

Open Enrollment and Renewals Clarifying Text
Updated 9/29/14

<p>Medi-Cal Open Enrollment</p>	<p>Medi-Cal is open year-round. You can enroll in Medi-Cal during any month of the year. If you are eligible for Medi-Cal, you are eligible for the entire month in which you were found eligible. In some cases, you may be able to get Medi-Cal coverage right away. However, you can only enroll in Covered California health plans during the open enrollment period.</p> <p>No Wrong Door – Many Ways to Enroll in Medi-Cal:</p> <ul style="list-style-type: none"> ➤ Online: CoveredCA.com or county enrollment portals ➤ In person: County Social Services Office, Certified Enrollment Counselor or Certified Insurance Agent ➤ Phone: County Social Services Office <p>You can also enroll in Medi-Cal through other programs:</p> <p>Express Lane Enrollment: Those currently enrolled in CalFresh (SNAP) can get Medi-Cal eligibility using CalFresh income eligibility for adults and children.</p> <p>Hospital Presumptive Eligibility: Individuals to be determined eligible for Medi-Cal at a hospital based on self-attestation of residency, immigration status and income</p>
<p>Medi-Cal Renewals</p>	<p>2014 Renewals</p> <p>Annual redetermination packets have been slightly delayed this year. Your coverage will not be disrupted due to you receiving your annual redetermination packet late. You will notice the process this year has changed.</p> <p>The county will attempt to renew you automatically but will need some additional information from you about your taxes.</p> <p>You will be sent your renewal form to obtain the required tax information to make your eligibility determination in the near future. Previously tax information was not a requirement for Medi-Cal eligibility. Once you receive the form, you can return it to your local county welfare department in person, via mail, over the phone, or by fax.</p> <p>2015 Renewals</p> <p>The county will try to renew your eligibility automatically using information that they already have about your residency, immigration status and income. If the county is able to verify all your information, your coverage will be renewed and you will receive a notice of your continued coverage.</p> <p>If we are unable to verify your information, the county will send you a renewal form that will need to be returned. Once completed and returned, the county will issue a notice with your current eligibility. Beneficiaries who do not return the renewal form on time</p>

	will have their Medi-Cal discontinued.
Eligibility	<p>Anyone who lives in California can apply for health insurance using this application. Only people who are applying must provide Social Security numbers or information about immigration status.</p> <p>But you may qualify for certain health insurance programs regardless of your immigration status and even if you do not have a Social Security number. You may be eligible for Medi-Cal even if you are not a U.S. citizen or a U.S. national.</p> <p>We keep your information private and only share information with other government agencies to see which programs you qualify for.</p>
Application Timeline	<p>The process for verifying your Medi-Cal eligibility, from the time your completed application is received to when you receive your Benefits Identification Card (BIC), normally takes 45 days. The general process for verification is as follows:</p> <p>Apply – Complete application and submit it either in person, by mail, by phone, or online.</p> <p>Receive a Notification of Likely Eligibility by mail.</p> <p>Your county’s social services office may contact you by mail or phone to request paper verification if income, citizenship and other criteria cannot be verified electronically.</p> <p>Receive Final Notice of Action notifying you of whether or not you can receive Medi-Cal.</p> <p>Receive BIC – When you receive your BIC in the mail, you are able to use of the many Medi-Cal benefits available to you.</p> <p>Access Care - When you first qualify for Medi-Cal and receive your BIC, you are covered under Fee-For-Service (also called, Regular Medi-Cal). Within 45 days of receiving your BIC, you will be mailed information explaining your health plan options.</p> <p>However, you must choose a health plan within 30 days of receiving your health plan information mailer. If you do not choose a plan within 30 days, Medi-Cal will choose a plan for you. The health plans available to you depend on what county you live in. Go to Medi-Cal Managed Care Health Plan Directory and find your county.</p> <p>For those Medi-Cal members who are already enrolled and need to pick a health plan, you can do so at the Health Care Options website.</p>

	<p>If you see only one health plan, the county has chosen this plan for you. Please wait for your health plan information in the mail.</p> <p>If you see multiple health plans listed, please explore each plan and choose the one that suits you and your family's needs. Remember, if you do not pick a plan within 30 days of receiving your health plan information mailer, Medi-Cal will pick a plan for you.</p> <p>If you live in San Benito County, there is only one health plan available and you may enroll in this health plan. However, you may choose to stay with Fee-For-Service Medi-Cal.</p>
Pending Eligibility	<p>If you have already applied, you do not need to apply again. We are processing your application as quickly as possible. Due to the large number of Medi-Cal applications received, processing is taking longer than expected. Please read the letter we sent to those who are waiting for Medi-Cal to process their application.</p> <p>If you need immediate assistance, go to your county human services agency for in-person assistance with your application.</p> <p>In the event of an emergency in which medical care is needed, call 9-1-1 or go to your nearest hospital. If approved for coverage, Medi-Cal will cover costs associated with services rendered while your application was pending and go back to the date you submitted your application.</p>
Former Foster Youth	<p>A person, who was in Foster Care on their 18th birthday or later, may qualify for free Medi-Cal until their 26th birthday and income does not matter. For immediate coverage for former foster youth contact your county human services agency. Former Foster youth can also complete the MC 250 A form and send to their local office.</p> <p>http://www.dhcs.ca.gov/formsandpubs/forms/Forms/mc250a2014.pdf</p>
Retroactive Coverage	<p>The time limit for retroactive Medi-Cal coverage is three months prior to the month of application. If you received any health care services or prescriptions delivered by an enrolled Medi-Cal provider after your effective date, you can ask your provider to re-bill Medi-Cal. Only providers who are enrolled as Medi-Cal healthcare providers will be reimbursed by Medi-Cal for your care. The best way to ensure that you will not have to pay for your medical care is to ask your provider before your next appointment to see if they accept Medi-Cal.</p> <p>Please complete the form at the link below to receive retroactive coverage:</p> <p>http://www.dhcs.ca.gov/formsandpubs/forms/Forms/mc210a0907.pdf</p>

Self-employment	<p>People who are self-employed earn a living directly from their own business or services. They do not earn money from a company that pays them.</p> <p>If you are self-employed, you can subtract these items from your gross income to find your net self-employment income. See “Instructions for Schedule C” at www.irs.gov for more information.</p> <ul style="list-style-type: none"> • Car and truck expenses (workday travel, not commuting) • Depreciation • Employee wages and fringe benefits • Property, liability, or business interruption insurance • Interest (for example, mortgage interest paid to banks) • Legal and professional services • Rent or lease of business property and utilities • Commissions, taxes, licenses, and fees • Advertising • Contract labor • Repairs and maintenance • Certain business travel and meals
Other income	<p>These are other countable sources of income:</p> <ul style="list-style-type: none"> • Unemployment benefits • Social Security retirement • Social Security survivors • Social Security disability • Retirement or pension income • Rent or royalty income • Alimony received • Investment income • Capital gains • Farming or fishing income • Canceled debts • Court awards • Jury duty pay • Miscellaneous

Income deductions	<p>Deduct these items from your countable income:</p> <ul style="list-style-type: none"> • Certain self-employment expenses • Student loan interest deduction • Tuition and fees • Educator expenses • IRA contribution • Moving expenses • Penalty on early withdrawal of savings • Health savings account deduction • Alimony paid • Domestic production activities deduction • Certain business expenses of reservists, performing artists, and fee-basis government officials 																				
FPL Guidelines	<p>Estimate what type of health insurance you may be eligible for in 2015.</p> <table border="0" style="width: 100%;"> <tr> <td style="text-align: center;">You may be eligible for Medi-Cal.</td> <td style="text-align: center;">You may be eligible for insurance with financial help through Covered California.</td> </tr> </table> <table border="0" style="width: 100%; margin-top: 10px;"> <thead> <tr> <th style="text-align: center;">Number of people in your household</th> <th style="text-align: center;">If your annual household income is less than:</th> <th style="text-align: center;">If your annual household income is between:</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">\$16,105*</td> <td style="text-align: center;">\$16,105 – \$46,680</td> </tr> <tr> <td style="text-align: center;">2</td> <td style="text-align: center;">\$21,708</td> <td style="text-align: center;">\$21,708 – \$62,920</td> </tr> <tr> <td style="text-align: center;">3</td> <td style="text-align: center;">\$27,311</td> <td style="text-align: center;">\$27,311 – \$79,160</td> </tr> <tr> <td style="text-align: center;">4</td> <td style="text-align: center;">\$32,913</td> <td style="text-align: center;">\$32,913 – \$95,400</td> </tr> <tr> <td style="text-align: center;">5</td> <td style="text-align: center;">\$38,516</td> <td style="text-align: center;">\$38,516 – \$111,640</td> </tr> </tbody> </table> <p style="margin-top: 10px;"><i>* These annual household income amounts are approximate only and based on 2014 income data.</i></p> <p>If you already have affordable insurance from your employer or a government program like Medicare, you will not be eligible for Covered California health insurance plans.</p> <p>If you have children or are pregnant, you can have higher income and still qualify for free or low-cost insurance through Medi-Cal. If you are pregnant, you and your expected baby (or babies) are counted as separate persons to qualify for Medi-Cal and as</p>	You may be eligible for Medi-Cal.	You may be eligible for insurance with financial help through Covered California.	Number of people in your household	If your annual household income is less than:	If your annual household income is between:	1	\$16,105*	\$16,105 – \$46,680	2	\$21,708	\$21,708 – \$62,920	3	\$27,311	\$27,311 – \$79,160	4	\$32,913	\$32,913 – \$95,400	5	\$38,516	\$38,516 – \$111,640
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	one person for financial help through Covered California.
Lump Sum Payments	<p>One-time payments (also known as lump sum payments) are only allowed for the following categories:</p> <ul style="list-style-type: none"> • gambling winnings, • prizes, • cancellation of debt, • education scholarships, • awards, • fellowships, • grants, • salary or wages from decedents' employer received by a surviving spouse, • retroactive social security and railroad retirement benefits, • lottery winnings, • gifts, • retroactive unemployment insurance benefits.
Household Composition	<p>Your income and family size help us decide what programs you qualify for. With this information, we can make sure everyone gets the best coverage possible.</p> <p>You must include these people on this application:</p> <ul style="list-style-type: none"> • Your spouse • Your children who live with you • All parents living in the home with their child or children • Anyone on your federal income tax return, if you file one. You don't need to file taxes to apply for health insurance. <p>If you are claimed as a dependent on someone else's tax return, you must include on this application all members of the tax filing household that claimed you and any family members living with you.</p> <p>You do not need to include other people who live with you – for example a boyfriend, girlfriend or roommate on this application. If they would like to see if they are eligible for health coverage, they will need to complete a separate application.</p>
Immigration Status	<p>If you applying for coverage and have one of these immigration statuses, you may qualify for health coverage:</p> <ul style="list-style-type: none"> • Lawful Permanent Resident (LPR, or Greencard holder) • Lawful Temporary Resident (LTR) • Asylee • Refugee

- Cuban or Haitian entrant
- Paroled into the U.S.
- Conditional entrant granted before 1980
- Battered spouse, child, or parent
- Victim of trafficking and his or her spouse, child, sibling, or parent
- Individual with non-immigrant status (includes worker visas, student visas, and citizens of Micronesia, the Marshall Islands, and Palau)
- Temporary Protected Status (TPS) or applicant for Temporary Protected Status (TPS)
- Deferred Enforced Departure (DED)
- Deferred action status *Note: If you are an individual with deferred action status under the Department of Homeland Security's deferred action for childhood arrivals (DACA) process, you can receive Medi-Cal if you meet all eligibility requirements. However, you are not eligible to buy a Covered California health insurance plan.*
- Granted withholding of deportation or withholding of removal, under the immigration laws or under the Convention against Torture (CAT)
- Applicant for withholding of deportation or withholding of removal, under the immigration laws or under the Convention against Torture (CAT)
- Applicant for special immigrant juvenile status
- Applicant for adjustment to LPR status, with approved visa petition
- Applicant for asylum
- Registry applicants with Employment Authorization Document (EAD)
- Order of supervision (with EAD)
- Applicant for cancellation of removal or suspension of deportation (with EAD)

If your immigration status is not listed above, you may still qualify for health insurance and should still apply.