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GAVIN NEWSOM
GOVERNOR

Important news about your health coverage

Dear Beneficiary,

Good news! You may get more health care benefits soon. Your restricted scope Medi-Cal may change to full scope Medi-Cal.

Starting **May 1, 2022**, the new Older Adult Expansion will give full scope Medi-Cal to adults ages 50 and older who qualify for Medi-Cal. Your immigration status does not matter.

How will I know if I can get more health care benefits with full scope Medi-Cal?

In April 2022, you will get a letter in the mail. It will tell you if you can get full scope Medi-Cal. It will also tell you when you will start getting more benefits.

Will I get more health care services with full scope Medi-Cal?

Yes. Medi-Cal has free or low-cost health care for people who live in California. Full scope Medi-Cal is different from the restricted scope Medi-Cal you have now. Restricted scope Medi-Cal only covers some services. It does not cover things like medicine and primary care.

Full scope Medi-Cal covers these services and more:

- Alcohol and drug use treatment
- Dental care
- Emergency care
- Family planning
- Foot care
- Hearing aids
- Medical care
- Medicine your doctor orders
- Medical supplies
- Mental health care
- Personal attendant care and other services that help people stay out of nursing homes
- Referrals to specialists, if needed

- Tests your doctor orders
- Transportation to doctor and dental visits and to get your medicine at the pharmacy
- Vision care (eyeglasses)

If you have pregnancy-related Medi-Cal now, you have all medically necessary services that Medi-Cal covers.

You can learn more about Medi-Cal in the Frequently Asked Questions (FAQ) that came with this letter.

How will I get health care services?

Most people with full scope Medi-Cal will get health care services through a Medi-Cal Managed Care Plan. A Medi-Cal Managed Care Plan is a health plan. It works with doctors, hospitals, pharmacies, and other health care providers in the plan's service area. They will provide your health care services.

When you join a Medi-Cal Managed Care Plan, you may still get some health care services through Fee-For-Service (regular) Medi-Cal. These include pharmacy, substance use disorder treatment, and dental services.

Your Medi-Cal Managed Care Plan choices depend on the county you live in. Some counties have one plan. Some counties have more than one plan to choose from. We will mail you a letter with your plan choices. You can learn more about your Health Care Options:

- **By phone:** Call **1-800-430-4263**, Monday – Friday, 8 a.m. to 6 p.m. TDD/TYY users call 1-800-430-7077. The call is free.
- **Online:** Go to <https://www.healthcareoptions.dhcs.ca.gov/>.

How will I get health care services if I have Medi-Cal with a Share of Cost (SOC)?

If you have an SOC now, you will get full scope Medi-Cal with an SOC. If you have an SOC, you will get your health care services through Fee-For-Service (regular) Medi-Cal. You will not need to choose a Medi-Cal Managed Care Plan.

Should I keep my Medi-Cal Benefits Identification Card (BIC)?

Yes. You should keep your BIC. It is a plastic card with orange poppy flowers or a blue and white design. You will need it when you get full scope Medi-Cal. Call your county office if you need a new BIC.

Always take your BIC to your doctor and other medical and dental visits. When you are in a Medi-Cal Managed Care Plan, you will get a card from your new plan. You will need to show both cards when you visit your doctor, dentist, pharmacy, and other medical providers.

Do I need to fill out a new Medi-Cal application?

No. You already have restricted scope Medi-Cal, so you do not need to fill out a new application for full scope Medi-Cal.

If you get a packet in the mail to renew your Medi-Cal, fill it out and return it. You can call your county office for help.

How do I get materials in a different format?

You can ask to get all written information about your Medi-Cal benefits in a different format. The format can be Braille, large print, an audio or data CD, or some other format to help you understand and read letters or fill out your packet. To ask for this, you can:

- Go to <https://afs.dhcs.ca.gov>. Follow the instructions to choose a different format.
- Call **1-833-284-0040** (California Relay 711), Monday – Friday, 8 a.m. to 5 p.m., except national holidays. The call is free.
- Contact your local county office.

What if I need help in a different language?

If you need help in a language other than English, read the list of phone numbers for free language assistance services that came with this letter. You can also get an interpreter to help you read this letter.

How can I learn more or get help?

To learn more about Medi-Cal:

Call the Department of Health Care Services (DHCS) Medi-Cal Helpline at **1-800-541-5555**, Monday – Friday, 8 a.m. to 5 p.m., except national holidays. This call is free.

To learn about Medi-Cal Managed Care Plans:

Call Health Care Options at **1-800-430-4263**, Monday – Friday, 8 a.m. to 6 p.m. TDD/TYY users call 1-800-430-7077. The call is free.

Or, go to the DHCS website at <https://bit.ly/older-adult-expansion>.

For questions about immigration and the Medi-Cal program:

The Department of Health Care Services (DHCS) cannot answer questions about immigration or “public charge”.

The California Department of Social Services (CDSS) funds qualified nonprofit organizations to give services to immigrants who live in California. There is a list of these organizations at <https://bit.ly/immigration-service-contractors>.

For immigration information and resources, go to California’s Immigrant Guide at <https://immigrantguide.ca.gov/>.

To learn about public charge, go to the California Health and Human Services Agency Public Charge Guide at <https://bit.ly/calhhs-public-charge-guide>.

Thank you,

Department of Health Care Services