



L.A. Care
HEALTH PLAN®

For All of L.A.

Medi-Cal Redetermination Webinar



May 2023

LA5089 0523

Agenda

- Continuous Coverage and Resumption of Medi-Cal Renewals
- Annual Medi-Cal Renewal Process
- The Call to Action
- Frequently Asked Questions
- L.A. Care Outreach Efforts
- Anthem Outreach Efforts
- Blue Shield Promise Outreach Efforts
- DHCS Public Outreach
- Key Takeaways
- Helpful Resources



Continuous Coverage and Resumption of Renewals



Continuous Coverage Requirement and Unwinding

- Due to the continuous coverage requirement during the public health emergency (PHE), the county has not been processing annual Medi-Cal redeterminations
 - Medi-Cal beneficiaries have been able to keep their coverage regardless of any changes in circumstances since March 2020
- The continuous coverage requirement ended on March 30, 2023. The Continuous Coverage Unwinding period began on April 1, 2023 and will end on May 31, 2024 (14-month period).
- This means that DPSS will resume the annual redetermination process for Medi-Cal beneficiaries by conducting a review of information to determine if the beneficiary is still eligible for Medi-Cal benefits.
- Disenrollment will not start immediately once the continuous coverage requirement ends and the unwinding period begins.
 - The first and second months after will focus on renewal activities including auto renewal and renewal packets (April and May 2023)
 - The end of the third month following is when the first redeterminations will be processed (June 30, 2023)
 - The fourth month following is when the first disenrollment will occur (July 2023)



Projected Impact

- Due to the continuous coverage requirement that was in place, many Medi-Cal beneficiaries have had limited contact with the county.
- As a result, the county may have outdated contact information for the beneficiary and many beneficiaries may be unaware of the renewal process.
- The California Department of Health Care Services (DHCS) has projected that 2-3M current Medi-Cal beneficiaries could lose their Medi-Cal coverage once redeterminations resume
 - This is an estimated decrease of 13-20% of beneficiaries statewide
 - L.A. Care is projecting a 13% annualized disenrollment rate or about 330K members



Annual Medi-Cal Renewal Process



Medi-Cal Annual Renewal Process

- During routine Medi-Cal operations, all Medi-Cal beneficiaries undergo an annual renewal redetermination process conducted by the Los Angeles County Department of Public Social Services (DPSS).
 - DPSS conducts a review of information within their existing data systems and determines if the beneficiary is still eligible for Medi-Cal benefits.
 - This process can be conducted automatically (ex parte) or a paper renewal form may need to be mailed to the beneficiary
- After being redetermined, the beneficiary will receive a notice of action letter informing them that either their benefits are being renewed for another year or discontinued at the end of their renewal month.



Medi-Cal Annual Renewal - Definitions

- Below are some quick and relevant definitions:
 - Annual Renewal Due Month: The month in which the beneficiary's annual renewal is due. Typically, the annual renewal due month is the 11th month after their application month. (For example, if an individual applies in August, their annual renewal due month is usually set to the following July).
 - Annual Renewal Form Due Date: The annual renewal form is due 60 days from the date that the annual renewal form is sent to the beneficiary.
 - Annual Renewal End Date: The last day of the annual renewal due month.



Medi-Cal Annual Renewal - Ex Parte

- About 90 days prior to the beneficiary's annual renewal end date, DPSS will begin redetermination activities by trying to auto renew coverage first – this is ex parte renewal
- During ex parte review, DPSS will attempt to verify the beneficiary's information through multiple sources available to the county. This includes but is not limited to:
 - Information in the beneficiary's Medi-Cal, CalWORKs, and CalFresh case files,
 - Information accessed through any available electronic databases or electronic verification services, such as the Federal Data Services Hub and Asset Verification Reports; and
 - All other sources of relevant information reasonably available to the county that are in accordance with the law and state policy.
- If DPSS is able to locate the information needed to redetermine eligibility through the ex parte process, then DPSS will not reach out to the beneficiary to request any additional information
 - DPSS will complete the annual renewal and send the approval Notice of Action letter.
- This above scenario is also known as the automatic Medi-Cal renewal process or the “happy path” or “e-Hit”



Medi-Cal Annual Renewal - Paper Form

- If DPSS is *not* able to redetermine continued eligibility through the ex parte process, then DPSS will send a pre-populated annual renewal form to the beneficiary at least 75 days prior to the beneficiary's annual renewal end date.
 - The beneficiary is given 60 days to complete and submit the annual renewal form
 - The beneficiary must provide the requested information to DPSS by the 60-day due date to prevent any lapse in coverage.
- Beneficiaries are not required to return the paper annual renewal form, however, they must provide the information requested in the form and sign the form through any of the available means below:
 - Information requested may be provided to DPSS online, by phone, in person, or by mail.
 - Acceptable signatures include a physical handwritten signature, electronic signature, or telephonic recorded signature.
- If DPSS receives the information needed to redetermine continued eligibility, then DPSS will complete the annual renewal and send the approval Notice of Action letter



Medi-Cal Annual Renewal - Outreach Attempts

- If 30 days have passed since the annual renewal form was sent to the beneficiary and DPSS has not received the requested information, then DPSS will contact the beneficiary via phone or in writing to provide a reminder.
 - If the beneficiary provides some of the requested information but DPSS still requires additional information to redetermine eligibility, then DPSS will attempt to contact the beneficiary once more by sending a Medi-Cal Request for Information.
- If the beneficiary provides some of the requested information and DPSS still requires additional information to redetermine eligibility, then DPSS will contact the beneficiary by sending a Medi-Cal Request for Information.
 - DPSS will send a second Medi-Cal Request for Information if the additional information is still needed and the beneficiary's annual renewal end date has not passed.
- If DPSS receives the information needed to redetermine continued eligibility by the annual renewal form due date, then DPSS will complete the annual renewal and send the approval Notice of Action letter



Medi-Cal Annual Renewal - Discontinuance

- If DPSS does **not** receive the information requested to redetermine continued eligibility by the annual renewal form due date, then DPSS will send a 10-day Notice of Action letter explaining the reason for discontinuance from Medi-Cal.
 - If the beneficiary provides all requested information after their annual renewal **form** due date but before their annual renewal **end** date, DPSS will rescind the discontinuance and complete the eligibility redetermination to avoid a break in coverage and send the approval Notice of Action letter.
- A beneficiary that is discontinued from Medi-Cal for failing to provide needed information or verification needed to confirm ongoing eligibility during the annual renewal process is entitled to a 90-Day Cure Period.
 - The 90-Day Cure Period language will be included in their Notice of Action
 - The 90-Day Cure Period is also known as the reinstatement period or going “on-hold”
- If the beneficiary provides the needed information during the 90-day cure period and the beneficiary is found eligible, then the discontinuance will be rescinded and the beneficiary’s eligibility will be retroactively restored back to the discontinuance date as though the information or verification was provided timely.

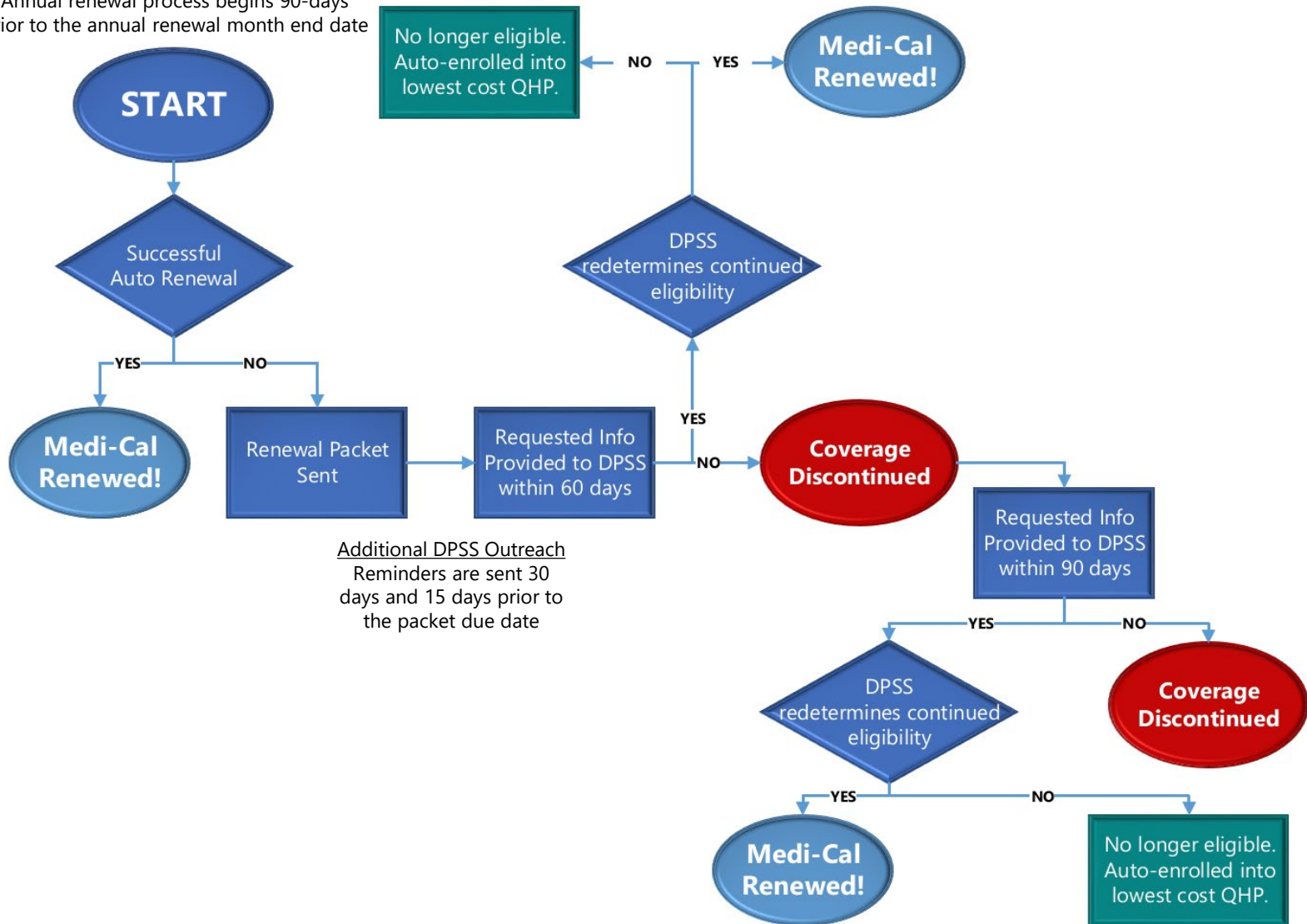


Medi-Cal Annual Renewal Process

90-day Annual Renewal Process

90-day probationary period

Annual renewal process begins 90-days prior to the annual renewal month end date



The Call to Action



Guidance and Our Call to Action

- Guidance from DHCS and CMS has provided a great opportunity for collaboration between States, Counties, managed care plans, and providers to help mitigate negative impact to Medi-Cal beneficiaries.
- DHCS has released key messages that Managed Care Plans and Providers should focus on to inform and encourage beneficiaries to get ready to renew their Medi-Cal coverage.
- L.A. Care is actively working to mitigate the negative impact to Medi-Cal beneficiaries through
 - Member and provider outreach activities
 - Strengthen our partnership with DPSS
- L.A. Care's **call to action** for our providers, as trusted partners to their patients, is to conduct outreach and bring awareness to your patients on the resumption of Medi-Cal renewals by disseminating the key messages recommended by DHCS through multiple modalities



Key Messages to Share with Beneficiaries

- **Update your contact information**
 - Make sure the county has your current contact information if it has changed. This way, the county can contact you about your Medi-Cal. If your information has changed, you can update it online at benefitscal.com, or by calling 1-866-613-3777.
- **Create or check your online account**
 - You can sign up to receive alerts on your case. Create or log into your BenefitsCal account to get these alerts. You may submit renewals or requested information online.
- **Check your mail**
 - The county will mail you a letter about your Medi-cal eligibility. You may need to complete a renewal form.
- **Complete your renewal form (if you get one)**
 - If you received a renewal form in the mail, submit your information by mail, phone, in person, or online so you don't lose your coverage.
- **Watch out for scammers**
 - There is no cost to renew your Medi-Cal!



Frequently Asked Questions



FAQs

- 1. What is the Medi-Cal annual renewal redetermination process?**
 - Every 12 months, DPSS will conduct a review of a Medi-Cal beneficiary's information to determine if they are still eligible to continue receiving Medi-Cal benefits.
- 2. Are Medi-Cal beneficiaries required to fill out and return renewal packets when they receive them?**
 - Yes. It is important that beneficiaries respond to county requests for updated information, including renewal packets.
 - The beneficiary does not need to return the paper annual renewal form but they must provide the necessary information requested in the form and sign the form through any of the available means indicated.
- 3. Is there help available for Medi-Cal beneficiaries who have received a renewal packet in the mail and need assistance completing it?**
 - Yes. If a beneficiary needs assistance completing their renewal packet, there are agencies across Los Angeles County with bilingual staff who are able to provide Medi-Cal enrollment assistance.
 - To view the list of available agencies, please reference the following link:
<http://publichealth.lacounty.gov/mch/choi/CHOIContractorListEngSp.pdf>



FAQs

- 4. How does a Medi-Cal beneficiary know when their renewal month is?**
 - The annual renewal month is the month in which the beneficiary's annual renewal is due. Typically, the annual renewal due month is the 11th month after their application month.
- 5. Which beneficiaries will be renewed through the auto-renewal / ex parte process?**
 - DPSS will attempt to verify the beneficiary's information through multiple sources available to the county. If DPSS locates the information needed to redetermine eligibility through the ex parte process, DPSS will complete the annual renewal and send the approval Notice of Action letter.
- 6. Which beneficiaries are required to complete an annual renewal packet?**
 - An annual renewal form will be sent to the beneficiary if DPSS is unable to redetermine continued Medi-Cal eligibility through the ex parte process.
 - Beneficiaries who do not have a valid social security number will not be able to successfully complete the ex parte process and a packet will be sent to have the beneficiary complete their annual Medi-Cal renewal.



FAQs

- 7. Is there an easy way to identify the renewal packet in the mail?**
 - Yes. The packet from DPSS will arrive in a yellow envelope.
- 8. How long does a beneficiary have to complete their renewal packet before getting disenrolled from Medi-Cal?**
 - The beneficiary is provided 60 days to provide the requested information to DPSS. If the requested information is not received by the 60-day due date, Medi-Cal benefits will discontinue at the end of the renewal due month.
- 9. What happens after renewal packets are returned?**
 - The Los Angeles Department of Public Social Services (DPSS) will send the beneficiary a letter to let them know if they still qualify for Medi-Cal coverage.
 - If additional information is needed to renew their coverage, DPSS will send the beneficiary a letter requesting any missing information.
- 10. How long does a beneficiary have to re-establish Medi-Cal coverage after discontinuance?**
 - Beneficiaries have up to 90 days from the discontinuation date to provide the information needed to re-establish coverage. After 90 days, beneficiaries will have to submit a new Medi-Cal application.



FAQs

11. How can beneficiaries update their information and/or respond to county requests for information?

- Requested information can be submitted by mail, in person, online, or phone.
- Beneficiaries can submit information online by logging in or creating an online account at <https://benefitscal.com/>
- To submit information by phone, beneficiaries can call DPSS at 1-866-613-3777 Monday – Friday from 7:30 a.m. – 6:30 p.m. (excluding holidays)

12. How can Medi-Cal beneficiaries receive alerts on their Medi-Cal case?

- Medi-Cal beneficiaries can receive alerts on their case by creating an online account at <https://benefitscal.com/>

13. Are there instructions on the Medi-Cal renewal process for beneficiaries to reference?

- Yes. DPSS has released a video tutorial and written instructions on the Medi-Cal renewal process. These tools can be accessed on the L.A. Care website at <https://www.lacare.org/members/member-support/medi-cal-renewal-faqs>



FAQs

14. Can an individual enroll into Medi-Cal without a California ID?

- Yes. DPSS will accept other forms of identification if a California ID is not available. Accepted documents include passports, bus passes or any other form of identification. As a last resort, DPSS will also accept an affidavit.

15. If a patient is experiencing homelessness what mailing address can be provided to DPSS?

- Individuals experiencing homelessness who are in need of a mailing address to receive/send communication to/from the county may utilize a county district office address closest to them. Please reference the office locations listed on the county website:
<https://dpss.lacounty.gov/en/resources/offices.html>

16. Will the Young Adult Expansion population that turned 26 during the continuous coverage period or will turn 26 during the unwinding lose their coverage prior to January 2024?

- No, to maintain continuity of coverage for these individuals who would have aged out until the new law takes affect, counties have been instructed to deprioritize these renewals towards the end of the unwinding period.



FAQs

17. How is Medi-Cal renewed for beneficiaries who have Supplemental Security Income (SSI)?

- Individuals who have Supplemental Security Income (SSI) get Medi-Cal through the Social Security Administration.
- If a member has questions, please advise them to call 1(800) 772-1213, Monday – Friday, 8:00 a.m. – 7:00 p.m. or they can visit their local Social Security Office.

18. How can members who receive SSI report a change?

- If a member receives SSI, they can report changes by calling 1(800) 772-1213, Monday – Friday, 8:00 a.m. – 7:00 p.m. or they can visit their local Social Security Office.
- <https://www.ssa.gov/locator>



FAQs

19. Where can members be directed if they no longer qualify for Medi-Cal coverage?

- If a member no longer qualifies for Medi-Cal, they may be able to get health coverage through a Covered California plan
 - For assistance with L.A. Care Covered, individuals can contact L.A. Care directly at 1(800) 222-4239
 - For assistance with Anthem Blue Cross, individuals who need help with transitioning to Covered California can contact 1 (833) 293-6822
 - For assistance with Blue Shield of California, individuals can contact their Direct Sales Line at 1 (800) 660-3007 and press # to be connected with a representative



L.A. Care Outreach Efforts



L.A. Care Redetermination Outreach Tactics

Outreach Strategies	Jan 2023	Feb 2023	March 2023	April 2023	May 2023	June 2023	July 2023	Aug 2023	Sept 2023	Oct 2023	Nov 2023	Dec 2023
DPSS & Plan Partner Collaboration	X	X	X	X	X	X	X	X	X	X	X	X
Member Engagement	X	X	X	X	X	X	X	X	X	X	X	X
Provider Engagement			X	X	X	X	X		X			X
Traditional Marketing				X	X							
Digital Marketing			X	X	X							

Phase 1 Strategies and Activities

Provider Engagement



- General Provider Outreach
- Provider Newsletter Article

Member Engagement



- In-person/virtual assistance with Medi-Cal renewals (CRCs & CBOs)
- FAQ for call center reps to answer Qs and direct members to resources
- Medi-Cal renewal page on L.A. Care website
- Annual mailing
- Animations & social media campaign

DPSS & Plan Partner Collaboration



- Secure sharing of member contact info changes daily (established process since August 2017)
- Developing process to include subcontracted plan data onto new standardized template for sharing with DPSS



L.A. Care Redetermination Outreach Tactics

Phase 2 Strategies and Activities in Process

Provider Engagement



- Provider webinar training
- Redetermination provider webpage on L.A. Care website
- Provider Toolkit to include:
 - Key messages and FAQs on how providers can support the renewal process
 - Referral process to CRCs and CBOs for renewal assistance for members
 - Animations for sharing on websites and provider offices
 - Provider poster

Member Engagement

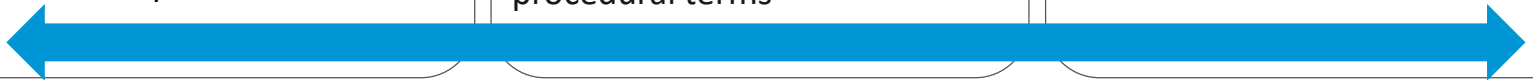


- Text campaign
- Robocall campaign
- Social media campaign
 - Animations
- Member newsletters
- Reminder postcards for disenrolled members
- Bus shelters & media ads
- Digital marketing
- Health promoter training
- Flyer for RAC / community members
- Outreach to UIS members / procedural terms

DPSS & Plan Partner Collaboration



- MOU in process to allow sharing of L.A. Care Medi-Cal member renewal data from DPSS to support proactive member outreach – estimated June 2023; and
- To allow DPSS to ingest Medi-Cal contact and demographic changes from L.A. Care Plan Partners



Medi-Cal Redetermination Provider Toolkit (Draft)



L.A. Care
Medi-Cal



Medi-Cal Redetermination Provider Toolkit

L.A. Care Medi-Cal

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- Access to and g Language (GOL)
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- Q: What happ**
- A:** DPSS will sen if additional ir requesting an
- Q: Is there hel in the mail**
- A:** Yes. L.A. Care Members can **1.877.287.62** for assistance
- Redetermination Animation & Video Guidance**
- Redetermination animation videos can be accessed via the website at <https://lacare.org/health-plans/medi-cal/plan-overview/medi-cal-renewal-faqs>.
- A Quick Guide to Sharing Videos**
- Sharing on your social media channels**
- We recommend sharing vertical videos on your social media channels.

 - Download the digital files using the link that was shared.
 - Select a video from the "9x16_Verical" folder that you would like to share.
 - Upload the video to your channel.

- Sharing via email**
- We recommend using a YouTube link when sharing the videos. A YouTube link is quick to load and won't slow down an email server.
- Either vertical or horizontal versions of the videos are fine for email, as an equal number of people check There are two possible methods:
- Method 1:** Simply copy and paste the original YouTube link that was shared with you into an email
- Method 2:**

 - Navigate to the YouTube video page
 - Click the "Share" icon at the bottom of the player
 - Copy the URL that appears on the popup

Medi-Cal Redetermination Provider Poster

- 11x16 posters to be distributed to providers via provider toolkit
Option for providers download digital copies available in 11 threshold languages
- Features tracking QR codes

Keep Your Medi-Cal

Don't miss important information about your Medi-Cal health coverage.

Make sure that your county has your current information.



Name



Phone



Address



E-mail

Report any changes to your name, address, phone number, or e-mail address.

**Los Angeles County Department of
Public Social Services (DPSS)**

1.866.613.3777 (TTY 1.800.660.4026)
Monday–Friday from 7:30 a.m.– 7:30 p.m.
Saturday from 8:00 a.m.– 4:30 p.m.,
Excluding holidays



Or online at:
[Benefitscal.com](https://www.benefitscal.com)



L.A. Care
HEALTH PLAN®

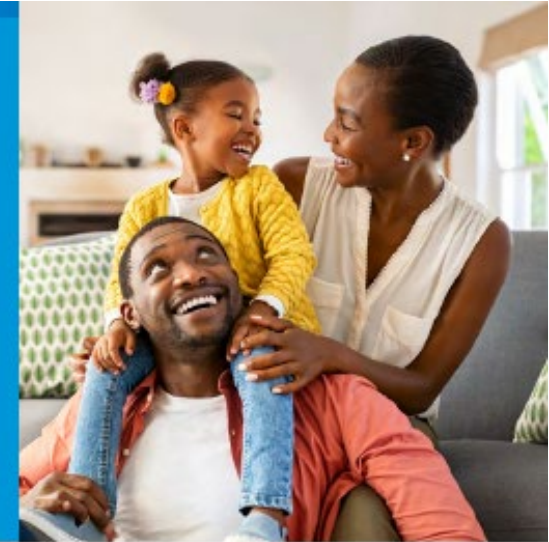


Medi-Cal Redetermination Flyer

- To be distributed to members and the larger community
- ECAC and RCACs

Keep yourself
and your
family covered

.....
If you have Medi-Cal,
make sure you renew
it when it's time



Medi-Cal covers vital health care services for you and your family, including doctor visits, prescriptions, vaccinations, mental health care, and more.

1 Update your contact information

Report any new changes to your name, address, phone number, and email address, so your county can contact you.

2 Check your mail

Counties will mail you a letter about your Medi-Cal eligibility. You may need to complete a renewal form. If you're sent a renewal form, submit your information by mail, phone, in person, or online at benefitscal.com, so you don't lose your coverage.

3 Create or check your BenefitsCal online account

You can sign up to receive alerts on your case. Create or log into your BenefitsCal account to get these alerts. You may submit renewals or requested information online at benefitscal.com.

4 Complete your renewal form (if you get one)

If you received a renewal form, submit your information by mail, phone, in person, or online at benefitscal.com to help avoid a gap in your coverage.



For more details and to update your contact information, visit benefitscal.com or

Los Angeles County Department of Public Social Services (DPSS)
1.866.613.3777 (TTY 1.800.660.4026)

Monday-Friday from 7:30 a.m.– 6:30 p.m. Excluding holidays



Medi-Cal Redetermination CRC Postcard

- Co-branded L.A. Care & Blue Shield Promise postcard utilizing Global Outreach Language
- To be distributed at participating CRC events (e.g., flu clinics, back to school, food pantries, etc.)
- Features tracking QR codes



KEEP YOUR MEDI-CAL



Don't miss important information about your Medi-Cal coverage.

Report any new changes to your name, address, phone number, and email address, so your county can contact you.

Los Angeles County Department of Public Social Services (DPSS)



1.866.613.3777 (TTY 1.800.660.4026)
Monday-Friday from 7:30 a.m. - 6:30 p.m.



Or online at: **Benefitscal.com**



**SCAN TO
LEARN MORE**

If you received a renewal form, submit your information by mail, phone, in person, or online to help avoid a gap in your coverage.

Blue Shield of California Promise Health Plan is contracted with L.A. Care Health Plan to provide Medi-Cal managed care services in Los Angeles County. L.A. Care and Blue Shield Promise are independent entities. Blue Shield Promise is an independent licensee of the Blue Shield Association.

Redetermination Info Page in the Medi-Cal Annual Mailing (Jan 2023)

Medi-Cal Renewal

During the COVID-19 public health emergency (PHE), you have been able to keep your coverage regardless of any changes in your circumstances. However, once the COVID-19 PHE ends, the Los Angeles County Department of Public Social Services (DPSS) will check to see if you still qualify for free or low-cost Medi-Cal.

Keep your Medi-Cal benefits by renewing on time. Here is some important renewal information:

What can I do to prepare for my Medi-Cal renewal?

- If you moved recently, or if any of your contact information, like your phone number or an email address, has changed, report your changes to DPSS to make sure you get important information about your Medi-Cal coverage.
- If you got a new job or your income has changed, be prepared to provide verifications.
- Check your mail – If you receive a renewal packet/form or a notice asking for more information, you may submit the information by mail, phone, in person, or online.
- Check your online BenefitsCal account for alerts – You may submit renewals or requested information online.

Do I need to complete a Medi-Cal renewal?

- DPSS will try and renew your Medi-Cal with information they already have available.
- DPSS will only ask you for more information if they need it to renew your Medi-Cal. It is important that Medi-Cal beneficiaries respond to county requests. This will make sure DPSS has the most current information it needs to renew your Medi-Cal coverage.

What happens after I return my form?

- DPSS will send you a letter to let you know if you still qualify for Medi-Cal coverage. If additional information is needed to renew your coverage, DPSS will send you a letter requesting any missing information.

Here is some important DPSS contact information to help you with your renewal:

1. BenefitsCal website: benefitscal.com

BenefitsCal is a website for LA County residents to apply for and to view benefits online for CalWORKs, CalFresh, General Relief, and Medi-Cal applications

2. DPSS Customer Service Center (CSC) Telephone Numbers

Toll Free	866-613-3777
Local numbers	626-569-1399 310-258-7400 818-701-8200
Hours of Operation	The CSC is available to assist you: <ul style="list-style-type: none">• Monday–Friday from 7:30 a.m. – 7:30 p.m.• Saturdays from 8:00 a.m. – 4:30 p.m.• Excluding holidays

If you have questions about your Medi-Cal renewal:

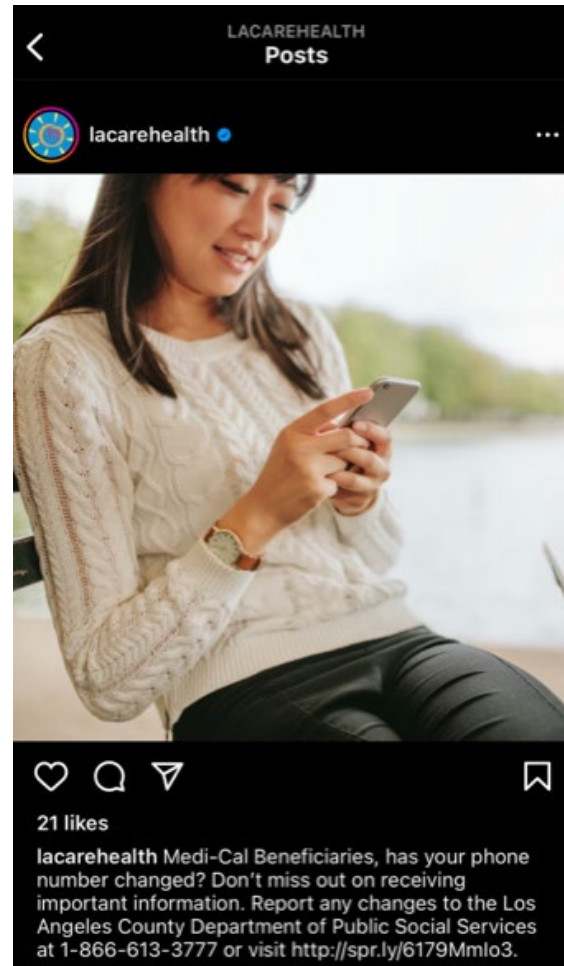
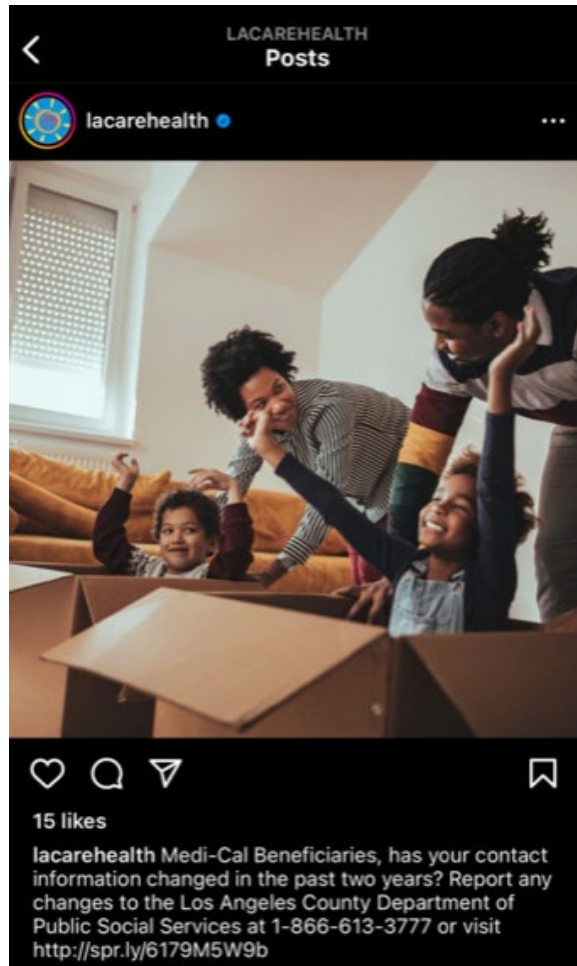
- Contact your Medi-Cal case worker at your local DPSS office at **1-866-613-3777 (TTY/TDD 1-800-660-4026)** Monday – Friday from 7:30 a.m. – 7:30 p.m. and Saturdays from 8:00 a.m. – 4:30 p.m. (excluding holidays)

I have SSI-Linked Medi-Cal, how do I update my information?

- If you have SSI-Linked Medi-Cal you have to update your information through Social Security. You can report your change by calling **1-800-772-1213 (TTY 1-800-325-0778)**, Monday through Friday, 8:00 a.m. – 7:00 p.m.

Redetermination- Animation & Social Media

- Animation- “Preparing for Medi-Cal Renewals” <https://youtu.be/U-dGAcgQLNs>
- Examples of social media posts using DHCS global outreach language



Redetermination - Website Highlights

Updated Renewal Webpage, Animation Videos, and FAQs

Medi-Cal Renewals/Redetermination

L.A. Care addresses many of the questions members have about renewing Medi-Cal coverage below. For any questions you may have that aren't covered, please call the L.A. County Department of Public Social Services (DPSS) number at 1-866-613-3777 (TTY) 1-800-660-4026. You can also go to benefitscal.com or visit [Keep Medi-Cal Coverage](#) for more information and to sign up for text or email updates on Medi-Cal renewals.

Due to the continuous coverage requirement that was enacted during the public health emergency (PHE), Medi-Cal beneficiaries have been able to keep their coverage regardless of any changes in circumstances. Once the continuous coverage requirement ends on March 30, 2023, the Los Angeles County Department of Public Social Services (DPSS) will resume Medi-Cal annual renewal redetermination operations on April 1, 2023.

UPDATE YOUR CONTACT INFO

Make sure the county has your current name, mailing address, phone number, email address, or other contact information if it has changed. If your information has changed, you can update it online at benefitscal.com, or by calling 1-866-613-3777 (TTY) 1-800-660-4026. This way, the county can contact you about your Medi-Cal.

CHECK YOUR MAIL

The county will mail you a letter about your Medi-Cal eligibility. You may need to complete a renewal form. If you're sent a renewal form, submit your information by mail, phone, in person, or online, so you don't lose your coverage.

CREATE OR CHECK YOUR ONLINE ACCOUNT

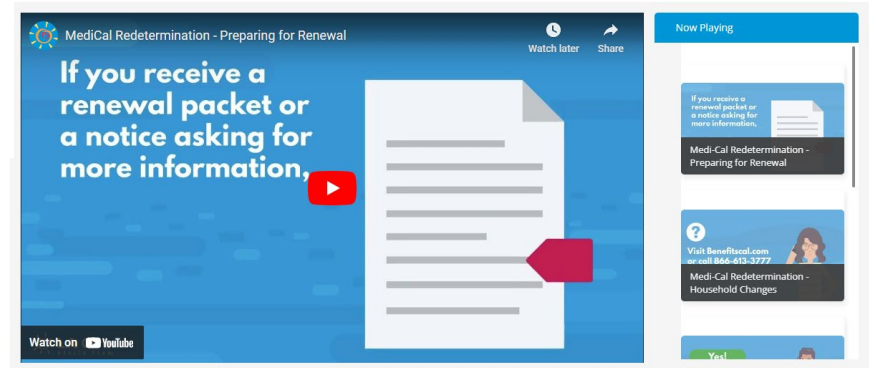
Create or check your [BenefitsCal](#) account to sign up to get text or email alerts about your case.

COMPLETE YOUR RENEWAL FORM (if you get one)

If you received a renewal form in the mail, you may submit your information by mail, phone, in person, or online to help avoid a gap in your Medi-Cal coverage.



Updated Medi-Cal Renewal Member Webpage with Key Messaging on Redeterminations



Featured Redetermination Animation Videos and FAQs

What is the Medi-Cal annual renewal redetermination process? +

Why do I have to renew my Medi-Cal? +

How do I know when my renewal month is? +



Redetermination- Medi-Cal On Hold Postcard



Please Remember

Keep your health care benefits...
It's time to renew your Medi-Cal coverage!

To apply for your Medi-Cal renewal, please complete the forms from the L.A. County Department of Public Social Services (DPSS) and return them as soon as possible!



Call the DPSS Customer Service Center at **1.866.613.3777**, Monday through Friday from 7:30 a.m. – 7:30 p.m. and Saturdays from 8:00 a.m. – 4:30 p.m. (TTY users should call **1.800.660.4026**), and speak to your eligibility worker for assistance or go to **benefitscal.com** to complete your renewal forms.

L.A. Care works with three other health plans to provide health care services for members.



1.888.839.9909



1.800.605.2556



1.888.285.7801



1.800.464.4000

Disclaimers from Plan Partners

Blue Shield: Blue Shield of California Promise Health Plan is contracted with L.A. Care Health Plan to provide Medi-Cal managed care services in Los Angeles County. L.A. Care and Blue Shield Promise are independent entities. Blue Shield Promise is an independent licensee of the Blue Shield Association.
Anthem: Blue Cross of California is contracted with L.A. Care Health Plan to provide Medi-Cal Managed Care services in Los Angeles County. Anthem Blue Cross is the trade name for Blue Cross of California. Anthem Blue Cross is an independent licensee of the Blue Cross Association. ANTHEM is a registered trademark of Anthem Insurance Companies, Inc. The Blue Cross name and symbol are registered marks of the Blue Cross Association.
Kaiser: In California, all plans are offered and underwritten by Kaiser Foundation Health Plan, Inc., One Kaiser Plaza, Oakland, CA 94612.
L.A. Care complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

Redetermination- Marketing Campaign



*Draft- mock-up version of bus shelter advertisement



Redetermination- Marketing Campaign

Commercial TV & Radio

Commercial TV

- Develop custom one-minute “Ask the Expert” vignettes via CBS2 and KCAL9
 - L.A. Care representative will engage directly with listeners to provide education on Medi-Cal renewal process, updates, key benefits, and more



Radio

- Share updates on redetermination process on popular L.A. stations
- Develop four-minute “Redetermination Information & Communication” segments
 - Lively Q&A exchange with show host to deliver in-depth explanation of changes to Medi-Cal eligibility and redetermination process
 - Will run on popular L.A. stations



Anthem Outreach Efforts



Anthem[®]

Medi-Cal Beneficiaries

Do you have any household changes?

You can report changes
in person, online, by phone, email, or fax.

Contact your Medi-Cal local county office today.

0:01 · Sponsored [Learn more](#)

- Redetermination Awareness
 - social media, radio, newspaper
- Member IVR-Text Campaigns
- Ready Set Renew Member Campaign:
 - Direct mail
 - Digital and social media
 - Text and outbound calls
 - emails
- Community Events
- Provider outreach and education
- Meetings with:
 - Community Based Organizations
 - Promotoras
- Call Center Redetermination Training
 - Capture and update member addresses
- Anthem Alert Landing Page:
<https://www.anthem.com/ca/staycovered>
- Covered CA partnership

Anthem BlueCross

Ready. Set. Renew.

It's time to renew your benefits.

The **deadline to renew** your Anthem healthcare benefits is coming up. But don't worry, we're here to help.

We created a short video to walk you through the process. Just scan the QR code below to watch. It's as easy as...

- 1 Ready.**
Get your documents ready. The video will tell you exactly what you need.
- 2 Set.**
Make sure your form is all set. See helpful tips in the video.
- 3 Renew.**
Submit your renewal form over the phone or through the mail.

Scan the QR code to watch the video.

1/20/21 10:00:00 AM PST [anthem.com/ca/medi-cal](https://www.anthem.com/ca/medi-cal)

Anthem BlueCross

Ready. Set. Renew.

This info sheet has a list of what you need to know:

- Examples of documents you may need:**
 - Social Security card
 - Paystub
 - Most recent W-2 form
 - Utility bill
- Your renewal options:**
 - Call your local county office.**
 - Mail to your local county office.**

Anthem Blue Cross is the trade name of Blue Cross of California. Anthem Blue Cross and Blue Cross of California Partnership Plan, Inc. are independent licensees of the Blue Cross Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc. Blue Cross of California does not contract with J. A. Care Health Plan to provide Medi-Cal Managed Care services in Los Angeles County.

Preparado. Listo. Renueve.

Esta hoja informativa tiene una lista de lo que necesita saber:

- Ejemplos de documentos que tal vez necesite:**
 - Tarjeta del Seguro Social
 - Talónario de pago
 - Formulario W-2 más reciente
 - Factura de servicio público
- Sus opciones de renovación:**
 - Lláme al su oficina local del condado.**
 - Envíe por correo a su oficina local del condado.**

Anthem Blue Cross es el nombre comercial de Blue Cross of California. Anthem Blue Cross y Blue Cross of California Partnership Plan, Inc. son licenciatarios independientes de Blue Cross Association. Anthem es una marca comercial registrada de Anthem Insurance Companies, Inc. Blue Cross of California no tiene un contrato con J. A. Care Health Plan para proporcionar servicios de Medi-Cal Managed Care en el Condado de Los Angeles.

1/20/21 10:00:00 AM PST [anthem.com/ca/medi-cal](https://www.anthem.com/ca/medi-cal)

Blue Shield CA Promise Outreach Efforts





Blue Shield Ca Promise Redetermination Retention Plan

- 1 Outreach: Conduct effective outreach**
 - Teams certified and ready to assist
 - Mailings, calls, in-person assistance
 - Community Resource Centers, CRC's
- 2 Collaborate: Internally/Externally**
 - Alerting & supporting internal member facing teams to be prepared & act
 - Partnering with Counties & Plan Partners
 - Assisting PPG's/PCP's to act effectively
- 3 Educating: not alarming**
 - Don't panic but act, know what's next
 - Members, CBO's, EE's, PPG's, Walk-Ins at CRC's



Examples of Member facing information

DHCS Poster modifiable example



Keep yourself and your family covered.

Make sure your information is up to date.

Medi-Cal covers vital health care services for you and your family, including doctor visits, prescriptions, vaccinations, mental health care, and more. So, if you have Medi-Cal, make sure you renew it when it's time.

Update your contact information
Report any new changes to your name, address, phone number, and email address, so your county can contact you. For Los Angeles Go to [benefitsCal.com](https://benefitscal.com)

Check your mail Look for a YELLOW envelope! Counties will mail you a letter about your Medi-Cal eligibility. You may need to complete a renewal form. If you're sent a renewal form, submit your information by mail, phone, in person, or online, so you don't lose your coverage.

Create or check your online account
You can sign up to receive alerts on your case. Create or log into your account to get these alerts. You may submit renewals or requested information online. Go to [benefitsCal.com](https://benefitscal.com)

Complete your renewal form (If you get one) Look for a YELLOW envelope! If you received a renewal form, submit your information by mail, phone, in person, or online to help avoid a gap in your coverage. Go to [benefitsCal.com](https://benefitscal.com)

For more details and to learn how to update your contact information, visit KeepMediCalCoverage.org
Los Angeles DPSS: 866-613-3777 M-F 730a-630p
Online go to BenefitsCal.com



Include Los Angeles specific information

- Encourage going online and registering
 - BenefitsCal.com
- Look for a YELLOW envelope
- Go to [benefitsCal.com](https://benefitscal.com)
- Yellow envelope, [benefitsCal.com](https://benefitscal.com)
- LA DPSS 800 line and hours, BenefitsCal.Com



Provider Resources

- Trainings
 - Onsite Lunch & Learns
- Collateral Materials
 - Offer to print customized DHCS flyers
 - Co-branded posters
 - Community Resource Center postcards
 - Community Resource Center maps
 - Member Resource flyer
 - Redetermination flyer
- Provider Portal
 - Member Rosters

The Department of Health Care Services Public Outreach



Messaging and Public Outreach

- DHCS is working with a contracted media vendor to finalize a robust communications plan.
- This will include outreach with key messages on various platforms, such as:
 - Online (social media and other platforms)
 - Television, radio, and streaming apps
 - Billboards and public transit advertisements
- Plan to use yellow envelopes for Medi-Cal renewal packets to enable targeted messaging
- DHCS toolkits have been developed for use by counties, managed care plans, providers, community partners, advocates, and others.
 - Available at <https://www.dhcs.ca.gov>
 - <https://www.dhcs.ca.gov/toolkits/Pages/Medi-Cal-Continuous-Coverage-Unwinding.aspx>
- Sign up to be a Coverage Ambassador for access to toolkits, flyers, scripts, and other materials
 - <https://www.dhcs.ca.gov/toolkits/Pages/PHE-Outreach-Toolkit.aspx>



Key Takeaways



Key Takeaways

- **Routine redetermination operations resumed on April 1, 2023.**
 - The first potential discontinuances will occur in July 2023
- **Not everyone needs to call DPSS– only if their information has changed and they have not already reported the change**
 - They can also self-serve and report through their online account at benefitscal.com
- **Not everyone will receive a renewal packet, but those who do must act in order to keep their coverage**
 - Look out for a yellow envelope!
 - Complete and return the packet by the due date!
- **Raise Awareness, not panic**
 - Promote key messages at every touchpoint
 - Remind members that annual renewals are part of normal operations



Key Takeaways

- **Providers can support redeterminations by relaying key and consistent messages to their patients**
 - Update your contact information with the county
 - Create or check your online account
 - Check your mail
 - Complete your renewal form (if you get one)
 - Watch out for scammers
- **Promote other coverage options**
 - If members are no longer eligible for Medi-Cal, promote other coverage options through Covered California
 - For assistance with L.A. Care Covered, individuals can contact L.A. Care directly at 1(800) 222-4239
 - For assistance with Anthem Blue Cross, individuals who need help with transitioning to Covered California can contact 1 (833) 293-6822
 - For assistance with Blue Shield of California, individuals can contact their Direct Sales Line at 1 (800) 660-3007 and press # to be connected with a representative



Helpful Resources



Important Contact Information

Here is some important contact information to help beneficiaries with the Medi-Cal renewal process:

- **DPSS Customer Service Center**

Toll Free	Local Numbers	Hours of Operation
1-866-613-3777	(626) 569-1399 (310) 258-7400 (818) 701-8200	Monday – Friday 7:30 a.m. – 6:30 p.m. Excluding holidays

- [BenefitsCal.com](https://www.BenefitsCal.com)
- Beneficiaries can visit [KeepMediCalCoverage.org](https://www.KeepMediCalCoverage.org) to learn more and to sign up for text and email alerts from DHCS to receive general updates about what is happening with Medi-Cal renewals.



Medi-Cal Enrollment Assistance

The Department of Public Health has partnered with the following list of agencies across Los Angeles County offering in-person assistance with Medi-Cal enrollment

CHOIContractorListEngSp.pdf (lacounty.gov)

Get Help Applying for Free or Low-Cost Health Coverage

All agencies listed below serve clients in Los Angeles County. Bilingual staff assist families with enrollment in public and private health programs. Please contact the agencies listed below for more information.

SPA 1	Antelope Valley, Lancaster, Palmdale, Northern LA County	Tarzana Treatment Center (661) 726-2630, ext 2186, 4323, or 4330
SPA 2	Burbank, Glendale, Northridge, Santa Clarita, San Fernando Valley	<ul style="list-style-type: none"> • Northeast Valley Health Corp (866) 696-3842 • Valley Community Healthcare (818) 763-8836 Ext 1053 • Child & Family Guidance Center (818) 739-5000
SPA 3	El Monte, Monrovia, Pomona, San Gabriel Valley	<ul style="list-style-type: none"> • Emanate Health, G.E.M. (626) 851-2748 • Asian Pacific Health Care Venture (323) 644-3882 • Maternal & Child Health Access (213) 749-4261 • Worksite Wellness LA (323) 758-9480
SPA 4	Boyle Heights, Chinatown, Downtown LA, Echo Park, El Sereno, Elysian Park, Hollywood, Koreatown, Little Toyko, Pico Union, Westlake	<ul style="list-style-type: none"> • Maternal & Child Health Access (213) 749-4261 • Dignity Community Care (213) 742-5537 • Asian Pacific Health Care Venture (323) 644-3882 • Chinatown Service Center (213) 808-1700 • Korean Health Education Information & Research (213) 637-1080 • Worksite Wellness LA (323) 758-9480
SPA 5	Culver City, Santa Monica, Venice, West Los Angeles	Venice Family Clinic (310) 664-7509
SPA 6	Compton, Crenshaw, Exposition Park, Florence, Watts, Jefferson Park, Leimert Park, Lynwood, Paramount, North University Park, South Central LA, University Park	<ul style="list-style-type: none"> • Dignity Community Care (213) 742-5537 • Community Health Councils (323) 295-9372 ext:228 or 256 • Maternal & Child Health Access (213) 749-4261 • Worksite Wellness LA (323) 758-9480
SPA 7	Artesia, Bell, Bellflower, Bell Gardens, Downey, East LA, Huntington Park, Hawaiian Gardens, Lakewood, Lynwood, Montebello, Norwalk, Pico Rivera, Santa Fe Springs South Gate, Whittier	<ul style="list-style-type: none"> • Human Services Association (562) 806-5400 • Maternal & Child Health Access (213) 749-4261 • St. Francis Medical Center (800) 603-9355 • Worksite Wellness LA (323) 758-9480
SPA 8	Carson, Hawthorne, Inglewood, Lawndale, Lomita, San Pedro, Torrance, Wilmington	<ul style="list-style-type: none"> • Community Health Councils (323) 295-9372 ext:228 or 256 • Crystal Stairs, Inc. (323) 299-9295

For countywide assistance with healthcare advocacy and troubleshooting, call Maternal & Child Health Access at (213) 749-4261 or Neighborhood Legal Services at (800) 896-3202.

For healthcare support through your local public school, call: LA Unified, (213) 241-3840. All other school districts: LA County Office of Education, (562) 922-8954.

City of Long Beach
Dept. of Health & Human Services (562) 570-7979

Altadena, Pasadena & Sierra Madre
Pasadena Public Health Dept. (626)744-6068



DHCS Phase 2 Flyer- Stay Covered

This flyer can be accessed and downloaded on the DHCS Medi-Cal Continuous Coverage Requirement resource page: [Medi-Cal Continuous Coverage Unwinding Toolkit](#)

Keep yourself and your family covered.



Make sure your information is up to date.

Medi-Cal covers vital health care services for you and your family, including doctor visits, prescriptions, vaccinations, mental health care, and more. So, if you have Medi-Cal, make sure you renew it when it's time.

Update your contact information

Report any new changes to your name, address, phone number, and email address, so your county can contact you.

Check your mail

Counties will mail you a letter about your Medi-Cal eligibility. You may need to complete a renewal form. If you're sent a renewal form, submit your information by mail, phone, in person, or online, so you don't lose your coverage.

Create or check your online account

You can sign up to receive alerts on your case. Create or log into your account to get these alerts. You may submit renewals or requested information online.

Complete your renewal form (if you get one)

If you received a renewal form, submit your information by mail, phone, in person, or online to help avoid a gap in your coverage.



For more details and to learn how to update your contact information, visit [KeepMediCalCoverage.org](https://www.KeepMediCalCoverage.org)



Click to upload your logo image.

Office Name
Physical Address Line 1
Physical Address Line 2
Phone Number
Website



DHCS Phase 2 Flyer- Take Action

This flyer can be accessed and downloaded on the DHCS Medi-Cal Continuous Coverage Requirement resource page:

[Medi-Cal Continuous Coverage Unwinding Toolkit](#)

Medi-Cal Beneficiaries:

Take action to keep your Medi-Cal

Your local county office will mail you a letter about your Medi-Cal coverage.



The letter will tell you if:

Your county needs information from you to renew your Medi-Cal

or

Your Medi-Cal was renewed automatically



If you get a renewal form, please fill it out and return it right away.

Check that your local county office has your updated information, including your name, current address, email address, and phone number.



For more details and to learn how to update your contact information, visit KeepMediCalCoverage.org



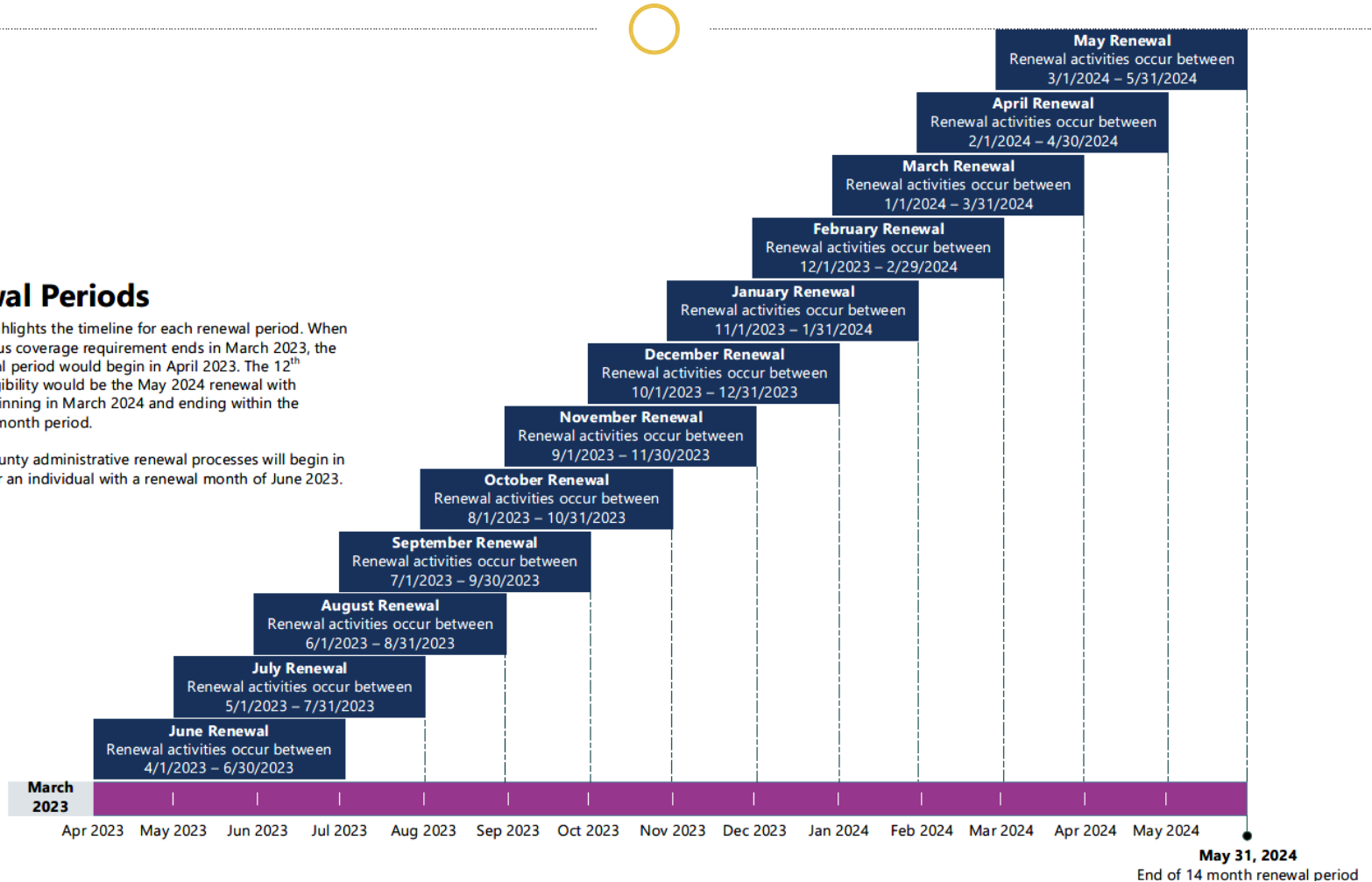
Medi-Cal Redeterminations – Renewal Periods

ELIGIBILITY SEQUENCING MAP

Renewal Periods

This page highlights the timeline for each renewal period. When the continuous coverage requirement ends in March 2023, the DHCS renewal period would begin in April 2023. The 12th month of eligibility would be the May 2024 renewal with activities beginning in March 2024 and ending within the required 14-month period.

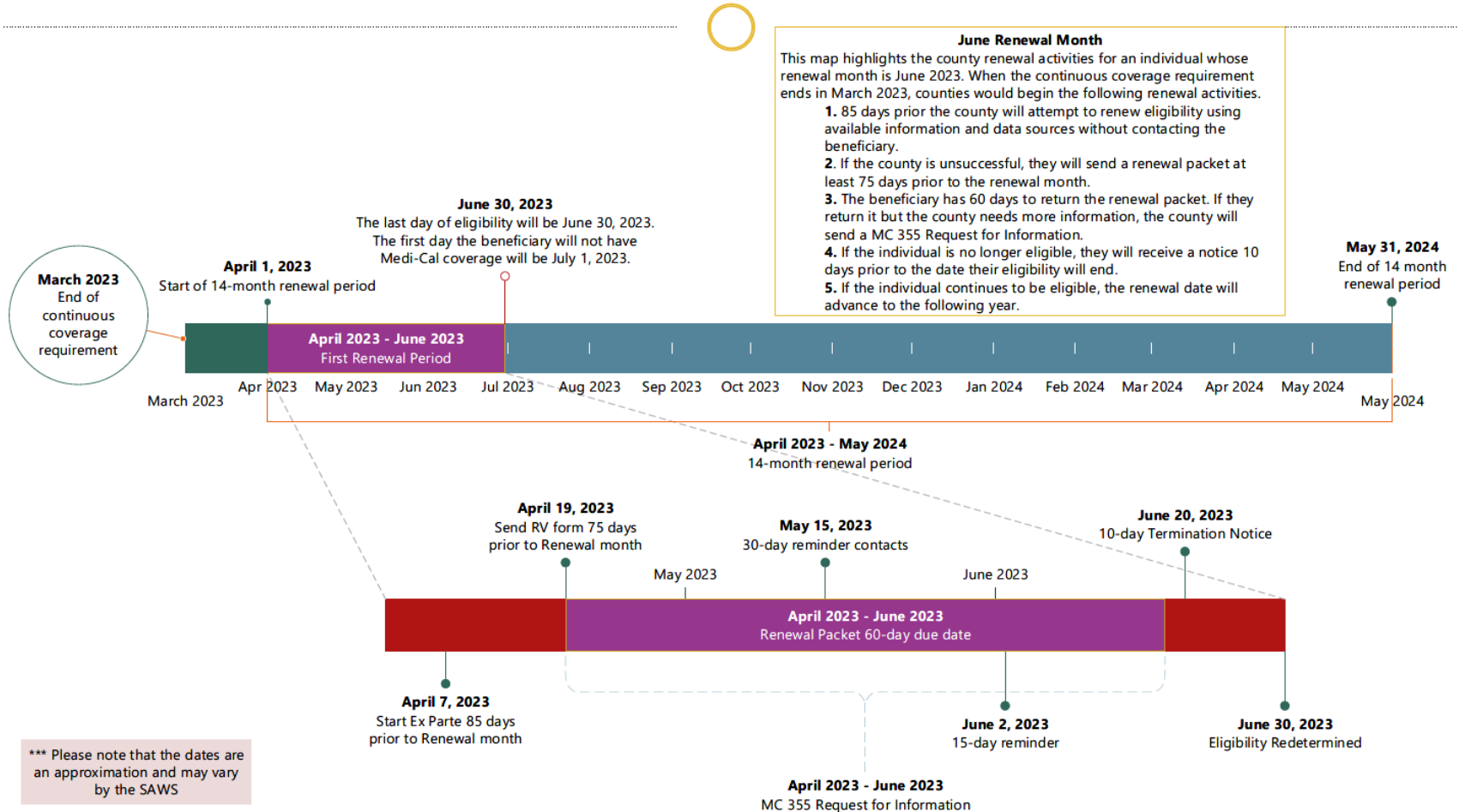
Example: County administrative renewal processes will begin in April 2023 for an individual with a renewal month of June 2023.



From: DHCS Medi-Cal COVID PHE & Continuous Coverage Operational Unwinding Plan <https://www.dhcs.ca.gov/Documents/PHE-UOP/Medi-Cal-COVID-19-PHE-Unwinding-Plan.pdf>

Medi-Cal Redeterminations - Timeline

ELIGIBILITY SEQUENCING MAP





Thank You

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