



JENNIFER KENT  
DIRECTOR

State of California—Health and Human Services Agency  
Department of Health Care Services



EDMUND G. BROWN JR.  
GOVERNOR

<b>Managed Care Included and Excluded Populations</b>				
<b>Aid Code Group Coverage</b>				
<b>Aid Code Group</b>	<b>Non-Dual/ Dual</b>	<b>Mandatory</b>	<b>Voluntary</b>	<b>Excluded from Enrollment</b>
<b>Adult Expansion</b>	Non-Dual	All Models	N/A	N/A
<b>Medically Indigent Adults</b>	Non-Dual	COHS, Non-COHS, CCI	N/A	N/A
<b>Non-Disabled Adults (19 &amp; Over)</b>	Non-Dual	COHS, Non-COHS, CCI	N/A	N/A
<b>Non-Disabled Children (Under 19)</b>	Non-Dual	COHS, Non-COHS, CCI	N/A	N/A
<b>Aged</b>	Non-Dual	COHS, Non-COHS, CCI	N/A	N/A
<b>Breast and Cervical Cancer Treatment Program (BCCTP)</b>	Non-Dual	COHS, Non-COHS, CCI	N/A	N/A
<b>Disabled</b>	Non-Dual	COHS, Non-COHS, CCI	N/A	N/A
<b>Long Term Care</b>	Non-Dual	COHS, CCI	N/A	All Other Models
<b>Foster Children</b>	Non-Dual	COHS	Non-COHS	N/A
<b>Omnibus Budget Reconciliation Act (OBRA)</b>	Non-Dual	Napa, Solano and Yolo counties	N/A	All Other Models
<b>Share of Cost</b>	Non-Dual	COHS & CCI	N/A	All Other Models
<b>Medically Indigent Adults</b>	Dual	COHS, CCI	All Other Models	N/A
<b>Non-Disabled Adults (19 &amp; Over)</b>	Dual	COHS, CCI	All Other Models	N/A
<b>Non-Disabled Children (Under 19)</b>	Dual	COHS, CCI	All Other Models	N/A
<b>Aged</b>	Dual	COHS, CCI	All Other Models	N/A
<b>Breast and Cervical Cancer Treatment Program (BCCTP)</b>	Dual	COHS, CCI	Non-CCI & Non-COHS	N/A
<b>Disabled</b>	Dual	COHS, CCI	Non-CCI & Non-COHS	N/A
<b>Long Term Care</b>	Dual	COHS, CCI	Non-CCI & Non-COHS	N/A
<b>Share of Cost</b>	Dual	COHS, CCI	N/A	Non-COHS & Non-CCI
<b>Hospital Presumptive Eligibility (HPE)</b>	Both	N/A	N/A	All Models

Aid Code Group	Non-Dual/ Dual	Mandatory	Voluntary	Excluded from Enrollment
<b>Trafficking and Crime Victims Assistance Program (TCVAP)</b>	Both	N/A	N/A	All Models
<b>State Medical Parole/County Compassionate Release</b>	Both	N/A	N/A	All Models
<b>Accelerated Enrollment (AE)</b>	Both	N/A	N/A	All Models
<b>Child Health and Disability Prevention (CHDP) Infant</b>	Both	N/A	N/A	All Models
<b>Limited Scope Eligibles (Services limited to pregnancy and ER only, includes all aid code groups)</b>	Both	N/A	N/A	All Models

<b>Population Exclusions</b>			
Populations	Mandatory	Voluntary	Excluded from Enrollment
<b>Incarcerated Individuals</b>	N/A	N/A	All Models
<b>American Indian Medi-Cal Beneficiaries</b>	COHS	Non-COHS	N/A
<b>Beneficiaries with Other Healthcare Coverage (OHC)</b>	COHS	N/A	Non-COHS
<b>Beneficiaries in Rural Zip Codes</b>	COHS	Non-COHS <sup>1</sup>	Non-COHS <sup>1</sup>
<b>Female Beneficiaries in their 3<sup>rd</sup> Trimester of pregnancy</b>	COHS	Non-COHS	N/A
<b>Developmentally Disabled Beneficiaries in Home and Community Based Services Waiver</b>	COHS & CCI MLTSS = All Non-COHS & Non-CCI = Non-Duals	Non-COHS & Non-CCI = Duals	Cal MediConnect

1 – See zip code attachment for identified zip codes and counties