What is Medi-Cal?
Medi-Cal is California's Medicaid health care program, a public health insurance program which provides needed health care services and pays for a variety of medical services, some mental health services and some dental services. It is supported by federal and state taxes and is administered by county Social Services departments.

Rules are Simpler Now

- Since the Affordable Care Act (ACA) was implemented in 2014, many more people are eligible for Medi-Cal. Eligibility is based on income. Eligibility is not limited to children and families, or the elderly and persons with disabilities.
- Most children with family income at or less than 266% FPL will be eligible to Medi-Cal and many adults with family income under 138% of the Federal Poverty Level (FPL) will be eligible to Medi-Cal. See chart below.
- No asset test for most adults, families and children.
- Most Medi-Cal rules for Medicare recipients (the elderly and people with disabilities) have not changed; there are property limits.
- Families with higher incomes without employer-sponsored insurance, Medicare or other health insurance may be eligible to receive tax subsidies to purchase insurance through Covered California, California's health benefit exchange.

Monthly Income Levels: Eligibility for Health Care Coverage Programs
Under Affordable Care Act 2020

<table>
<thead>
<tr>
<th>Number of people in household</th>
<th>Monthly income of up to 100% of the Federal Poverty level (FPL)</th>
<th>Up to 138% FPL</th>
<th>Up to 266% FPL</th>
<th>Up to 600% FPL</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$1,064</td>
<td>$1,468</td>
<td>$2,829</td>
<td>$6,381</td>
</tr>
<tr>
<td>2</td>
<td>1,437</td>
<td>1,983</td>
<td>3,822</td>
<td>8,621</td>
</tr>
<tr>
<td>3</td>
<td>1,810</td>
<td>2,498</td>
<td>4,815</td>
<td>10,860</td>
</tr>
<tr>
<td>4</td>
<td>2,184</td>
<td>3,013</td>
<td>5,808</td>
<td>13,101</td>
</tr>
<tr>
<td>5</td>
<td>2,557</td>
<td>3,529</td>
<td>6,801</td>
<td>15,341</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Monthly income under 138% of the Federal Poverty level (FPL)</th>
<th>Between 139% and 266% FPL</th>
<th>Between 139% and 600% FPL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medi-Cal Coverage for most Adults, Children, Families</td>
<td>Medi-Cal coverage for most children through age 18</td>
<td>Possible Subsidized Insurance through Covered CA</td>
</tr>
</tbody>
</table>

Income levels are based on “Modified Adjusted Gross Income” on tax return. MAGI eff 01/01/2020, Medicare Premium Payment Programs eff 03/01/2020, Non-MAGI eff 04/01/2020
**Medi-Cal Budgeting Based on Tax Households**
- Most Medi-Cal budgets are based on “Modified Adjusted Gross Income”; this figure comes from tax forms. Some call this “MAGI Medi-Cal.”
- Not filing federal taxes does not affect Medi-Cal eligibility, but does affect eligibility to subsidies for insurance from Covered California.

**Many Ways to Apply**
- **How to apply for health care coverage:**
  - Call the Eureka Call Center at 877-410-8809 or Covered CA at 800-300-1506.
  - Apply by mail
  - Apply in person at the Eureka, Garberville or Hoopa offices (call for details)
  - Apply through providers and community-based organizations
  - Apply online at C4Yourself.com, CoveredCA.com
- A person can complete the entire application and interview process on one call.

**No Wrong Door**
The Affordable Care Act led to the creation of Covered California, CA’s health benefits exchange. There are increased options for health care coverage for those with moderate income. The question has shifted from “Are you eligible?” to “What are you eligible for?” A customer does not need to know what program to apply for. The customer can use any application method that goes through the county or through Covered California. Whether the customer is eligible for Medi-Cal or tax credits to purchase insurance, they’ll be taken through the entire process no matter what door they come through. Yes, that means county eligibility workers can enroll customers in Covered California, including plan selection.

**Citizenship issues**
Citizenship status does not affect eligibility to Medi-Cal; it affects level of benefits. Medi-Cal eligible citizens and many legal non-citizens receive full scope Medi-Cal. Medi-Cal eligible undocumented non-citizens currently receive restricted/emergency only services. Medi-Cal eligible undocumented non-citizen individuals under age 26 receive full Medi-Cal benefits effective January 1, 2020. Social Services does not report undocumented non-citizens to USCIS.

**Managed Care and Partnership HealthPlan of California**
Managed care isn’t different or separate from Medi-Cal—it is Medi-Cal, managed differently. Medi-Cal recipients are enrolled in managed care in all 58 counties. The Humboldt plan is Partnership HealthPlan of California (PHC). PHC administers the coverage and payment for most medical services. PHC does not administer dental. PHC’s Member Services Department, 707-863-4155, takes calls Monday through Friday 8 a.m. to 5 p.m. [PHC’s website is helpful](https://www.partnershiphp.org). There is a PHC Member Handbook available on the website.

**Eureka Call Center 877-410-8809**
The Eureka Call Center has eligibility workers available to answer questions and help with cases Monday through Friday 7:30 a.m. to 5:30 p.m., open through lunch.

People can call to apply, ask questions about an existing case, report changes or ask general eligibility questions.