

The background features a purple-tinted image of medical equipment, including a stethoscope and a line graph with a y-axis labeled 3, 6, 9, 12, 15. The text is overlaid on this background.

Older Adult Full Scope Expansion

Full Scope Medi-Cal for Individuals
50 Years of Age or Older

April 14, 2022

Authority

- » Assembly Bill (AB) 133 (Chapter 143, Statutes of 2021), amended Welfare and Institutions Code section 14007.8 to expand eligibility for full scope Medi-Cal to individuals who are 50 years of age or older, regardless of citizenship or immigration status, if otherwise eligible.
- » Implementation May 1, 2022
- » Policy Guidance is posted in ACWDL 21-13 <https://www.dhcs.ca.gov/services/medicaid/eligibility/letters/Documents/21-13.pdf>

System Readiness

- » The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and the Statewide Automated Welfare System (SAWS) have implemented the system functionality to determine full scope Medi-Cal eligibility for the Older Adult Expansion population on May 1, 2022.
- » The SAWS initiated batch processes, beginning April 8, 2022 and ending April 13, 2022, to transition Older Adult Expansion eligible individuals from restricted scope Medi-Cal to full scope Medi-Cal effective May 1, 2022.

Populations Impacted

- » **New enrollee population** – Includes individuals 50 years of age or older who are eligible for Medi-Cal, do not have satisfactory immigration status for full scope Medi-Cal, (or are unable to verify citizenship) and are not yet enrolled in Medi-Cal.
- » **Transition population** – Includes individuals 50 years of age or older who are currently enrolled in restricted scope Medi-Cal.

Age Policy

New Enrollee & Transition Populations

Individuals who turn 50 anytime in the month will be eligible for the entire month.

» For example, individuals who turn 50 years of age between May 1, 2022 and May 31, 2022 are considered age 50 for the entire month of May 2022, and are eligible for full scope coverage under the Older Adult Expansion. The same rule applies to applicants and beneficiaries that turn 50 years old in subsequent months.

Scope of Benefits

» **Restricted Scope Medi-Cal**

- » Often called emergency Medi-Cal
- » Covers limited services: emergency, pregnancy related, and long term care

» **Full Scope Medi-Cal**

- » Provides the full range of benefits available to Medi-Cal beneficiaries

Full Scope Benefits

- » Alcohol and drug use treatment
- » Dental care
- » Emergency care
- » Family planning
- » Foot care
- » Hearing aids
- » Medical care
- » Medicine
- » 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
- » Transportation to doctor and dental visits and to get medicine at the pharmacy
- » Vision care (eyeglasses)

Retroactive Medi-Cal Eligibility

New enrollees can request retroactive Medi-Cal benefits for up to three months prior to the month of application.

- » Restricted scope retroactive Medi-Cal benefits will be available for the months prior to the Older Adult Expansion implementation.
- » Full scope retroactive Medi-Cal benefits will be available beginning the month of the Older Adult Expansion implementation, **May 1, 2022.**

Notices

DHCS has developed three notices with frequently asked questions (FAQ) that have been translated into the Medi-Cal threshold languages.

- » First Notice (General Information Notice)
- » Second Notice (Notice of Action/NOA Snippets)
- » Third Notice (Managed Care Enrollment Notice)

The Older Adult Expansion individual will receive the translation that corresponds with the written language or alternative format indicated on their MEDS record.

First Notice

- » General Information Notice and FAQ
- » Was mailed to the restricted scope population expected to transition to full scope on May 1, 2022
- » Mailed March 7 through March 11, 2022
- » Counties will provide the First Notice & FAQ to individuals who apply after February 23, 2022 and up until implementation on May 1, 2022.

First Notice



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



GAVIN NEWS OM
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

FAQ

Frequently Asked Questions (FAQ) About your benefits expanding in Medi-Cal

1. Am I still covered by Medi-Cal?

Yes. You still have Medi-Cal. The state is adding more health care benefits to your Medi-Cal coverage. You may get more benefits soon.

2. Why am I getting more Medi-Cal benefits?

Starting **May 1, 2022**, a new law in California will give full scope Medi-Cal to Californians ages 50 and older who qualify for Medi-Cal. Immigration status does not matter.

3. Do I need to take any action right now?

No. Your Medi-Cal benefits are not changing right now. You do not need to do anything yet. 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.

4. What is full scope Medi-Cal?

Medi-Cal has free or low-cost health care for people who live in California and qualify. 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 more. You will have a primary care doctor (PCP). You will have these benefits:

- 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 the medically necessary services that Medi-Cal covers.

Second Notice Notice of Action

Existing Beneficiaries:

- » Triggered by the SAWS batches to transition restricted scope beneficiaries into full scope.
- » Will be generated beginning April 9, 2022

New Applicants:

- » Will be generated when an eligibility determination is made.

Third Notice Managed Care Enrollment Notice

Managed Care Enrollment Notice and FAQ

- » Will be mailed to the restricted scope population expected to transition to full scope on May 1, 2022
- » Expected to be mailed April 18 through April 29, 2022

Managed Care Plan Selection Cut-off Dates

- » For May 1, 2022 Managed Care Plan effectuation, a plan selection must be made prior to April 25, 2022.
- » For June 1, 2022 Managed Care Plan effectuation, a plan selection must be made prior to May 23, 2022.
- » For July 1, 2022 Managed Care Plan effectuation, a plan selection must be made prior to June 23, 2022.
 - » If no plan is selected prior to June 23, 2022, individuals will default into a Managed Care Plan on July 1, 2022.

Outreach

- » Medi-Cal Eligibility Division Information Letter MEDIL 22-02 <https://www.dhcs.ca.gov/services/medi-cal/eligibility/letters/Documents/I22-02.pdf> provides global outreach messaging for the Older Adult Expansion and is posted on the DHCS website.
- » DHCS highly recommends counties utilize the messaging and integrate it into their outreach and social media campaigns.
- » DHCS has shared the global outreach language broadly for use by Medi-Cal Managed Care Plans, other State departments, Medi-Cal providers, and other community partners for use in their outreach activities.

Estate Recovery

- » DHCS must seek repayment, regardless of funding source, expansion group, or aid code, from probated estates of certain deceased beneficiaries, for Medi-Cal benefits received on or after their 55th birthday.
- » Repayment includes fee-for-service and managed care premiums/capitation payments for nursing facility services, home and community based services, and related hospital and prescription drug services received when the member was an inpatient in a nursing facility or was receiving home and community based services.
- » Repayment cannot exceed the value of a member's probated estate.

Estate Recovery Exemptions & Hardships Waivers

Exemptions:

- » Decedent under age 55
- » Surviving spouse or registered domestic partner
- » Surviving child under the age of 21
- » Surviving child (of any age) who is blind or disabled

Hardship Waiver:

- » An Estate Recovery claim can also be waived in full or in part if the heir(s) to the estate meets one of several hardship waiver criteria

For more information, please visit our website at <https://dhcs.ca.gov/ER>

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>
- » Guía de carga pública de la California Health and Human Services Agency en español en <https://bit.ly/calhhs-Public-Charge-Guide-Spanish>

Older Adult Expansion Contact Information

A decorative graphic consisting of several overlapping, wavy, horizontal bands in various shades of purple, ranging from a deep magenta to a lighter lavender, positioned below the main title and above the contact information.

OlderAdultExpansion@dhcs.ca.gov

For More Information

A decorative graphic consisting of several overlapping, wavy, horizontal bands in various shades of purple and magenta, spanning the width of the page below the main heading.

<http://www.dhcs.ca.gov/services/medical/eligibility/Pages/OlderAdultExpansion.aspx>