9295

Para obtener asistencia en todo el condado con defensa y solución de problemas de atención médica, llame a Maternal, Child, yHealth Access al (213) 749-4261 o Neighborhood Legal Services al (800) 896-3202.

Para obtener asistencia médica a través de su escuela pública local, llame al: LA Unified, (213) 241-3840. Todos los demás distritos escolares: Oficina de Educación del Condado de Los Ángeles, (562) 922-8954.

City of Long Beach
Dept. of Health & Human Services (562) 570-7979

Altadena, Pasadena & Sierra Madre
Pasadena Public Health Dept. (626)744-6068



**Medi-Cal Continuous Coverage Requirement
Department of Health Care Services
Communication Toolkit Phase 1**



MEDI-CAL CONTINUOUS COVERAGE REQUIREMENT

**Department of Health Care Services
Communication Toolkit Phase 1**



**DEPARTMENT OF
HEALTH CARE SERVICES**

Impact of COVID-19 on Medi-Cal Coverage

In January 2020, the U.S. Department of Health and Human Services (HHS) declared a [Public Health Emergency](#) (PHE) in response to the outbreak of COVID-19. Special rules were put in place during the COVID-19 PHE to allow more people to get access to and keep their Medi-Cal benefits. Prior to the PHE, California would review information provided by beneficiaries and renew their participation in Medi-Cal if they still qualified. However, when the continuous coverage requirement expires at the end of the PHE, California will need to conduct a full redetermination for all beneficiaries who would have otherwise been subject to redetermination.

Why Communications is Important

Currently, states are required to keep all Medicaid members continuously enrolled in health coverage. When the federal continuous coverage requirement ends, the process of redetermining individuals presents the single largest health coverage transition event since the first open enrollment of the Affordable Care Act and the Medicaid expansion. As California plans to resume normal business operations, beneficiaries will need to know what to expect and what they need to do to keep their health coverage. Most beneficiaries will either remain eligible for Medi-Cal or qualify for tax subsidies that will allow them to buy affordable coverage through Covered California.

This toolkit serves as a communications guide and provides resources to support ongoing preparations for the upcoming end of the continuous coverage requirement. Download the updated [Medi-Cal Continuous Coverage Resources](#) and start educating beneficiaries.

Communication Goals

The unwinding of federal Medicaid continuous coverage requirement necessitates a coordinated, phased communications plan to reach beneficiaries with messages across multiple channels using trusted messengers. The DHCS communication plan is designed to meet the following goals to help beneficiaries continue coverage once the COVID-19 PHE has ended:

- » **Educate** – Raise awareness of actions beneficiaries need to take and when they need to take them in order to maintain coverage.
- » **Engage** – Engage community partners with necessary tools for reaching beneficiaries.
- » **Provide Consistency** – Create a consistent voice across community partners.

Two-Phase Approach to Communications

- » **Phase 1** – This phase encourages beneficiaries to provide updated contact information, such as name, address, phone number, and email, so they can be contacted with important information about keeping their Medi-Cal benefits.
- » **Phase 2** – This phase will encourage beneficiaries to continue to update contact information, report any changes in circumstances, as well as check for upcoming renewal packets that may come through regular mail for cases that could not be renewed using information the local county office has available. Phase 2 will begin 60 days prior to the end of the PHE. A Phase 2 Outreach Toolkit will be released in the future.

DHCS Coverage Ambassadors

DHCS will engage community partners to serve as **DHCS Coverage Ambassadors** to deliver important messages to Medi-Cal beneficiaries about maintaining Medi-Cal coverage after the COVID-19 PHE ends. **DHCS Coverage Ambassadors** will be trusted messengers comprised of diverse organizations that can reach beneficiaries in culturally and linguistically appropriate ways. Additionally, **DHCS Coverage Ambassadors** will connect Medi-Cal beneficiaries at the local level with targeted and impactful communication.

Ambassadors may include, but are not limited to:



DHCS



Community Organizations



Providers



Stakeholders



Managed Care Plans



Health Care Facilities



Local County Offices



Clinics



Health Navigators



State Agencies



Advocates

Communication Strategies:

PLAN	EDUCATE	RENEW	TRANSITION
<p>Objective: State and partners engage in operational planning and develop coordinating mechanisms.</p>	<p>Objective: Medi-Cal beneficiaries are informed of upcoming changes.</p>	<p>Objective: Medi-Cal beneficiaries understand how to renew and take steps to do so.</p>	<p>Objective: Individuals transition to new coverage if no longer eligible for Medi-Cal.</p>
<p>Primary Audience: DHCS Coverage Ambassadors that work with Medi-Cal beneficiaries.</p>	<p>Primary Audience: DHCS Coverage Ambassadors; beneficiaries who will need to take action to stay enrolled.</p>	<p>Primary Audience: All Medi-Cal beneficiaries.</p>	<p>Primary Audience: Medi-Cal ineligible individuals; uninsured; eligible individuals who lose coverage due to procedural reasons.</p>
<p>Update your contact information. Make sure local county offices and health plans have your correct mailing address, phone number, and email address to reach you with important updates about your health coverage.</p>	<p>Get ready. COVID-19 PHE is ending. Here's what you need to know about upcoming changes to Medi-Cal eligibility and what you can do to prepare.</p>	<p>It's time to renew. Renew your Medi-Cal health coverage now. Here's what you need to do to keep your coverage.</p>	<p>If you are no longer eligible for Medi-Cal, there are other low-cost health insurance options. Financial help is available to lower costs. Visit Covered California to find a plan.</p>

DHCS Phase 1 Toolkit: Goals, Content Area, Tactics

Outreach Goals	Audience		
	Beneficiaries	Ambassadors	Call Centers
Raise awareness of actions beneficiaries need to take and when they need to take them in order to maintain coverage.		×	
Engage community partners with necessary tools for reaching beneficiaries.		×	
Create a consistent voice across community partners.		×	×
Toolkit Content			
Call Script		×	×
Interactive Voice Response (IVR) Call Script		×	×
Flyer/Insert Snippet	×	×	
Social Media	×	×	
Website Banner	×	×	
Website Text for County Office Page	×	×	

Raise Awareness

- » Download the [updated Medi-Cal Continuous Coverage Resources](#) and start educating beneficiaries.

Outreach Tactics

Call Script

- » Scripted messages shared with call center staff

IVR Call Script

- » Scripted messages shared with call center staff

Flyer/Insert Snippet

- » Direct mail to beneficiaries
- » Share in ambassador locations, including:
 - » Community centers
 - » Women, Infants & Children (WIC) and Supplemental Nutrition Assistance Program (SNAP) offices
 - » Hospitals
 - » School nurse offices
 - » School health centers
 - » Local County Offices

Social Media

- » Twitter
- » Facebook
- » Instagram
- » LinkedIn

Website Banner

- » Share on local county office websites
- » Program websites

Website Text for County Office Page

- » Share on local county office websites

Toolkit Content

The following resources provide ready-to-use messaging and materials that can be shared in your community:

Call Script Snippet

Beneficiary Caller	County/Managed Care Plan/ Community Partner/Agent
Do I need to report any household changes to keep my Medi-Cal coverage?	Yes, you are required to report any changes in your household, such as income, if someone becomes pregnant, a new household member, and any changes to your address, to your local county office. This may help ensure that you continue to receive your Medi-Cal coverage after the end of the federal COVID-19 public health emergency. [insert local county contact information]
Are we required to fill out and return renewal packets when we receive them?	Yes, it is important that Medi-Cal beneficiaries respond to county requests for updated information, including renewal packets. This will make sure the county has the most current information it needs to renew your Medi-Cal coverage. It will also help the county see if you qualify for other no-cost or lower cost coverage.
Will I be discontinued from Medi-Cal coverage if I got a raise during the COVID-19 public health emergency?	Please report income changes to your local county office. If your income goes up or your household changes, as long as the COVID-19 public health emergency continues, you will not lose your Medi-Cal coverage.

I moved. Whom should I tell that I moved?

County Response: We can update your address. You may report this change by phone, online, mail, fax, or in person.

Managed Care Plan Response: We can update your address for your managed care plan. It's important that we share this information with the county so you can continue receiving important notices about your Medi-Cal. Is that OK with you? If you do not want us to share your new address with your local county office, you will need to contact them directly and provide your updated information. [insert local county contact information]

Community Partners Response: Please contact your local county office to provide your new address to ensure that your Medi-Cal coverage continues. [insert local county contact information]

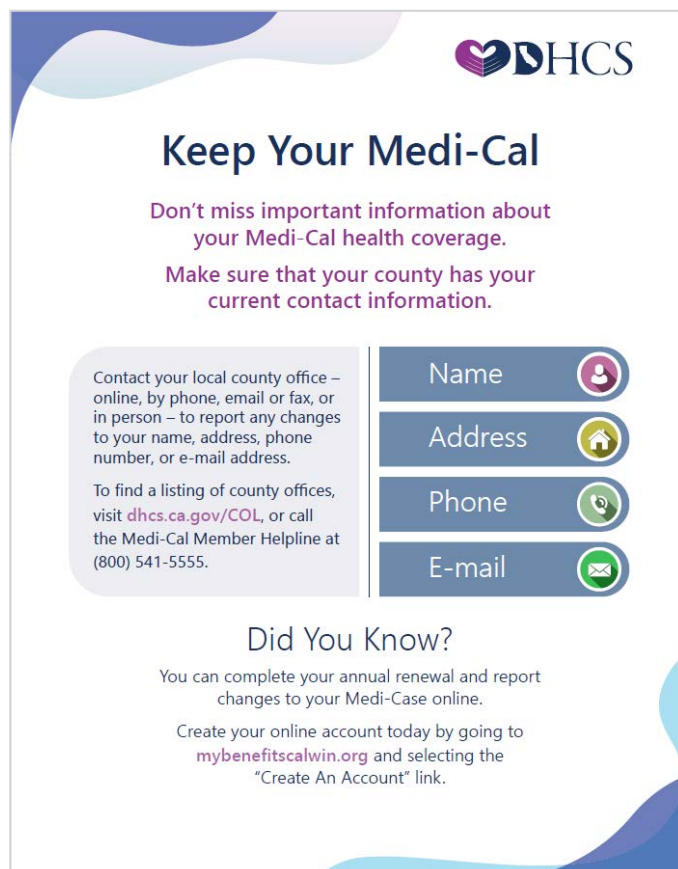
How do I sign up for an online account to access my Medi-Cal case or report changes?

You can access your Medi-Cal case, complete your annual renewal, or report changes to your case by creating an online account. You can create one today by going to benefitscal.com and selecting the "Create an Account" link in the upper right hand corner of the page.

IVR Call Script

- » If you've moved within the last two years, please provide your new address to your local county Medi-Cal office to ensure you continue to receive important information about your Medi-Cal coverage.
- » Please report changes in your household, such as income, pregnancy, a new household member, or address, to your local county Medi-Cal office as soon as possible.
- » Report any changes to your contact information (phone number, email, or mailing address) to your local county Medi-Cal office online or by phone, email, fax, or in person.

Flyers



The flyer features the DHCS logo at the top right. The main heading is "Keep Your Medi-Cal" in a large, bold font. Below it, two lines of text emphasize the importance of keeping contact information current. A central box lists four contact methods: Name, Address, Phone, and E-mail, each with a corresponding icon. To the left of this box, text explains how to report changes and how to find county office listings. At the bottom, a "Did You Know?" section provides information about online renewals and account creation.

DHCS

Keep Your Medi-Cal

Don't miss important information about your Medi-Cal health coverage.

Make sure that your county has your current contact information.

Contact your local county office – online, by phone, email or fax, or in person – to report any changes to your name, address, phone number, or e-mail address.

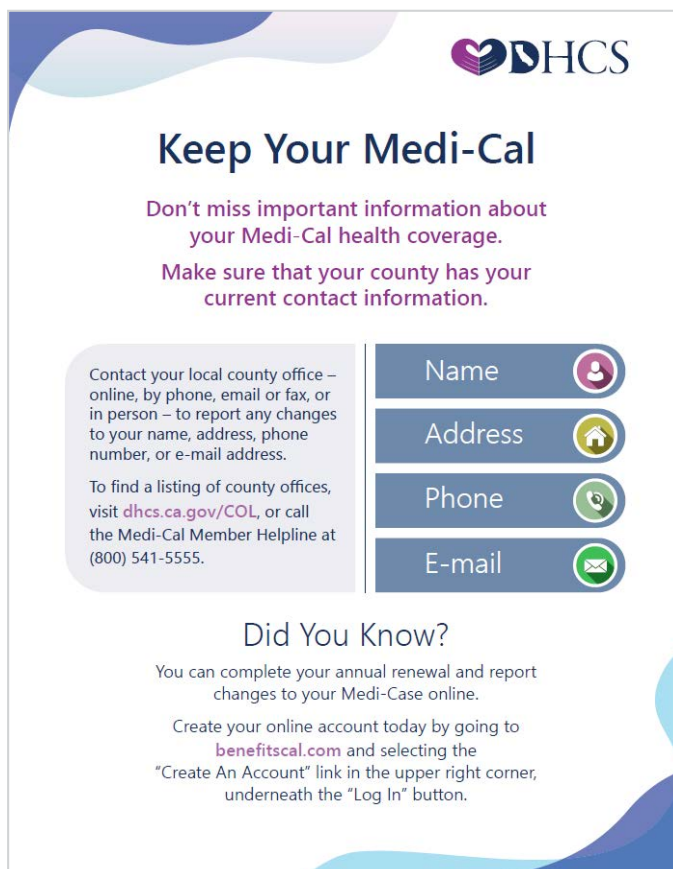
To find a listing of county offices, visit dhcs.ca.gov/COL, or call the Medi-Cal Member Helpline at (800) 541-5555.

- Name
- Address
- Phone
- E-mail

Did You Know?

You can complete your annual renewal and report changes to your Medi-Case online.

Create your online account today by going to mybenefitscalwin.org and selecting the "Create An Account" link.



The flyer features the DHCS logo at the top right. The main heading is "Keep Your Medi-Cal" in a large, bold font. Below it, two lines of text emphasize the importance of keeping contact information current. A central box lists four contact methods: Name, Address, Phone, and E-mail, each with a corresponding icon. To the left of this box, text explains how to report changes and how to find county office listings. At the bottom, a "Did You Know?" section provides information about online renewals and account creation.

DHCS

Keep Your Medi-Cal

Don't miss important information about your Medi-Cal health coverage.

Make sure that your county has your current contact information.

Contact your local county office – online, by phone, email or fax, or in person – to report any changes to your name, address, phone number, or e-mail address.

To find a listing of county offices, visit dhcs.ca.gov/COL, or call the Medi-Cal Member Helpline at (800) 541-5555.

- Name
- Address
- Phone
- E-mail

Did You Know?

You can complete your annual renewal and report changes to your Medi-Case online.

Create your online account today by going to benefitscal.com and selecting the "Create An Account" link in the upper right corner, underneath the "Log In" button.

Social Media

Your Medi-Cal county eligibility worker may soon contact you to ensure your contact information is correct. If not, please provide the county with your updated information so you can continue receiving important information about your Medi-Cal coverage: <http://dhcs.ca.gov/COL>. [local county contact information can be inserted here]



Medi-Cal Beneficiaries

Keep your contact information
(phone, address, or email)
current to get important information about
your Medi-Cal health coverage.

Contact your Medi-Cal county
eligibility worker today.



Medi-Cal Beneficiaries

Has your contact information
changed in the past two years?

Contact your Medi-Cal county
eligibility worker today.



Have you moved? Let your Medi-Cal county eligibility worker know. It's important to provide the county with your updated information so you can continue receiving Medi-Cal coverage information, such as renewal packets, benefit change notices, or other vital reminders: <http://dhcs.ca.gov/COL>. [local county contact information can be inserted here]



Medi-Cal Beneficiaries

Have you moved?

Don't miss out receiving important
information. Let your Medi-Cal eligibility
worker know you have a new address.



Medi-Cal Beneficiaries

Has your phone number changed?

Don't miss out on receiving important information. Let your Medi-Cal eligibility worker know you have a new phone number.



Did you start a new job? Let your Medi-Cal county eligibility worker know. It's important that you report your new income to the county as soon as possible. You will still keep your Medi-Cal coverage during the COVID-19 public health emergency: <http://dhcs.ca.gov/COL>.

Medi-Cal Beneficiaries

Did you start a new job?

It's important that you report your new income as soon as possible

Contact your Medi-Cal county eligibility worker today.



Are you pregnant? Let your Medi-Cal county eligibility worker know. It's important that you report any household changes as soon as possible. You will still keep your Medi-Cal coverage during the COVID-19 public health emergency: <http://dhcs.ca.gov/COL>.

Medi-Cal Beneficiaries

Are you pregnant?

It's important that you report any household changes as soon as possible.

Contact your Medi-Cal county eligibility worker today.



You must report any household changes to your Medi-Cal county office as soon as possible. You can report changes in person, online, or by phone, email, or fax.

A graphic banner with a white background and blue and purple wavy borders. It contains the following text:

Medi-Cal Beneficiaries

Do you have any household changes?

You can report changes in person, online, by phone, email, or fax.

Contact your Medi-Cal local county office today.

The logo for the Department of Health Care Services (DHCS), featuring a stylized heart shape with the letters 'DHCS' above it.

Website Banner

Important: Are you enrolled in Medi-Cal? Has your contact information changed in the past two years? Give your county office your updated contact information so you can stay enrolled. [Find your local county office.](#)

Website Text for County Office Page

During the COVID-19 public health emergency (PHE), Medi-Cal beneficiaries have stayed enrolled in the program. If your contact information or household circumstances have changed, please update your information today by contacting your local county office at: [phone number, SAWS portal, and county link to directory]. This may help you keep your Medi-Cal coverage after the COVID-19 PHE ends.

**Medi-Cal Continuous Coverage Requirement
Department of Health Care Services
Communication Toolkit Phase 2**



MEDI-CAL CONTINUOUS COVERAGE REQUIREMENT

**Department of Health Care Services
Communication Toolkit Phase 2**



Overview

In March 2020, the Centers for Medicare & Medicaid Services (CMS) temporarily waived certain Medicaid and Children's Health Insurance Program (CHIP) requirements and conditions in response to COVID-19. The easing of these rules helped people with Medicaid (Medi-Cal in California) and CHIP—in all 50 states, the District of Columbia, and the five U.S. territories—keep their health coverage during the pandemic. However, a new law ends Medicaid continuous coverage on March 31, 2023 and requires states to restart eligibility renewals beginning April 1, 2023.

Two-Phase Approach to Communications

DHCS is implementing a two-phased communication campaign to reach beneficiaries with messages across multiple channels using trusted partners called [DHCS Coverage Ambassadors](#).

Phase 1, Awareness – Launched in spring 2022, to encourage beneficiaries to provide updated contact information, such as name, address, phone number, and email address, so they can be contacted with important information about keeping their Medi-Cal benefits. Messaging focuses on “Keep yourself and your family covered.”

Phase 2, Renewal – Beginning in February, this stage will continue encouraging beneficiaries to update contact information and report any changes in personal circumstances. DHCS Coverage Ambassadors can use content from the [Medi-Cal Continuous Coverage Communication Toolkit - Phase 1](#) to encourage beneficiaries to update contact information. Additionally, it will also remind beneficiaries to check their mail for upcoming renewal packets they will receive by mail that will be issued for those who could not be renewed using information the local county office already has available. Beneficiaries will also be encouraged to check their online accounts for renewal alerts. The template messaging in this toolkit for Phase 2 focuses on themes including “Renew it or lose it” and “Time to renew” language, to emphasize the importance and urgency of renewal. The resources provided in this toolkit will further assist DHCS Coverage Ambassadors with outreach to beneficiaries about their renewals, and what they need to do to avoid a gap in coverage.

The focus of the communications campaign messaging is to encourage beneficiaries to report any changes in contact information including name, current address, email address, or phone number. Beneficiaries can update contact information in person, phone, mail, or online, if it has changed.

DHCS Coverage Ambassadors

Sign up to become a [DHCS Coverage Ambassador](#) today.

The Medi-Cal continuous coverage toolkit and webpage are available to help DHCS Coverage Ambassadors to customize push communications to Medi-Cal beneficiaries to encourage them to update their contact information with their counties, if it has changed. This will help ensure they receive important information about keeping their Medi-Cal coverage.

As further communications are needed, updated toolkits will be posted on the DHCS website as they become available and will be distributed to DHCS Coverage Ambassadors.

Key Messages

DHCS Coverage Ambassadors should focus on encouraging beneficiaries to get ready to renew their Medi-Cal coverage. Messages should be simple, direct, and informative:

Awareness

- **Log into your account** – Make sure that Medi-Cal has up-to-date information. Visit KeepMediCalCoverage.org to learn more and to sign up for email and text message alerts.

or

- **Update your contact information** – Make sure counties have your current name, mailing address, phone number, email address, or other contact information if it has changed. This way, counties can contact you about your Medi-Cal.

Renewal

- **Create or check your online account** – Create or check your Covered California, BenefitsCal, or MyBenefitsCalWIN account for alerts. You may be able to submit renewals or requested information online.
- **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.

Outreach Tactics

The following section is a list of available outreach materials:

Call Script

- » Scripted messages shared with call center staff

Emails

- » Direct emails to beneficiaries

Flyer/Insert Snippet

- » Direct mail to beneficiaries
- » Share at ambassador locations, that may include:
 - Community centers
 - Women, Infants, and Children (WIC) and CalFresh offices
 - Hospitals, clinics, pharmacies, or other health care setting
 - School nurse offices
 - School health centers
 - Local county offices
 - Any other place to reach Medi-Cal beneficiaries

Interactive Voice Response

- » Scripted messages shared with call center staff

Messaging about online portals

- » Share on websites
- » Direct emails to beneficiaries

Messaging for Supplemental Security Income (SSI) Beneficiaries

- » Share on local county office websites
- » Program websites

Social Media

- » Twitter
- » Facebook
- » Instagram
- » LinkedIn

Text Messages

- » Direct text messages to beneficiaries

Website Text for County Office Page

- » Share on local county office websites

Toolkit Content

Call Script Snippets

Beneficiary Caller	County/Managed Care Plan/Community Partner/Agent
Do I need to complete a Medi-Cal renewal?	<p>You may soon need to take steps to find out if you still qualify for Medi-Cal. Counties will mail you a letter about your Medi-Cal eligibility. You may need to complete a renewal form. Make sure your current contact information is updated with your local county office, if it has changed. The local county office will only ask you for more information if they need it to renew your Medi-Cal. If you receive a renewal packet or a letter asking for more information, you may submit the information by mail, phone, in person, or online.</p>
When do I need to fill out and return my Medi-Cal renewal packet?	<p>You will get a letter in the mail. The letter will tell you if your Medi-Cal coverage was renewed automatically or if your county needs more information to renew your Medi-Cal. If you receive a renewal packet or a letter asking for more information, you may submit the information by mail, phone, in person, or online. Your county will let you know if you do not need to complete a renewal packet.</p> <p>The letter from your county should arrive around the same time as when you have received similar letters in past years. For example, if your Medi-Cal renewal was due in April in past years, you should watch for a letter from your county in the two months before April.</p>

What can I do to prepare for my Medi-Cal renewal?

If you moved recently, or if any of your contact information, like your phone number or email address, has changed, report your changes to your local county office to make sure you get important information about your Medi-Cal coverage. If you got a new job or your income has changed, be prepared to provide verifications.

Check your mail – Counties 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.

Create or check your online account –Covered California, BenefitsCal, or MyBenefitsCalWIN for alerts. You may submit renewals or requested information online.

How do I report a change if I have SSI?

If you get SSI, do not have a U.S. mailing address, and are unable to change your address online, you can report your change by:

- » Calling 1(800)772-1213 (TTY 1(800) 325-0778), Monday through Friday, 8 a.m. – 7 p.m.
- » Contacting your local Social Security office via their [online locator](#).

If you get SSI, Social Security will process your Medi-Cal renewal. If you have questions, call 1(800) 772-1213, or contact your local Social Security office.

What if I am no longer eligible for Medi-Cal?

If you no longer qualify for Medi-Cal, you may be able to get health coverage through Covered California. Losing Medi-Cal allows you to enroll in a Covered California plan outside of the open enrollment period. The local county office will send you information about how to sign up.

Emails

Subject Line: Your renewal letter is coming. Don't miss it!

Preview Text: Make sure your address and contact information is up to date with **[Customize local county office name]** if it has changed so you receive your Medi-Cal renewal letter in the mail.

Do you or a family member currently have health coverage through Medi-Cal? If so, here's what you need to know so you can keep your Medi-Cal.

Be on the lookout for a Medi-Cal renewal letter in the mail from **[Customize local county office name]**. Make sure your name, address, email address, and phone number are up to date with **[Customize local county office name]**. You can give your county your information by mail, phone, in person, or online.

If you have Medi-Cal, your local county office will try and renew your Medi-Cal. They will use the information they have. The local county office will only ask you for more information if they need it to renew your Medi-Cal. If you receive a renewal packet or a letter asking for more information, you may submit the information by mail, phone, in person, or online.

If your information has changed, you can update it online **[Customizable link mybenefitscalwin.org or benefitscal.com]**, or by calling **[customize local county office number]**.

Remember: Update your address, if it has changed. We don't want you to miss this important mail so you can keep your Medi-Cal.

Sincerely,

[Customize organization or local county office name]

Keep yourself and your family covered.



Make sure your information is up to date.

Medi-Cal covers vital health care services for you and your family, including doctor visits, prescriptions, vaccinations, mental health care, and more. So, if you have Medi-Cal, make sure you renew it when it's time.

Update your contact information

Report any new changes to your name, address, phone number, and email address, so your county can contact you.

Check your mail

Counties will mail you a letter about your Medi-Cal eligibility. You may need to complete a renewal form. If you've sent a renewal form, submit your information by mail, phone, in person, or online, so you don't lose your coverage.

Create or check your online account

You can sign up to receive alerts on your case. Create or log into your account to get these alerts. You may submit renewals or requested information online.

Complete your renewal form (if you get one)

If you received a renewal form, submit your information by mail, phone, in person, or online to help avoid a gap in your coverage.

For more details and to learn how to update your contact information, visit [KeepMediCalCoverage.org](https://www.KeepMediCalCoverage.org)



Medi-Cal



Medi-Cal Beneficiaries:

Take action to keep your Medi-Cal

Your local county office will mail you a letter about your Medi-Cal coverage.



The letter will tell you if:

Your county needs information from you to renew your Medi-Cal

or

Your Medi-Cal was renewed automatically



If you get a renewal form, please fill it out and return it right away.

Check that your local county office has your updated information, including your name, current address, email address, and phone number.



For more details and to learn how to update your contact information, visit KeepMediCalCoverage.org



Medi-Cal

IVR Call Script

- » It's almost time to renew your Medi-Cal coverage. You may need to take action to keep your coverage. If your current address, email address or phone number have changed, please update your information with your local county office. Remember to check your mail for a letter about your Medi-Cal coverage.
- » It's almost time to renew your Medi-Cal coverage. You may need to take action to keep your coverage. Please respond as soon as possible to all requests for information from your local county office.
- » It's almost time to renew your Medi-Cal coverage. If you receive a renewal packet or a letter asking for more information, you may submit the information by mail, phone, in person, or online.

Messaging About Online Portals

Individuals can update their contact information or complete their renewals online.

- » Covered California
 - You can update your information on the Covered California portal. Covered California is available statewide. Visit [Covered California](#) for more information about how to access your online account or call the service center at (800) 300-1506.
- » BenefitsCal
 - You can update your information on the BenefitsCal portal. BenefitsCal will be phasing in statewide in 2023. Visit [BenefitsCal](#) for more information about how to access your online account.
- » My Benefits CalWIN
 - You can update your information on the My Benefits CalWIN portal. My Benefits CalWIN is available in certain counties. Visit [My Benefits CalWIN](#) for more information about how to access your online account.

Messaging for Supplemental Security Income Beneficiaries

Individuals who have Supplemental Security Income (SSI) get Medi-Cal through the Social Security Administration.

The statement below can be used for outreach to Medi-Cal beneficiaries who are receiving SSI:

- » If you get SSI, report your address change by calling 1(800) 772-1213, or contact your [local Social Security office](#).
- » If you get SSI, Social Security will process your Medi-Cal renewal. If you have questions, call 1(800) 772-1213, or contact your [local Social Security office](#).

Social Media

You can report any changes to your information in person, by phone, mail or online.

Keep yourself and your family covered. Log into your account to make sure Medi-Cal has your current address, email address, and phone number. For more information or to sign up for email and text message alerts, visit KeepMediCalCoverage.org.

MEDI-CAL BENEFICIARIES

It's almost time to renew your Medi-Cal coverage.

Report any changes to your contact information.

Medi-Ca

This graphic features a dark blue header with the text 'MEDI-CAL BENEFICIARIES'. The main content is on a white background with a blue border. The text reads 'It's almost time to renew your Medi-Cal coverage.' followed by 'Report any changes to your contact information.' Below the text is the Medi-Ca logo, which consists of a stylized orange flower icon and the text 'Medi-Ca'. To the right of the text is a vertical orange bar containing a white line-art illustration of a family (two adults and a child) standing under a heart-shaped umbrella.

It's almost time to renew your Medi-Cal coverage. If you receive a renewal form in the mail, your county needs more information. Fill it out and return it right away to keep yourself and your family covered. Visit KeepMediCalCoverage.org to learn more and to sign up for email and text message alerts.

MEDI-CAL BENEFICIARIES

Take action to keep your Medi-Cal!

Watch for an important renewal letter coming soon.

Medi-Ca

This graphic features a dark blue header with the text 'MEDI-CAL BENEFICIARIES'. The main content is on a white background with a blue border. The text reads 'Take action to keep your Medi-Cal!' followed by 'Watch for an important renewal letter coming soon.' Below the text is the Medi-Ca logo, which consists of a stylized orange flower icon and the text 'Medi-Ca'. To the right of the text is a vertical orange bar containing a white line-art illustration of a person standing at a desk, holding a letter that is glowing with light rays.

Text Messages

You can report information in person, phone, mail, or online.

- » To get your Medi-Cal renewal letter, make sure you've updated your contact information if it changed recently. You can report information in person, phone, mail, or online: [\[Customizable Link\]](#)
- » Don't miss your Medi-Cal renewal letter. Update your contact information in person, phone, mail, or online, if it changed: [\[Customizable Link\]](#)
- » Take action to keep your Medi-Cal. Make sure your address is up to date so you get your renewal letter. If your information has changed, you can update it in person, by phone, mail, or online: [\[Customizable Link\]](#)
- » Medi-Cal renewals are coming soon. Make sure your address is up to date. If your information has changed, you can update it in person, by phone, mail, or online: [\[Customizable Link\]](#)
- » Did you get a Medi-Cal renewal packet? Fill it out and return it to your county in person, phone, mail, or online, as soon as possible. [\[Customizable Link\]](#)

Website Text for County Office Page

You can report information in person, phone, mail, or online.

It's almost time to renew your Medi-Cal coverage. You will get a letter in the mail that tells you if your Medi-Cal was renewed automatically by the county or if your county needs more information. If you receive a renewal packet or a notice asking for more information, you may submit the information by mail, phone, in person, or online.

If your contact information changed, please update your information today by contacting: [\[phone number, SAWS portal, or county link to directory\]](#). This may help you keep your Medi-Cal coverage.

Renewal Eligibility Sequencing Maps



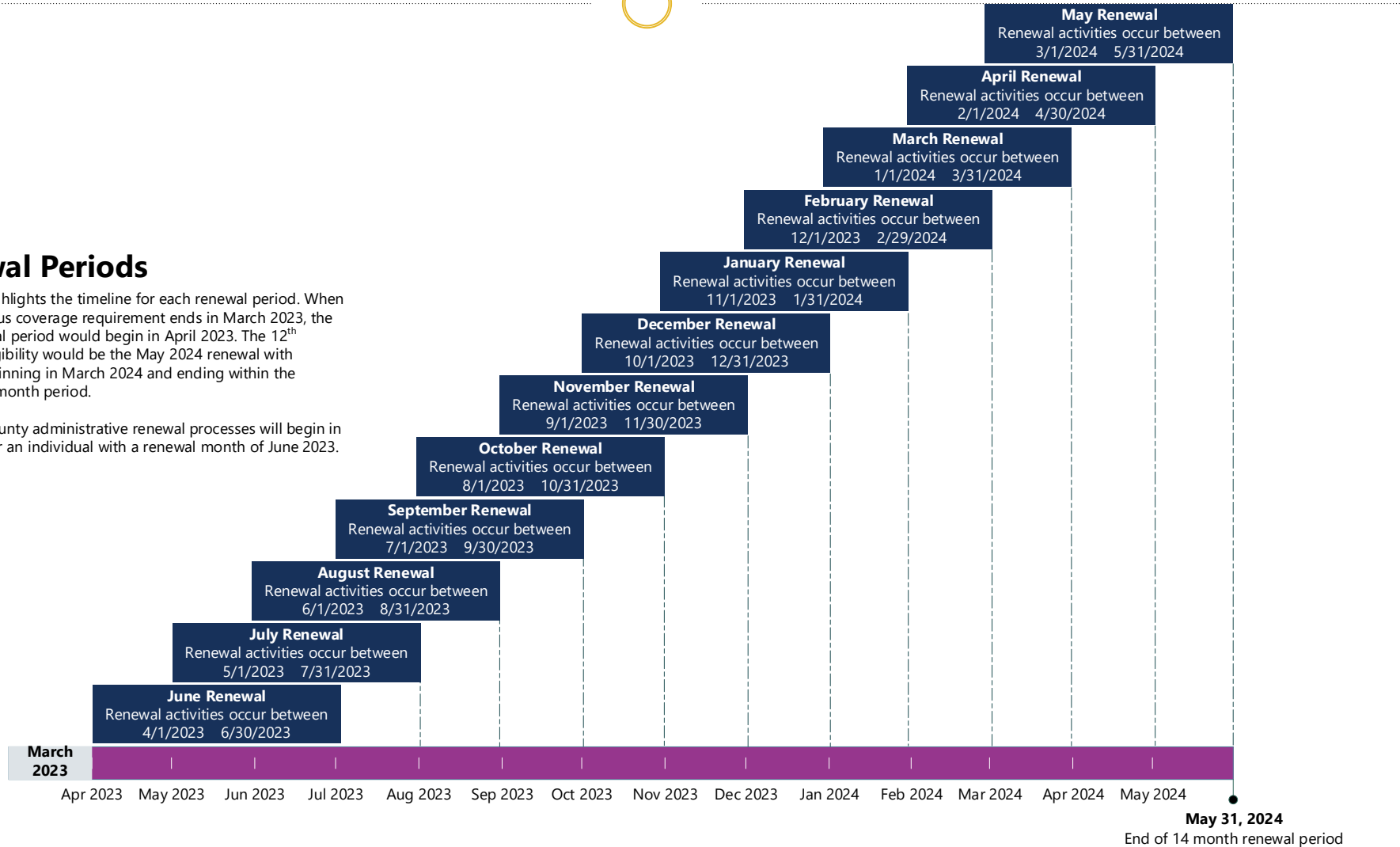
ELIGIBILITY SEQUENCING MAP



Renewal Periods

This page highlights the timeline for each renewal period. When the continuous coverage requirement ends in March 2023, the DHCS renewal period would begin in April 2023. The 12th month of eligibility would be the May 2024 renewal with activities beginning in March 2024 and ending within the required 14-month period.

Example: County administrative renewal processes will begin in April 2023 for an individual with a renewal month of June 2023.

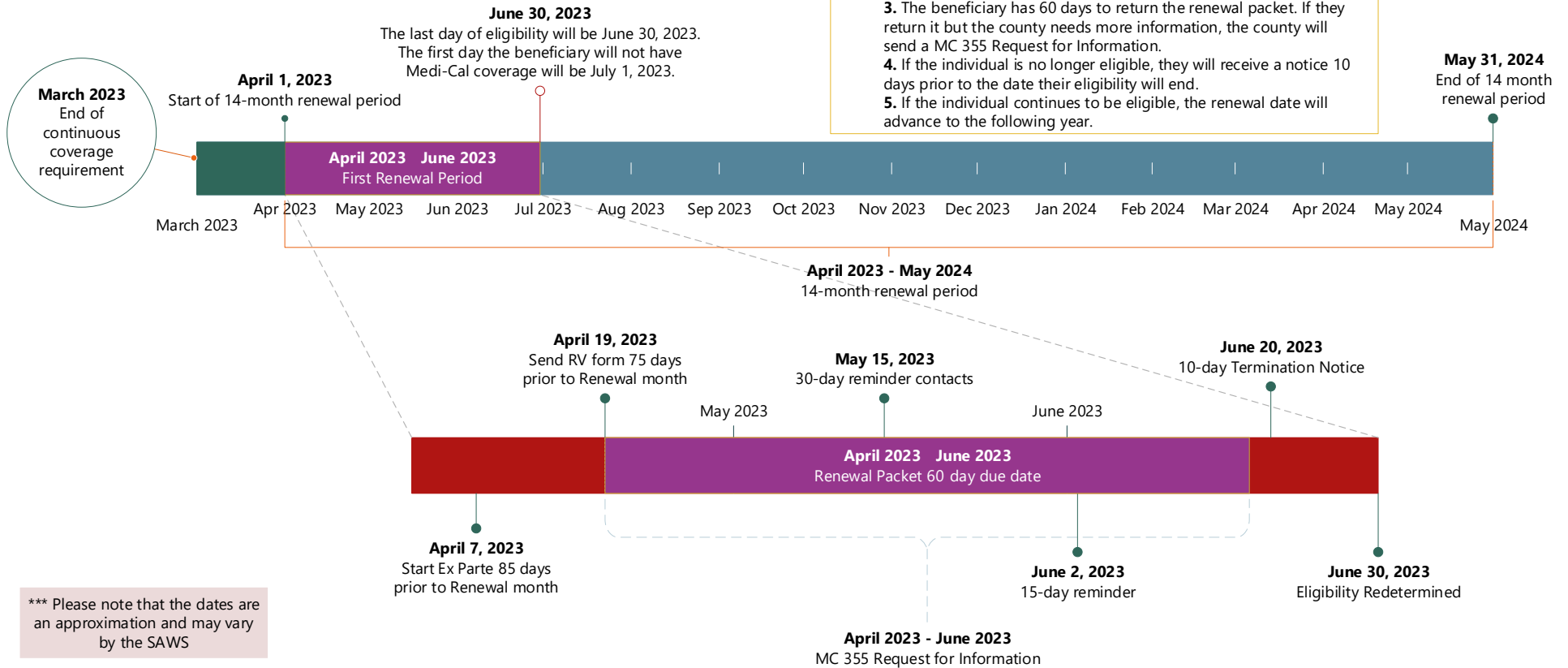


ELIGIBILITY SEQUENCING MAP

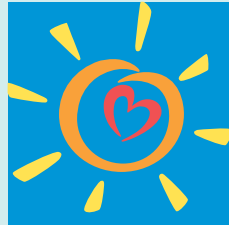


June Renewal Month
 This map highlights the county renewal activities for an individual whose renewal month is June 2023. When the continuous coverage requirement ends in March 2023, counties would begin the following renewal activities.

1. 85 days prior the county will attempt to renew eligibility using available information and data sources without contacting the beneficiary.
2. If the county is unsuccessful, they will send a renewal packet at least 75 days prior to the renewal month.
3. The beneficiary has 60 days to return the renewal packet. If they return it but the county needs more information, the county will send a MC 355 Request for Information.
4. If the individual is no longer eligible, they will receive a notice 10 days prior to the date their eligibility will end.
5. If the individual continues to be eligible, the renewal date will advance to the following year.



*** Please note that the dates are an approximation and may vary by the SAWS



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