

Medi-Cal Renewals: Understanding the Process and Its Impacts



Every year, federal law requires most Medi-Cal¹ members to prove that they still qualify for health coverage through an annual renewal process.

How Renewals Work

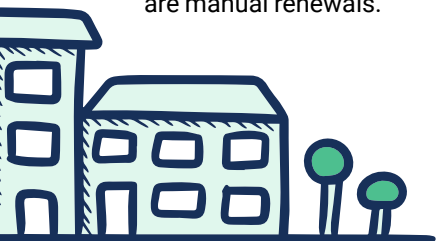
Every Medi-Cal member has a different renewal date based on when they first enrolled or had a renewal of their eligibility, since Medi-Cal requires people to renew every 12 months. People can renew in several ways: online, in-person, over the telephone, or through regular mail.

Automatic renewals

For some people, renewals can happen automatically through a process known as “ex parte renewal.” **California is required to try to automatically renew a Medi-Cal member’s coverage based on information California already has about a household (including through electronic data sources).** With ex parte renewal, a member isn’t required to return a form or take any action to maintain their Medi-Cal coverage.² The ex parte process is something that happens in the background through the Medi-Cal agency. Instead of a renewal form, a member will get a letter in the mail from Medi-Cal telling them that they have Medi-Cal for another year.

Manual renewals

When Medi-Cal can’t verify member information through the ex parte process, the member must go through a manual renewal process. This process requires the individual to return renewal information and sometimes share specific documents that serve as proof of certain facts (such as pay stubs to prove income) about themselves and/or members of their household. They usually have to update their income and household size to be sure they are still eligible for Medi-Cal. Most renewals for Medi-Cal are manual renewals.



Medi-Cal Renewal During the COVID Public Health Emergency

Before the COVID-19 pandemic, Medi-Cal members were required to renew their eligibility every year. But in March 2020, the federal government declared a public health emergency (PHE). During the PHE, people eligible for Medi-Cal had “continuous coverage.” California was not allowed to terminate most people’s Medi-Cal coverage.

This meant that no one had to renew their Medi-Cal, they just stayed on coverage year after year. Continuous coverage allowed millions of people to stay covered without any interruption.

During that time, an additional 3.2 million people in California enrolled in Medi-Cal. For more information and resources, please review [DHCS’ Medi-Cal COVID-19 Public Health Emergency and Continuous Coverage Unwinding Plan](#).

Medi-Cal Renewal after the End of the Public Health Emergency

The public health emergency ended on May 11, 2023. In California, continuous Medi-Cal coverage ended on March 31, 2023 and the annual redetermination process began for June 2023 renewals. The resuming of annual renewals is referred to as the ‘continuous coverage unwinding period.’

Medi-Cal will send letters every month to members with renewals during that specific month telling them what is needed to complete their renewal. They may get a renewal packet or they may get a letter letting them know their Medi-Cal has already been renewed for another year.

During the next 12 months, approximately 16 million Medi-Cal members will have to complete a renewal in some way. California recommends that all Medi-Cal members who have changed their contact information share their most up-to-date contact information to be sure they can receive important information about their renewal date, as well as the renewal package in the mail or online (if they have an online account). Even if a member has shared their updated contact information in a renewal packet, they should call to verify the county received that updated contact information. Members can visit [KeepMediCalCoverage.org](#) or contact their local county Medi-Cal office to learn where to update their information or complete their renewal information.

¹ For a quick overview of Medi-Cal, see the companion document, “[Medi-Cal \(California’s Medicaid Program\)](#)”

² [Streamlining Medicaid Renewals with the Ex Parte Process](#)



Medi-Cal Renewal Process in 2023-2024: What to Expect

Each month, most people whose Medi-Cal is due for renewal will receive a yellow envelope with a renewal package in the mail. The papers are pre-populated with information the county already has about the household from when they first applied for Medi-Cal. Members need to review the information, update the paperwork with any new information, correct wrong information – especially changes to their income, contact information, or the number of people in their household – and return the updated information to their county Medi-Cal office.³

People have approximately two months to gather and return the requested information. They should be sure to return the information by the deadline included in the county request.

Many people are expected to lose their health coverage in this process. Some may lose Medi-Cal because they now make too much money to qualify. Millions are likely to lose coverage due to procedural issues: they did not submit their renewal in time, they did not receive their renewal forms because they were sent to the wrong address, the forms were confusing and/or members did not understand what they needed to do with the forms, and more.



Impact of the Renewal Process on People Experiencing Homelessness

Between 2 and 3 million Californians are projected to lose Medi-Cal coverage during this unprecedented time. People experiencing homelessness are particularly vulnerable to losing coverage because of barriers unique to their situations, such as the following:

- Renewal notices and packets will be sent to last known addresses. People facing housing instability have likely moved since enrolling in Medi-Cal and Medi-Cal may not have their current mailing address. People living in shelters, on the street, in parks, in their cars, by riverbeds and streams – who have no ability to receive their mail – are also unlikely to receive renewal packets, any notices/reminders, or translation information.
- People experiencing homelessness lack access to a telephone or a computer and other supports needed to complete renewals.
- People experiencing homelessness may not have the personal documents often needed for the renewal process, which requires proving changes in income or household size.
- People who had never enrolled in Medi-Cal until COVID have never been through the renewal process and may find it particularly complicated.
- The process itself is complex, burdensome, and challenging for any person, but can be especially challenging if someone is also facing mental health challenges.

As a result of these various barriers, **people experiencing homelessness may lose their health coverage and may not find out until they try to access health care services.**

³ Medi-Cal will eliminate consideration of assets for programs that have a property limit requirement as of January 1, 2024, therefore they will not need to review assets for renewals in 2023. New applications until January 1, 2024 still must be reviewed for property and resources.