# Background and Key Steps to Helping People Experiencing Homelessness Renew Their Medi-Cal

**62.0** 

For more information on all of these topics, see the full Medi-Cal Renewal Toolkit on the Homebase website

# **Background**

After a 3-year pause due to COVID-19, Medi-Cal is back to requiring people to renew their coverage every year.

Medi-Cal is California's state Medicaid program, and it provides health care coverage to low-income households. From July 2023 to September 2024, it is estimated that 2-3 million Medi-Cal members will lose coverage, including 1.5 million people who are still eligible but may lose coverage because they did not renew on time or did not receive their renewal packet.

Many people experiencing homelessness are likely eligible for or already enrolled in Medi-Cal. It is a vital safety net for unhoused people, particularly since the program recently introduced additional wraparound services and housing supports through the <u>CalAIM initiative</u>.

People experiencing homelessness are more at risk of losing Medi-Cal coverage, as members receive their renewal packets at their last known mailing address. Most people experiencing homelessness may not have a mailing address or their mailing address has changed in the past three years. They may not receive notice of the upcoming renewal requirements, and they may not discover they have lost health coverage until they go to a medical appointment.

# **Navigating the Renewal Process**

Every year, federal law requires that most Medi-Cal members prove that they still qualify for health coverage by sharing updated information about their income, changes in family circumstances, etc. Each Medi-Cal member has a different renewal date based on when they first enrolled or had a renewal of eligibility. Renewals can happen automatically or manually:

#### Automatic renewals

(also known as <u>ex parte renewals</u>)

California is required to try to automatically renew a Medi-Cal member's coverage based on information that the state and county have about the individual and household (including through electronic data sources). With automatic renewals, a member isn't required to return a form or take any action to maintain their Medi-Cal coverage. Instead of a renewal form, a member will get a letter from Medi-Cal saying that they have Medi-Cal for another year.

California has pursued several strategies that will make more people experiencing homelessness eligible for automatic or streamlined renewals:

- If clients have \$0 or very low-income (100% of the federal poverty level or lower), Medi-Cal can renew their Medi-Cal without needing a completed renewal packet.
- If the county knows the individual is experiencing homelessness (a "hard to reach" population), they can redetermine eligibility and move the renewal date out 12 months. This requires individuals to contact their county office and let them know they are unhoused – but then they do not have to complete the renewal packet.

#### Manual Renewals

When Medi-Cal can't verify member information through the ex parte process, the member must go through a manual renewal process. Members receive a yellow envelope with the renewal packet in the mail roughly 2 months before their renewal date. This process requires the individual to return the renewal information and sometimes share specific documents that serve as proof (e.g., pay stubs to prove income) about themselves and/or members of their household. They should be sure to return the information by the deadline included in the county request.

There are 4 ways to submit renewals:



In-person at the client's county Medi-Cal office



On a telephone call with the county Medi-Cal office



Online (find your county to create an account)



Mail in a completed renewal form



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# You Can Help Your Clients Keep their Medi-Cal

- Help your clients update their contact information (cell, mail, email, etc.) with the county so they receive renewal notices and packets.
- Find out if your client is on Medi-Cal and what their renewal due-date is so they're prepared.
- Identify mailing options for clients at your office/facility or elsewhere.
- Forge relationships with <u>Health Enrollment Navigators</u>, who are experts in helping people learn about, renew or apply for Medi-Cal. They can assist clients in multiple languages.
- Advocate for clients to have an expedited renewal based on the no/low income and "hard to reach" waivers described above.
- Prepare your clients to access their personal documents, if needed for the renewal process.
- Help your clients start an online Medi-Cal account or, if they already have one, use it to complete the renewal process.
- Call the local Medi-Cal office (with your client present or on a 3-way call) or visit the county office with your client. Note that wait times can be long.
- Help your client complete a <u>blank Medi-Cal renewal form</u> and mail it.

# If your client has an issue or loses their Medi-Cal

- Clients can still submit their renewal form or missing information to their county Medi-Cal office up to 90 days after their Medi-Cal is terminated (aka the "90-day cure period").
- If clients think their Medi-Cal ended in error, they can ask their county for a Medi-Cal Fair Hearing. They can currently request a fair hearing up to 120 days after receiving the notice of termination.
- Contact the <u>Health Consumer Alliance</u> for free, confidential legal services.
- Re-apply for health care through <u>Medi-Cal</u> or <u>Covered California</u>.

# **Key resources**

- Medi-Cal Renewal Toolkit to assist people experiencing homelessness to keep their health coverage
- Medi-Cal/DHCS main renewal site to apply, renew, update information, etc.
- <u>DHCS Unwinding and Redeterminations Toolkit</u> tools for an outreach and awareness campaign
- Create an online account (<u>find your county</u> to create an account)
- Find the <u>local county Medi-Cal office's</u> contact information
- List of local <u>Health Enrollment Navigators</u> by county
- Health Consumer Alliance free, confidential legal aid

