

UPCOMING MEDI-CAL CHANGES

PRESENTED BY THE SAN MATEO COUNTY

STAFF DEVELOPMENT AND TECHNOLOGY SERVICES

POLICY TEAM



COUNTY OF SAN MATEO
HUMAN SERVICES AGENCY

2/27/2026



HOUSE RESOLUTION 1 (H.R.1)

ON JULY 4, 2025, PRESIDENT TRUMP SIGNED H.R. 1, COMMONLY KNOWN AS THE ONE BIG BEAUTIFUL BILL ACT INTO LAW, WHICH MAKES SIGNIFICANT CHANGES TO MEDICAID (KNOWN AS MEDI-CAL IN CALIFORNIA).

SUMMARY OF MEDI-CAL CHANGES

October 1, 2026

- New federal definition of Qualified Non-Citizen (QNC)

January 1, 2027

- Semi-annual redeterminations for adults 19-64
- Retroactive coverage limited to 1-2 months
- Work Requirement

October 1, 2028

- Cost Sharing (co-pays) if income between 100-138% of Federal Poverty Level (FPL)



REDEFINING QUALIFIED NON-CITIZEN (QNC)

REDEFINING QUALIFIED NON-CITIZEN (QNC)

Overview

EFFECTIVE OCTOBER 1, 2026, H.R. 1 CHANGES THE DEFINITION OF A QUALIFIED NON-CITIZEN (QNC) FOR FEDERAL MEDICAL ELIGIBILITY. THE NEW DEFINITION INCLUDES INDIVIDUALS WHO ARE:

- LAWFUL PERMANENT RESIDENTS (LPRs).
- CUBAN OR HAITIAN ENTRANTS.
- MIGRANTS LEGALLY RESIDING IN THE UNITED STATES AND ITS TERRITORIES UNDER THE COMPACT OF FREE ASSOCIATION (COFA), SUCH AS CITIZENS FROM THE MARSHALL ISLANDS, MICRONESIA, OR PALAU.

REDEFINING QUALIFIED NON-CITIZEN (QNC)

Impacted
Individuals

THIS CHANGE WILL END THE AVAILABILITY OF FEDERALLY FUNDED FULL-SCOPE MEDI-CAL BENEFITS FOR:

- REFUGEES
- ASYLEES
- CONDITIONAL ENTRANT GRANTED BEFORE APRIL 1980
- PAROLED INTO THE UNITED STATES FOR ONE YEAR OR MORE
- BATTERED NON-CITIZEN, OR PARENT OR CHILD OF A BATTERED NON-CITIZEN
- PERSONS RESIDING UNDER COLOR OF LAW (PRUCOL).

NOTE - LAWFULLY PRESENT CHILDREN UNDER THE AGE OF 21 AND LAWFULLY PRESENT PREGNANT OR POSTPARTUM INDIVIDUALS, IF OTHERWISE ELIGIBLE, WILL CONTINUE TO RECEIVE FEDERALLY-FUNDED FULL SCOPE MEDI-CAL.



SEMI-ANNUAL ELIGIBILITY CHECKS

SEMI-ANNUAL ELIGIBILITY CHECKS

Overview

STARTING JANUARY 1, 2027, SOME MEDICAL MEMBERS WILL HAVE THEIR ELIGIBILITY CHECKED TWICE A YEAR INSTEAD OF ONCE.

- APPLICABLE TO ADULTS (AGE 19-64)
- MISSING DEADLINES COULD RESULT IN A LOSS OF COVERAGE
- ONLY THE INDIVIDUALS ON THE CASE WHO ARE SUBJECT TO A SIX-MONTH RENEWAL WILL BE REQUIRED TO COMPLETE AND RETURN THE RENEWAL.

SEMI-ANNUAL ELIGIBILITY CHECKS

Exceptions

WHO WILL CONTINUE WITH ONCE A YEAR RENEWALS?

- MEMBERS IN A MEDI-CAL PROGRAM THAT IS NOT UNDER THE AFFORDABLE CARE ACT NEW ADULT GROUP
- PREGNANT OR POSTPARTUM INDIVIDUALS
- ALASKA NATIVE OR AMERICAN INDIAN MEMBERS
- FORMER FOSTER YOUTH UNDER AGE 26, WHO WERE IN FOSTER CARE ON THEIR 18TH BIRTHDAY



RETROACTIVE COVERAGE

RETROACTIVE COVERAGE

Overview

STARTING JANUARY 1, 2027, MEDI-CAL WILL PAY FOR FEWER MONTHS OF PAST MEDICAL BILLS FROM BEFORE YOU APPLIED.

- APPLICABLE TO ADULTS (AGE 19-64) WITHOUT CHILDREN (0-18)
 - **ADULTS WITHOUT CHILDREN:** MEDI-CAL WILL ONLY PAY FOR ONE MONTH OF PAST BILLS
 - **ALL OTHERS:** MEDI-CAL WILL PAY FOR TWO MONTHS OF PAST BILLS



WORK AND COMMUNITY ENGAGEMENT

STARTING JANUARY 1, 2027, SOME ADULTS WILL NEED TO WORK, VOLUNTEER OR GO TO SCHOOL TO KEEP MEDI-CAL.

WORK AND COMMUNITY ENGAGEMENT

Overview

THE WORK AND COMMUNITY ENGAGEMENT RULE APPLIES TO:

- ADULTS (AGE 19-64),
- INDIVIDUALS THAT ARE ELIGIBLE FOR MEDICAL BECAUSE OF THE AFFORDABLE CARE ACT EXPANSIONS, AND
- INDIVIDUALS THAT DON'T MEET AN EXEMPTION

The individuals listed above will be required to demonstrate community engagement (work, volunteer, or attend school) as a condition of eligibility for at least:

- 1 month prior to application.
- 1 month within every six-month period once enrolled.

WORK AND COMMUNITY ENGAGEMENT

Requirements

REQUIREMENTS - INDIVIDUALS MUST COMPLETE ONE OR MORE QUALIFYING ACTIVITIES:

- HAVE MONTHLY INCOME AT LEAST 80 TIMES THE FEDERAL HOURLY MINIMUM WAGE (\$580) OR EMPLOYMENT OF 80 HOURS/MONTH (SEASONAL WORK WILL BE AVERAGED OVER THE LAST SIX MONTHS)
- COMMUNITY SERVICE OF 80 HOURS/MONTH
- ENROLLED AT LEAST HALF-TIME IN AN EDUCATIONAL PROGRAM
- PARTICIPATION IN A WORK PROGRAM OF 80 HOURS/MONTH

WORK AND COMMUNITY ENGAGEMENT

Exemptions

THE WORK AND COMMUNITY ENGAGEMENT RULES DO NOT APPLY TO:

- CHILDREN (0–18).
- OLDER ADULTS (65 AND OLDER).
- PREGNANT PEOPLE, INCLUDING ONE YEAR POSTPARTUM, REGARDLESS OF BIRTH OUTCOME.
- PARENTS WITH CHILDREN AGE 0-13.
- PEOPLE WITH DISABILITIES.
- PEOPLE WITH SERIOUS HEALTH OR MENTAL HEALTH CONDITIONS OR SUBSTANCE USE PROBLEMS.
- PEOPLE WHO WERE RELEASED FROM JAIL OR PRISON WITHIN THE LAST 90 DAYS.
- PEOPLE ON MEDICARE PART A OR PART B.
- AMERICAN INDIANS OR ALASKA NATIVES.
- FORMER FOSTER YOUTH UNDER AGE 26, WHO WERE IN FOSTER CARE ON THEIR 18TH BIRTHDAY.



COST SHARING (CO-PAYS)

COST SHARING (CO-PAYS)

Overview

STARTING OCTOBER 1, 2028, THE FOLLOWING MEDI-CAL MEMBERS WILL HAVE TO PAY A SMALL FEE (CALLED A COPAYMENT) FOR CERTAIN SERVICES.

- ADULTS AGE 19-64
- INDIVIDUALS WHO ARE NOT PREGNANT, (PREGNANCY COVERAGE LASTS THROUGH THE WHOLE PREGNANCY AND UP TO ONE YEAR AFTER IT ENDS.) AND
- INDIVIDUALS NOT ON MEDICARE
- THOSE THAT MAKE MORE THAN \$15,560 A YEAR

There will not be co-pays for:

- Services at community health centers or rural health clinics.1 month within every six-month period once enrolled.
- ER Care
- Regular checkups
- Prenatal or pediatric care
- Mental health and substance use disorder treatment



RESOURCES, MEMBER COMMUNICATION & OUTREACH

RESOURCES, MEMBER COMMUNICATION & OUTREACH

Visit these
sites for more
information

DHCS Medi-Cal Changes:

<https://www.dhcs.ca.gov/Medi-Cal/Pages/changes.aspx>

DCHS Immigration Status and Medi-Cal Eligibility:

<https://www.dhcs.ca.gov/Medi-Cal/Pages/immigration-status-categories.aspx>

California Immigration Services

<https://cdss.ca.gov/inforesources/Immigration>

Covered California Changes:

<https://www.coveredca.com/important-changes/>

RESOURCES, MEMBER COMMUNICATION & OUTREACH

DHCS will lead a coordinated communication and outreach strategy to ensure that stakeholders and members have the information they need as the H.R. 1 provisions take effect.

Member communication channels include, but are not limited to



Toolkits: Messaging guides, flyers, and FAQs in all 19 Medi-Cal threshold languages and accessible formats will post on the DHCS website and disseminate to stakeholders

Texting: A limited, targeted texting strategy to raise awareness about work reporting requirements

DHCS Coverage Ambassadors and Navigators: DHCS will rely on Coverage Ambassadors and navigators to distribute resources and messaging at the local level.

Outreach Timeframe:

- Feb-July 2026 to develop member awareness
- Oct- Jan 2027 to support members taking action to respond to new requirements.

THANK YOU