



THIS TOOLKIT IS NOT INTENDED FOR MEMBER USE

Review to Renew – CBO Toolkit from California Health and Wellness

Medi-Cal Redetermination

Redetermination Background:

Lockdowns. School closures. Social isolation. Inflation. Interest rate hikes. An uncertain economy. We've lived through a lot of turbulence recently. Now, with the end of the declared public health emergency, Medi-Cal members face "redetermination" for the first time since 2020. Redetermination is when county health agencies verify if current Medi-Cal members still qualify for Medi-Cal. Suspended during the pandemic, this process officially restarts on April 1, 2023.

The California Department of Health Care Services (DHCS) **estimates up to three million Californians may lose their Medi-Cal health care coverage** through the redetermination process. Fortunately, these residents may be eligible for financial assistance to secure coverage via Covered California.

Medi-Cal redetermination is a rolling process. Over the next 14 months, county health agencies will send key forms and instructions to local Medi-Cal members. Members will typically receive these communications on the anniversary of their original Medi-Cal enrollment month.

Materials and Instructions:

We all need to help Medi-Cal enrollees understand what they need to do and when they need to do it by to maintain their coverage.

This toolkit provides flyers, social media graphics and suggested post copy so Community-Based Organizations (CBO's) can let their communities know about the important changes coming up with Medi-Cal.

These assets are meant to inform members and the Safety Net that serves them (CBOs, schools foodbanks, legal aid, Providers and others) that the redetermination process is taking place and provide a timeline for members to update their Medi-Cal information. It's very important that all Medi-Cal members update their household information at this time to verify eligibility and not lose their benefits.

With this toolkit, your organization can:

1. **Social Media:** Share social media assets provided [here](#).
 - a. California Health and Wellness is happy to co-brand these social media assets by adding your logo through the program Canva or requesting it directly by emailing MedialInquiries@HealthNet.com.
2. **E-mail/Newsletter Message:** Send an E-Blast or include a blurb in your newsletter with suggested language from our Newsletter/Email template below.
3. **Website:** Update your website to help direct current Medi-Cal members with our Web Language and Button below.
4. **Flyers:** Co-brand flyers by adding your logo [through Canva](#) or requesting it directly by emailing MedialInquiries@HealthNet.com.
 - a. [Link to flyers on Bridging the Divide \(for download\)](#)
5. **FAQ:** Provide quick answers to common questions by using the FAQ below.

California Health and Wellness can make additional resources available as well including printing of materials, RV and health screening fairs, hosted webinars and digital and physical lead cards can all be made available. For opportunities of this nature, please contact, Aracely Navarro at Aracely.Navarro@HealthNet.com

Email Template

Subject Line: Update YOUR Medi-Cal information in person, by phone or online.

Dear [INSERT NAME],

Starting April 1, 2023, people who reside in California **and** receive Medi-Cal benefits will need to determine whether they are eligible to maintain their Medi-Cal benefits.

The federal government usually checks every year to make sure people still qualify for Medi-Cal benefits. During the COVID-19 emergency, the government put a pause on this yearly requirement. This pause meant that millions of people kept their coverage without a check each year to make sure they were still eligible. **This is now changing.** This means anyone no longer eligible to be a Medi-Cal member will be removed from having Medi-Cal benefits.

Health Net encourages all Medi-Cal members to take the steps below, which can help them keep their Medi-Cal coverage:

- **Update all contact information**, including address, phone number and email. Some Medi-Cal members will receive a letter from the county asking for this update. Each county needs this information so they can reach residents with important updates about keeping their Medi-Cal coverage.
- **Report changes in household** to the local county office. This includes if someone becomes pregnant, moves in or out of the home, income changes, or anything else that can affect Medi-Cal eligibility. Members can report changes by:
 - Calling their [county office](#).
 - Logging into their account at [BenefitsCal.com](#).
 - Mailing a letter to their [county office](#).
 - Visiting their [county office](#) in person.
- **Answer all requests** for information from the county office. This will help the county make sure that people who still qualify for Medi-Cal can keep their coverage without changes.

Members can visit [BenefitsCal.com](#) to learn more, update their information, or enroll in Health Net Medi-Cal.

Health Net has launched a new website for members to learn more about verifying eligibility and what to do if they are no longer eligible for Medi-Cal. Visit [CAHealthWellness.com/StayWithUs](#).

Web Language

Long Form

Attention all Medi-Cal Members: Update your household information, to confirm eligibility and renew your Medi-Cal coverage! To update your information, contact your county eligibility worker or visit [BenefitsCal.com](https://www.benefitscal.com). Keeping your health coverage can help you stay healthy and live your life to the fullest.

Short Form

Medi-Cal Members: Go to [BenefitsCal.com](https://www.benefitscal.com) to review your information, so that you confirm your eligibility and renew your Medi-Cal coverage!

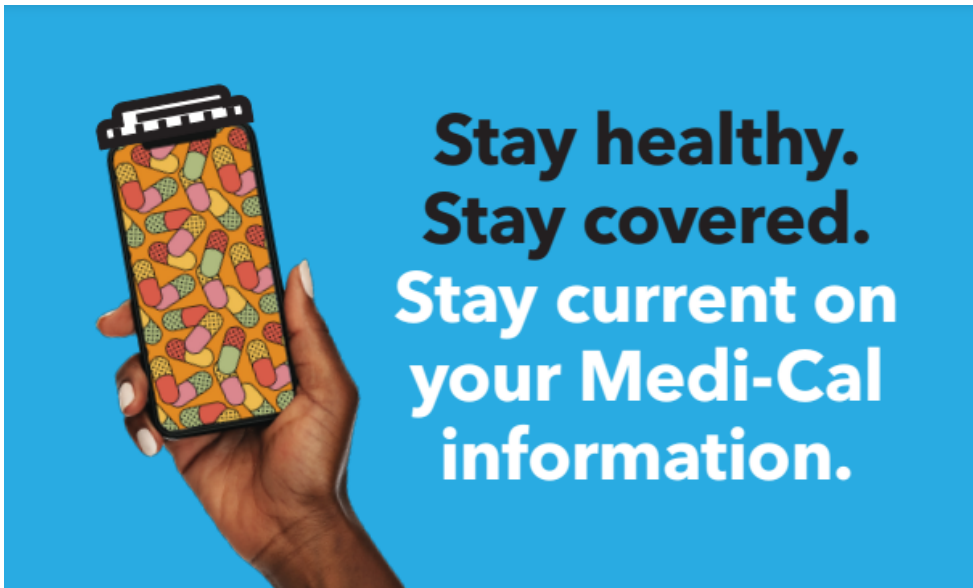
Flyers & Social Media Assets



Suggested Post Copy:

- It's almost time to renew your Medi-Cal coverage. If you receive a renewal form in the mail, your county needs more information. Fill it out and return it right away to keep yourself and your family covered. Visit CAHealthWellness.com/StayWithUs today.
- Keep yourself and your family covered. Log into your account to make sure Medi-Cal has your current address, email address, and phone number, if it has changed. Visit CAHealthWellness.com/StayWithUs today.

Flyer



Help your family stay healthy with Health Net Medi-Cal.

Help keep your access to doctor and hospital visits, preventive care and more. Check if you are still eligible for Health Net Medi-Cal. Visit CAHealthWellness.com/StayWithUs today.



With the end of the COVID-19 Public Health Emergency you will now need to confirm your Medi-Cal information to see if you still qualify for free to low cost health care. **Review and update your information if you**

- Moved recently
- Started a new job
- Become pregnant
- Had a household income change
- Had a new member join your household
- Had any other changes to your contact information (email, phone number, name, etc.)

Update your information at BenefitsCal.com.



Be sure to review and update your information.

Update your information on time to help you keep access to important services. These include doctor and hospital visits, wellness and preventive care, and more.

FAQs:

What is redetermination?

Prior to COVID-19, Medi-Cal beneficiaries were required to provide proof of eligibility once a year. This process was called redetermination, which was paused during the public health emergency and is now restarting.

When will redetermination start?

In California, resuming the redetermination requirement began on April 1, 2023, and will conclude by June 2024. In general, Medi-Cal enrollees may be asked to send to their county information during the month when they first enrolled in Medi-Cal. For example, if someone originally enrolled in the month of September, they may be asked to provide more information in September 2023.

Will everyone go through this process?

No. If a county has enough information to determine that someone is still eligible for Medi-Cal, the enrollee will be automatically re-enrolled without taking additional steps. This is sometimes referred to as the “ex-parte process.” The county may have the information needed via the enrollee’s participation in programs such as CalFresh (also known as SNAP as food stamps) or tax returns. Approximately 25% to 33% of people are expected to be redetermined automatically.

Will renewal packets be sent to all Medi-Cal beneficiaries?

Every Medi-Cal beneficiary will receive notification regarding the annual renewal. The annual renewal form is prepopulated, which allows an easy and consistent process for Medi-Cal beneficiaries to look at the information and provide necessary updates. The annual renewal form is sent via the U.S. Postal Service, but that is not the only way an individual has to complete the annual renewal. The annual renewal can be completed telephonically, online, email, in person, by mail or by calling the local county office.

Does it cost money to go through this process?

This process is free. Beneficiaries will never be asked to pay money to complete this process. If an enrollee is unsure, they should contact their local county directly.

Is the public health emergency’s unwinding going to be different for Medi-Cal Beneficiaries based on their eligibility, such as seniors and people with disabilities?

To simplify the complexity of the PHE unwinding process, the Department of Health Care Services will maintain the Medi-Cal beneficiaries’ current renewal month in their case records

and conduct a full redetermination at the next scheduled renewal month following the end of the PHE. This approach achieves the following:

1. It is the least disruptive to county workloads on both an initial and ongoing basis.
2. Aligns, to the greatest extent possible and prior to the PHE, on when Medi-Cal and CHIP beneficiaries usually expect to receive their auto-renewal letters or packets requesting additional information if auto-renewal is not successful. This familiarity is critical as DHCS rolls out the communication and outreach campaign discussed below.
3. Retains a similar pre-COVID-19 redetermination caseload distribution across the state, adjusting for the growth factor of individuals who enrolled into coverage and were protected through the continuous coverage requirements.

What is the difference between BenefitsCal and MyBenefits CalWIN?

Counties across the state use two different systems to determine eligibility for Medi-Cal and to case manage Medi-Cal programs. Each system has its own portal that Medi-Cal beneficiaries use to access case information. Counties that are CalSAWS use an online portal called BenefitsCal, while those counties that use the CalWIN system use an online portal called MyBenefits CalWIN. The counties and their online portal can be found here: [DHCS Keep Your Medi-Cal page](#).

Can updated contact information be provided online?

Yes, counties that are CalSAWS use an online portal called BenefitsCal, while those counties that use the CalWIN system use an online portal called MyBenefits CalWIN. [DHCS Keep Your Medi-Cal](#) lists which counties use which portal.

If Medi-Cal beneficiaries create accounts and update their information online, do they still need to contact their county to update?

No, they will not have to contact their county if they have already updated online.

Are there any other websites for Medi-Cal beneficiaries to update their information other than BenefitsCal or MyBenefitsCalWIN?

Medi-Cal beneficiaries can also use the [Covered California](#) portal.

Can a community-based organization report an address change on the Medi-Cal beneficiary's behalf?

The Medi-Cal beneficiary or someone acting as an authorized representative on their behalf must report the address change to the county. A community-based organization must be an authorized representative for that Medi-Cal beneficiary in order to report the change. In instances when the community-based organization is not the authorized representative, the



Medi-Cal beneficiary should be redirected to the county to report the address change through any of the allowable methods.

Will there be a notice of action other than the renewal packet?

Yes, all Medi-Cal beneficiaries will receive a letter that informs them of the end of the public health emergency and what the next steps will be.