Medi-Cal

Medi-Cal has several programs available to minors age 0 – 19. All programs cover the same benefits (unless where otherwise noted) and are free of charge for all Medi-Cal members who do NOT carry a Share of Cost. For a definition of the Share of Cost option, please check the Glossary of Medical Terms.

Please note that under State Senate Bill (SB) 75 ALL minors residing in any of the 58 California counties are eligible for fullscope Medi-Cal coverage regardless of immigration status as of May 2016. Proof of immigration status may only be required to assure correct enrollment into a SB75 – supported program.

These are the benefits provided by all Medi-Cal programs for minors age 0 - 19:

- Out-patient visits, including specialty care (for some services network restrictions may apply)
- Full dental coverage, offered through separate enrollment into Denti-Cal, including dentures (restrictions may apply for services deemed cosmetic rather than medically necessary)
- Vision coverage – Annual eye exam and other optometrist services as needed only, no coverage for glasses, frames and contact lenses
- Immunizations
- Prescriptions, including psychiatric
- Laboratory Tests (Blood, CT scan etc.)
- Emergency Care, including ambulance services, if required, to and between hospitals
- Mental Health Services – In-patient and Out-patient
- Substance Use Treatment Services – In-patient and Out-patient, including Medication Assisted Treatment
- Well Child Visits
- Medical Equipment & Supplies
- Nursing Home Services (Rehabilitation and Long-Term Care Services)
- In-Home Supportive Services

Modified Adjusted Gross Income (MAGI) Medi-Cal

Insurance covers: All minors, age 19 and below
Eligibility criteria:
- California resident
- U.S. citizen, lawful residency in the United States, undocumented status
- Gross monthly family income must be at or below 138 % Federal Poverty Limit (see table below)

Premiums: None

Share of Cost: None

**Family Medi-Cal**
(also called: 1931(b) program)

Insurance covers: All minors of age 0 – 19th birthday

Eligibility criteria:
- California resident
- U.S. citizen, lawful residency in the United States, undocumented status
- Gross monthly family income must be at or below 100 % Federal Poverty Limit
- Not eligible for MAGI Medi-Cal
- Assets must be within Property limit, home where you live and 1st car are exempt

Premiums: None

Share of Cost: None

**Targeted Low Income Children (TLIC) Program**

Insurance covers: All minors age 0 – 19th birthday

Eligibility criteria:
- California resident
- U.S. citizen, lawful residency in the United States, undocumented status
- Gross monthly family income must be at or below 266 % Federal Poverty Limit
- Not eligible for MAGI Medi-Cal

Premiums: None for families with income below 160 % Federal Poverty Limit / $13 per child per month for families with income between 161 – 266 % Federal Poverty Limit

Share of Cost: None

Note: Children enrolled in this program can also carry private employer-sponsored or Covered CA – issued private insurance as their primary health coverage.
Traditional Medi-Cal (follows federal Medicaid guidelines)

Insurance covers: Everyone age 0 and above

Eligibility criteria:
- California resident
- U.S. citizen, lawful residency in the United States, undocumented status
- Gross monthly income must be over 138.01 % Federal Poverty Limit
- Not eligible for MAGI or TLIC Medi-Cal, Healthy Kids, or Covered California
- Assets must be within Property limit, home where you live and 1st car are exempt

Premiums: None

Share of Cost: Varies based on determined countable income after all applicable deductions

Online Link for all Medi-Cal programs: http://www.dhcs.ca.gov/services/medi-cal/eligibility/Pages/Medi-Cal_CovCA_FAQ.asp

SSI Medi-Cal

Adults and/or children can potentially qualify for SSI Medi-Cal if the following applies:
- Verified U.S. Citizenship or Naturalized Citizenship, Legal Permanent Resident Status (some restrictions apply due to length of residency, prior work status and sponsorship rules)
- Verified severe legal disability ( eligible under Social Security criteria) and/or legal retirement age (65 or older)
- Available earned and/or unearned income is below SSI payment level
- Property is within Medi-Cal Asset Limit

Online Link: http://www.ssa.gov/pubs/index.html#SSI

Covered California

Per Affordable Care Act these eleven essential benefits MUST be covered by any insurance carrier partnering with the State of California under this program:

1. Ambulatory Patient Services (including transportation to and from a hospital)
2. Emergency Services (including psychiatric)
3. Hospitalizations (including psychiatric)
4. Maternity and newborn care (including initial immunizations and well baby check-ups)
5. Mental Health and Substance Use Disorder (Outpatient, In-patient Detox, Day Treatment, Individual or Group Counseling, Outpatient Detox, Transitional Residential Recovery etc.)
6. Prescription Drugs (coverage may vary by formulary)
7. Rehabilitative services and devices (including prosthetics)
8. Laboratory Services
9. Preventive and wellness services (free of charge), including incentive programs such as free or reduced price gym memberships (will vary in scope and access by plan)
10. Chronic disease management
11. Pediatric oral and vision care (for minors age 19 and below)

Covers: Everyone age 0 - 64

General Eligibility criteria:
- California residency
- U.S. citizenship, legal residency in the United States
- Not eligible for fullscope Medi-Cal, Healthy Kids, and not covered by an employer sponsored (!) private insurance plan
- Family countable gross income is above 138% Federal Poverty Limit

Premiums: Vary widely and are adjusted by each insurance carrier annually, four metal tiers available with bronze being the cheapest option and platinum the most expensive, partial reimbursement for monthly premium payment through applicable tax credits are only given at silver tier – rates, most bronze options are a nominal $1/month only, check Covered Ca website for details

Co-Payments/Co-Insurance: Vary widely and are adjusted annually based on cost effectiveness study, however, are regulated by Covered CA and are the same per carrier across CA, the lower the metal tier – premium the higher the charged co-payment/co-insurance, low income members with incomes below 200% FPL can receive additional subsidies for their co-payment/co-insurance in addition to tax credit to lower monthly premium. Amounts vary by countable income, check Covered Ca website for details

Carriers available in San Mateo County: Anthem Blue Shield, Blue Cross of CA, Chinese Community Health Plan (CCHP, in Northern Part of San Mateo only), Health Net, Kaiser Permanente

Note: You can typically only enroll into a Covered CA plan during the annual open enrollment period in November – January. Outside of this time period, you need to proof a life changing event such as:
- Marriage
- Birth of a child / Adoption of a child
- Loss of Employment
- Loss of Employer-Sponsored Coverage
- Move from another State
- Move into a new CA County that does not support prior Covered CA plan (previous carrier is unavailable in new service area)

Enrollment into a Covered CA plan is not mandated, but recommended for all U.S. citizens and legal permanent residents who file regular annual income taxes as those who don’t carry any insurance at the time of their Income Tax filing will be assessed a penalty. The penalty for 2016 and forward is $695/adult household member (half per minor dependent) and is subject to adjustment as of 2017 based on the annual inflation rate. Undocumented residents do NOT have to carry health insurance coverage for themselves, even if filing regular income taxes, only for those who meet residency criteria.

**Online Link:** [http://www.coveredca.com/get-help/faqs/](http://www.coveredca.com/get-help/faqs/)

**Healthy Kids – State (CHIMP)**

**These benefits are provided:**
- Outpatient visits, including specialty care
- Vision – Eye exam and optometry services, limited coverage for glasses, frames and contact lenses
- Full dental services, including dentures
- Lab Tests
- Inpatient Services
- Prescriptions, including psychiatric drugs
- Emergency Care, including ambulance services
- Mental Health Services – In-patient and Out-patient
- Substance Use Treatment Services – In-patient and Out-patient
- Durable Medical Equipment and Supplies
- Preventive Services, including STD Testing and Contraceptive Services

**Covers:** Minors age 0 – 19th birthday

**General Eligibility criteria:**
- California residency
- U.S. citizenship, legal residency in the United States
- Not eligible for fullscope Medi-Cal or Covered California
- Family countable gross income is between 266.01 and 322 % Federal Poverty Limit
**Premiums:** $39/quarter

**Co-Payments:** Vary per service, but mostly between $10 - $15/service

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**Healthy Kids – County**

**These benefits are provided:**
- Outpatient visits, including specialty care
- Vision – Eye exam and optometry services, limited coverage for glasses, frames and contact lenses
- Full dental services, including dentures
- Lab Tests
- Inpatient Services
- Prescriptions, including psychiatric drugs
- Mental Health Services – In-patient and Out-patient
- Substance Use Treatment Services – In-patient and Out-patient
- Durable Medical Equipment and Supplies
- Preventive Services, including STD Testing and Contraceptive Services

**Covers:** Minors age 0 – 19th birthday

**General Eligibility criteria:**
- California residency
- U.S. citizenship, lawful residency in the United States, undocumented status
- Not eligible for fullscope Medi-Cal or Covered California, undocumented minors must enroll into restricted Medi-Cal
- Family countable gross income is between 266.01 and 400 % Federal Poverty Limit for undocumented minors, or between 322 and 400 % Federal Poverty Limit for minors who carry US citizenship or lawful residency status

**Premiums:** between $39 and $150/quarter, based on income

**Co-Payments:** Vary per service, but mostly between $10 - $15/service

**Online Link:** [https://www.hpsm.org/members/healthy-kids/benefits-and-costs.aspx](https://www.hpsm.org/members/healthy-kids/benefits-and-costs.aspx)
General Resources

Property Limits for Medi-Cal:
1 Person – Household = $2,000
2 Persons – Household = $3,000
3 Persons – Household = $3,150
4 Persons - Household = $3,300

Federal Poverty Levels 2016

This chart can be used to determine approximate income eligibility for some of the public health insurance programs with Federal Poverty Level (FPL) thresholds.

- The amount shown is equivalent to monthly gross income, including all household earnings through employment or other sources of income such as SSDI, unemployment benefits, child support, etc.
- In order to qualify for certain programs your (family) income must be at or below the amount shown after all applicable deductions have been applied. Please note that different programs allow for different deductions.

<table>
<thead>
<tr>
<th>Household Size</th>
<th>Medi-Cal Maintenance (85% FPL)</th>
<th>100% FPL</th>
<th>138% FPL</th>
<th>150% FPL</th>
<th>266% FPL</th>
<th>322% FPL</th>
<th>400% FPL</th>
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</table>

*Single Parent + 1 Dependent / Married Couple

Never assume that you don’t qualify for a program because of your income. Always ask an experienced health insurance screener to assist you with calculating your income eligibility.
Health Insurance Enrollment Assistance provided by:

Health Coverage Unit Hotline: (650) 616 2002
(Assistance with Covered CA, Healthy Kids, Medi-Cal)

BHRS – Health Insurance Outreach & Coordination: (650) 573 3502
(Assistance with Covered CA, Healthy Kids, Medi-Cal)