



Medi-Cal and Medi-Cal Access Program (MCAP) Protections During the Public Health Crisis

BACKGROUND

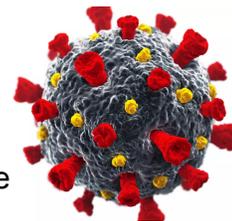
On March 4, 2020, Governor Gavin Newsom declared a State of Emergency in response to the global COVID-19 pandemic. This fact sheet outlines the current protections in place for both Medi-Cal and the Medi-Cal Access Program (MCAP) as well as who is eligible for the newly created COVID-19 Medi-Cal program.

Protection	Policy Change
As of March 26, 2020 No Medi-Cal or MCAP Terminations	Discontinuance and negative actions for Medi-Cal and Medi-Cal Access Program are delayed until the end of the COVID-19 public health crisis. This means that no one with Medi-Cal, including Minor Consent or MCAP coverage should have their benefits terminated or reduced during this public health crisis! Exceptions to this are death, moving out of state or by request. MEDIL I 20-25
As of March 26, 2020 Medi-Cal and MCAP Premium Waivers	If you cannot pay your Medi-Cal or MCAP premium during the COVID-19 emergency you can call to get your premium waived (stopped for now). For children's Medi-Cal, call 1-800-880-5305. For the 250 Percent Working Disabled Program, call 1-916-445-9891 or online: https://apps.dhcs.ca.gov/AutoForm2/default.aspx?af=5692 For MCAP, call 1-800-433-2611 If your income has dropped, you can also call your county worker. Ask if you are eligible to have no premium.
Full Scope Medi-Cal & Emergency Medi-Cal Coverage of COVID-19	All Medi-Cal beneficiaries can get COVID-19 testing, testing-related services, and treatment including hospitalization, during this emergency. All Medi-Cal beneficiaries can get medically necessary services for COVID-19 no matter if they are in full-scope or emergency scope Medi-Cal. You can get COVID-19-related services in both Medi-Cal managed care and fee-for-service Medi-Cal, regardless of your immigration status. See also COVID-19 Uninsured Group on the next page.
Flexibilities for Abortion Services Due To COVID-19	* Providers may provide medically necessary services, such as medication, without an in-person visit or signature. * Flexibilities to remove requirements for a Medicare denial for certain abortion services. To read more: https://files.medical.ca.gov/pubsdoco/newsroom/newsroom_30339_77.aspx
Medi-Cal Beneficiary Outreach Letter and Medi-Nurse Advice line	If you get your services in a Medi-Cal health plan and have questions you can contact your plan's member service center. The number is listed on your health plan card. If you get your care in fee-for-service Medi-Cal and are not in a Medi-Cal health plan, you can talk with a nurse through Medi-Nurse. Call the DHCS COVID Line at 1-877-409-9052. For more information: https://www.dhcs.ca.gov/Documents/Beneficiary-Outreach-Letter.pdf
	Medi-Cal for pregnant women, all children and young adults up to 26 do not count in the public charge test. The federal government says the public charge rule does not count for medical services related to COVID-19: https://www.uscis.gov/green-card/green-card-processes-and-procedures/public-charge

New COVID-19 Medi-Cal Program

COVID-19 Uninsured Group:

The new COVID-19 Uninsured Group program was implemented by the Department of Health Care Services (DHCS) on August 28, 2020, and covers COVID-19 diagnostic testing, testing-related services, and treatment services, including hospitalization and all medically necessary care, at no cost to the individual, for up to 12 months or the end of the public health emergency, whichever comes first.



Who is Eligible?

To qualify for the new Medi-Cal COVID-19 uninsured group, individuals must:

- Have no health insurance, or
- Have private health insurance that does not cover diagnostic testing, treatment services, including hospitalizations and any medically necessary care for COVID-19, or
- Not eligible under any of the other Medi-Cal programs
- Be a California resident.
- Immigration status is not considered.
- Income is not considered.

Individuals who have not met their Medi-Cal Share of Cost obligation also qualify.

What is covered? Testing as well as treatment of COVID-19, including in-patient hospitalization related to COVID-19. The program uses Aid Code V 2.

Where Do I Apply?

You enroll at a hospital, clinic, or other provider's office that participates in the program. Call the **Medi-Nurse Line: (877) 409-9052** to find a location near you.

Coverage starts only from the day the application is submitted, not the first of the month and lasts 12 months unless the COVID public health emergency is declared to be over before that.

Except that:

"Retroactive" coverage, to pay bills for COVID-related medical services already received is available back to April 8, 2020 but you have to apply for that coverage separately.

Resources:

Call the Medi-Nurse Line: (877) 409-9052

California has launched an advice line that can connect you with a nurse, day or night, to talk about COVID-19 symptoms and help connect you with local resources in your area.

The Medi-Nurse line is available around the clock, 7 days a week.

Medi-Nurse provides services in multiple languages, with steps in place that allow callers to access interpreters, as needed.

If you have a regular doctor or a health plan, call them first. If you don't, the Medi-Nurse line can help!

The federal government says the public charge rule does not count for medical services related to COVID-19: <https://www.uscis.gov/green-card/green-card-processes-and-procedures/public-charge>