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June 4, 2009

Medi-Cal Eligibility Division Information Letter No.: I 09-02

TO: ALL COUNTY WELFARE DIRECTORS  
ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIASONS

SUBJECT: REDUCTION OF OPTIONAL BENEFITS UNDER THE MEDI-CAL  
PROGRAM

The 2009-2010 budget adopted by the legislature contained several reductions that would be "triggered off" if, on or before April 1, 2009, the Treasurer and the Director of Finance jointly determined that at least \$10 billion dollars in additional federal funds that may be used to offset General Fund expenditures before June 30, 2010, would be available to California. In March, the Treasurer and Director of Finance announced that California would not reach \$10 billion in federal stimulus funds by June 30, 2010.

Therefore, effective July 1, 2009, reductions in state programs, including the elimination of nine adult Medi-Cal optional benefits, will be made. Eliminated optional benefits include acupuncture services, adult dental services, chiropractic services, incontinence creams and washes, optician/optical laboratory services, optometry services, podiatry services, psychology services and speech and audiology services.

The federal government requires that certain optional benefits be included in each states' Medicaid programs. California has a very generous benefits package and is one of only six states to offer adult dental services under its Medicaid program. However, because of the state's severe budget situation, difficult decisions were made on which programs to reduce.

These nine optional benefits will continue to be available for children, pregnant women and individuals in nursing facilities. After this reduction, California will continue to offer 25 adult optional benefits.

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DHCS will issue the attached notice to Medi-Cal beneficiaries starting June 12, 2009, to inform them that the State will not pay for certain optional benefits. The notices will be issued in the 13 threshold languages based on the written language indicator in the Medi-Cal Eligibility Data System. Counties should make the notice available to applicants and beneficiaries. After June 12, 2009, copies of the notice in each of the 13 threshold languages can be obtained at:

<http://www.dhcs.ca.gov/Pages/default.aspx>

If counties or beneficiaries have questions about these changes, they may call the Medi-Cal Beneficiary Services Line at 1-888-284-0623 on or after June 12, 2009.

Original Signed By

Vivian Auble, Chief  
Medi-Cal Eligibility Division

Attachment

June 2009

## **Notice of Reduction of Medi-Cal Benefits**

Dear Beneficiary:

The California Department of Health Care Services has sent this notice to let you know of a change in the law contained in Welfare and Institutions Code section 14131.10. Starting July 1, 2009, Medi-Cal will no longer pay for some benefits. This change will affect only Medi-Cal beneficiaries age 21 and older. If you are age 21 and older, you can still get all of these benefits through June 30, 2009.

### **What benefits will Medi-Cal no longer pay for?**

Medi-Cal will no longer pay for the following benefits and services for most adults (there are some exceptions):

- Dental services
- Speech therapy services
- Podiatric services
- Audiology services
- Chiropractic services
- Acupuncture services
- Optometric and optician services (ophthalmology [doctor services for the eyes] will continue to be covered)
- Psychology services (psychiatry services, and all services through county mental health programs will continued to be covered)
- Incontinence creams and washes

### **What are the exceptions?**

The above benefits and services will NOT change for Medi-Cal beneficiaries who are:

- Under the age of 21; or
- Living in a skilled nursing facility (Level A or B; this includes subacute care facilities); or
- Pregnant. (If you are pregnant, you can continue to receive pregnancy-related benefits and services. You can also receive other benefits and services listed above to treat conditions that, if left untreated, might cause difficulties for the pregnancy. This includes dental exams, cleanings, and gum treatment. Dental and other benefits and services may also be available up to 60 days after the baby is born;) or
- Receiving benefits through the California Children's Services program; or
- Receiving benefits through a Program of All-Inclusive Care for the Elderly.

### **If I do not meet the above exceptions, can I still receive the reduced benefits?**

You can still receive some or all of the reduced benefits, and certain dental services if you are:

- Receiving the services through the Genetically Handicapped Persons Program; or
- Receiving the benefits through the county mental health program; or
- Receiving the benefits through the Medicare Part B program; or
- Receiving the services directly from a physician.

You should contact your physician or dentist if you have any questions about these changes.

**Are there any benefits and services listed above that I can still get if I do not meet the exceptions?**

Yes.

- You can receive the benefits and services listed above if an emergency condition occurs and the benefit is required to treat the emergency condition.
- Some medical and surgical services provided by a dentist will continue to be covered. Check with your dentist for more information.
- Some of these benefits and services may be provided in hospital outpatient clinics, Federally Qualified Health Centers, Rural Health Clinics, Indian Health Services, adult day health care centers, or through home health agencies. Check with your primary health care provider for a referral.
- Some of these benefits and services may be continued if you are currently receiving them or if you move from an exempt group, such as under 21 years of age, to a non-exempt group, such as turning 21 years of age. Check with your primary health care provider for more information.
- Your county health department may be able to provide you some of the benefits and services no longer covered by Medi-Cal.

**Where can I go for more information?**

We will provide more answers on the Department of Health Care Services website at <http://www.dhcs.ca.gov> and on the Medi-Cal Web site at <http://www.medi-cal.ca.gov/>.

If you have more questions about these changes, you may call the Medi-Cal Beneficiary Services Line at **1-888-284-0623**.