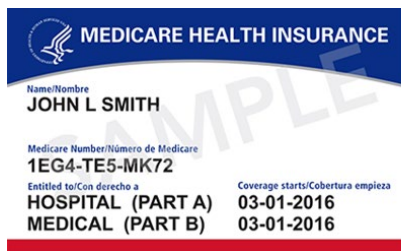


Medi-Cal Managed Care Changes in January 2023 for Dual Eligible (Medi-Medi) Beneficiaries



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On January 1, 2023, Medi-Cal health coverage in some counties will change from Fee-For-Service (FFS) Medi-Cal to Medi-Cal Managed Care. Notices will be sent by November 1 and December 1, 2022. **Your Medicare benefits and providers will not change.**

For people with both Medicare and Medi-Cal, Medi-Cal coverage will change to Medi-Cal managed care in the counties listed below. In all other counties, Medi-Cal is already provided through Medi-Cal managed care plans:

Alameda, Alpine, Amador, Butte, Calaveras, Colusa, Contra Costa, El Dorado, Fresno, Glenn, Imperial, Inyo, Kern, Kings, Madera, Mariposa, Mono, Nevada, Placer, Plumas, Sacramento, San Benito, San Francisco, San Joaquin, Sierra, Stanislaus, Sutter, Tehama, Tuolumne, Tulare, and Yuba counties.

Joining a Medi-Cal Managed Care Plan will NOT Change Your Medicare Benefits

Your Medicare benefits will not change after you join a Medi-Cal plan. Joining a Medi-Cal plan will not affect your Medicare providers or choice of Medicare Advantage plan or Original Medicare. Medicare providers do not need to be in the Medi-Cal plan network to continue to provide you care. You can still see your Medicare providers and go to the hospital where you see your Medicare doctors.

Choosing a Medi-Cal Managed Care Plan

Your Medi-Cal plan choices depend on the county you live in, and whether you are in a Medicare Advantage plan. Learn more about your choices by visiting [Health Care Options \(HCO\)](#) or calling 1-800-430-4263.

What is a Medi-Cal Managed Care Plan?

A Medi-Cal plan is a health plan that coordinates all your Medi-Cal benefits. Your Medi-Cal plan can give you extra benefits along with your Medicare benefits. These Medi-Cal benefits include:

- Coordination of any Long-Term Services and Supports you use or need
- Transportation to and from medical appointments
- Special medical equipment and supplies to help you manage your health
- Enhanced Care Management and Community Supports to help you remain safely in your home

After joining a Medi-Cal plan, you may still get some Medi-Cal services through other agencies, including:

- In-Home Supportive Services (IHSS)
- Specialty mental health and substance use disorder treatment services
- Medi-Cal Dental services
- Regional Center services
- Most Medi-Cal pharmacy services

Joining a Medi-Cal Managed Care Plan will NOT Change Your IHSS or Other Supports

The following Medi-Cal benefits will not change when you join a Medi-Cal plan:

- In-Home Supportive Services (IHSS)
- Community-Based Adult Services (CBAS)
- Multipurpose Senior Services Program (MSSP)
- Nursing facility services

Additional Resources

- For more information on the Medi-Cal plan choices in your county, visit [Health Care Options](#) or call 1-800-430-4263
- For free counseling on Medicare options, contact the Health Insurance Counseling and Advocacy Program (HICAP): 1-800-434-0222
- If you need help with a problem that your health plan has not been able to resolve, call the Medicare Medi-Cal Ombudsman: 1-855-501-3077
- For more information on the Medi-Cal managed care transition, please visit this webpage at the California Department of Health Care Services: [Statewide Medi-Cal Managed Care Enrollment for Dual Eligible Beneficiaries](#)