Medi-Cal Renewal Toolkit Help the People You Serve Keep Their Medi-Cal

Medi-Cal provides health care coverage to low-income households. People enrolled in Medi-Cal must go through a renewal process every year. But for three years in the height of the COVID-19 pandemic (2020-2023), the federal government paused the annual renewal requirement. In Spring 2023, Medi-Cal members were once again required to renew their coverage every year. Nearly two million Medi-Cal members lost coverage in what was known as the "Continuous Coverage Unwinding." The vast majority of those members were still eligible for Medi-Cal but lost coverage due to procedural issues like not receiving their renewal packet in the mail or not submitting the renewal packet on time.

People experiencing homelessness are particularly vulnerable to losing coverage for procedural issues, not because they are no longer eligible for Medi-Cal, but because renewal packets are sent to members' last known mailing address. People experiencing homelessness may not have a mailing address, often move frequently between renewal periods, and they may not even realize they need to renew their coverage.

During the Continuous Coverage Unwinding period, California recognized that the renewal process could negatively impact unhoused individuals and other vulnerable populations.

The State took advantage of federal waivers to simplify the renewal process for people at or below 100% of the federal poverty level (FPL), people with fixed incomes, and people with no income. Over the course of the unwinding process, between 59% and 75% of Californians were automatically renewed through the federal waivers and never had to complete a renewal packet. Many people experiencing homelessness benefited from these waivers and the automatic renewal process.

At the end of 2024, federal guidance was provided to states regarding the end of these waivers. The State opted not to renew many of the waivers that enabled streamlined renewals, and so the Medi-Cal renewal process changed as of June 30, 2025. Homebase has updated our Medi-Cal Renewal Toolkit for people experiencing homelessness to reflect California's policy changes so that providers and members can do everything in their power to ensure people experiencing homelessness can keep their Medi-Cal.

With Homebase's toolkit, YOU CAN HELP keep people insured!

Full Tool List

- About Medi-Cal (California's Medicaid Program)
- <u>Medi-Cal Renewals: Understanding the Process and</u> Its Impacts on People Experiencing Homelessness
- How to Help Your Clients Experiencing Homelessness Keep Their Medi-Cal
- Medi-Cal Renewals Frequently Asked Questions
- How to Submit a Medi-Cal Renewal Online



About Medi-Cal (California's Medicaid Program)

Medi-Cal is California's public health insurance program that covers low-income families and individuals, children, parents, pregnant people, seniors, and people with disabilities.

Medi-Cal is jointly funded by the federal government and the state of California. It is overseen at the federal level by the Centers for Medicare and Medicaid Services (CMS) and at the state level by the Department of Health Care Services (DHCS). Medi-Cal provides health coverage to approximately 14.7 million people in California. In California, most Medi-Cal members receive care through managed care plans (MCPs), which operate in different counties across the state.



Medi-Cal is an Important Safety Net for People Experiencing Homelessness

Many people experiencing homelessness are likely eligible for or already enrolled in Medi-Cal. Research consistently shows that people experiencing homelessness have high rates of chronic mental and physical health conditions; co-occurring disorders; and high mortality rates. Living on the streets or other places not meant for human habitation only worsens these health challenges, which makes access to health care vital.

Medi-Cal coverage became even more important in 2022 when California introduced CalAIM, an initiative that aims to provide comprehensive care to low-income Californians with the most complex health needs. CalAIM¹ includes two programs that are particularly important for people experiencing homelessness:

- Enhanced Care Management (ECM) provides intensive care coordination and services across multiple systems to address clinical and non-clinical needs. It allows recipients to receive care whenever they need it, including in shelters, on the streets, and more.
- Community Supports (CS) are services that address the social needs of Medi-Cal members. While all 14 of the current Community Supports are valuable for individuals with complex health needs, five are explicitly related to housing supports (Housing Transition Navigation Services, Housing Tenancy and Sustaining Services, Housing Deposits, Recuperative Care, and Short-Term Post-Hospitalization Housing). A new housing related Community Support, Transitional Rent, will provide six months of rent to eligible Medi-Cal members no later than January 1, 2026.

People eligible for Medi-Cal must apply to get health coverage. They can apply online, in-person, over the telephone, or through the mail. Once they are enrolled, they are known as Medi-Cal "members." They can apply online at Medi-Cal (and other public benefits like CalFRESH or CalWORKS) or they can apply through Covered California's website.

Medi-Cal's comprehensive health coverage and housingrelated services are incredibly valuable to the health and wellness of people experiencing homelessness.

¹ To learn more about CalAIM, see Homebase's overview materials, <u>CalAIM's Housing-Related Services</u>

Medi-Cal Renewals: Understanding the Process and Its Impacts on People Experiencing Homelessness

The Medi-Cal Renewal Process: An Overview

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

Every Medi-Cal member has a different renewal date based on when they first enrolled or renewed their eligibility, since Medi-Cal requires people to renew every 12 months. Each month in California, over 1 million Medi-Cal members must renew their Medi-Cal eligibility.

There are 4 ways to renew Medi-Cal:



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



On a telephone call with the county Medi-Cal office.



Online at BenefitsCal.com



Mail in a completed renewal form.

Not all individuals will need to complete a renewal form.

C Ex parte renewals

For some people, renewals can occur through a process known as "ex parte renewal." California is required to try to renew a Medi-Cal member's coverage based on information California already has about a household (including through electronic data sources).

A successful ex parte renewal is less burdensome on Medi-Cal members. They don't have to produce any paperwork to show they are still eligible. Individuals who renew through the ex parte process are able to do so because Medi-Cal already had enough information to renew them without requiring an updated renewal form. If they are renewed through the ex parte process, they will get a letter in the mail telling them that their Medi-Cal will continue for another year.

From 2023 through June 2025, the ex parte process for many people experiencing homelessness was based on self-reported income information that the member shared in their Medi-Cal application or previous renewal. If a Medi-Cal member said they made less than 100% of

the federal poverty level, had a fixed income, or no income they were automatically renewed for another year, so long as there was no data contradicting that information.

As of June 30, 2025, Medi-Cal members who say they make less than 100% of the federal poverty level, have a fixed income, or no income will follow the same process as all other members. Medi-Cal will still try to verify the member's documented information through an ex parte process. If the accessible information indicates that nothing has changed about the member's situation and they are still eligible, Medi-Cal will automatically be renewed, and the individual will not need to complete a renewal packet. They will get a letter telling them that they have Medi-Cal for another year.

Manual renewal process

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 documents that serve as proof of facts about themselves and/or members of their household (such as pay stubs to prove income). They usually have to update their income and household size to be sure they are still eligible for Medi-Cal.

Most people who must complete a manual renewal process will receive a yellow envelope with a renewal packet in the mail. The State sends the renewal packet about 60-90 days before the member's renewal due date. The packet contains papers that are pre-populated with information the County has about the Medi-Cal member based on when they first applied for Medi-Cal or last renewed their eligibility.

Members need to review the pre-populated information, correct wrong information – especially changes to their income, contact information, or the number of people in their household – and update the paperwork with any new information. The County will need proof of any change in the person's household income. Members will need to gather any paperwork that can document those changes, such as paystubs or tax filing paperwork, and submit the paperwork along with the renewal form. If they do not have any changes in income or household size, renewing can be quite simple. Even if nothing has changed, they may still need to provide proof of income if they have any.

They can do this process online at <u>BenefitsCal.com</u>, over the phone, in person at their local Medi-Cal office, or

Medi-Cal Renewals: Understanding the Process and Its Impacts on People Experiencing Homelessness

they can send the updated paperwork in the mail. People have approximately two months to gather and return the requested information. They should be sure to return the information by the deadline in the County request. If they do not submit the renewal, they could lose their Medi-Cal coverage.

Change of Circumstances: Extension of Renewal Period

While Medi-Cal members are redetermined for eligibility on an annual basis, when a change in circumstance occurs in a member's life, it may necessitate a redetermination of eligibility, known as a "change in circumstance redetermination." In some cases, a change of circumstance may extend the renewal period for a Medi-Cal member.

Medi-Cal allows people who are considered "hard-to-reach" to tell their local county Medi-Cal office about a change in their circumstances, which can extend their renewal date for an additional twelve months regardless of their original renewal date.

Hard-to-reach populations are Medi-Cal members facing barriers that make it "difficult for the member to make contact with the County, or the County is unable to successfully or reliably make contact with the Medi-Cal member or household." This includes people experiencing homelessness.²

Counties can grant a 12-month renewal extension under a change in circumstance when contact is made with an individual who shares information regarding their unhoused status. They can make contact with the County in a variety of ways, such as reporting a change of address or income or applying for another assistance program. In these instances, counties may use the available information to get the individual's Medi-Cal renewal extended for 12 months.

Some people could lose their health coverage during the renewal process. Some may lose Medi-Cal because they now make too much money to qualify. Some 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 the forms were sent to the

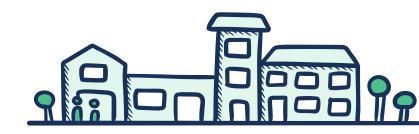
wrong address, the forms were confusing and they did not understand what they needed to do with the forms, and more. However, members who lose coverage due to procedural reasons have 90 days from the date they lose coverage to provide necessary information without having to reapply for coverage (see more details on page 7).

Unique Challenges of Medi-Cal Renewals for People Experiencing Homelessness

People experiencing homelessness are particularly vulnerable to losing coverage because of barriers unique to their situations, such as the following:

- Renewal notices and packets are sent to last known addresses where people may no longer live. But 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, 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.
- The renewal process is complex, burdensome, and challenging for any one, and it can be especially difficult for people who face 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.



² DHCS Medi-Cal Eligibility Division Information Letter (MEDIL) I 25-13

How to Help Your Clients Experiencing Homelessness Keep Their Medi-Cal

Providers working with people experiencing homelessness can play a vital role in helping them prepare for and navigate the Medi-Cal renewal process. Below are key steps and actions to take.

Preparing for Renewals

Below are key steps providers can take to help their clients prepare for this process

- 1. Help your client update their contact information. California recommends that all Medi-Cal members share their most up-to-date contact information with their local county Medi-Cal office right away, even if it is not during their annual renewal period. Sharing updated contact information will ensure they receive important information about their renewal date, as well as the renewal packet in the mail or online (if they have an online account). 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.
- 2. Share a member's homeless status with the local county Medi-Cal office. Members who have experienced a change in circumstances since they applied for Medi-Cal or were renewed - including members who became homeless or have experienced a decrease in income - should contact their local county Medi-Cal office as soon as possible. If they share that they are currently experiencing any change of circumstance in their housing situation - including homelessness, living doubled up, or couch surfing - they may be able to extend their renewal period by an additional 12 months. Do not assume that the local county Medi-Cal office knows your client is experiencing homelessness. Confirm that the County is aware that the member falls under a "hard-to-reach" population and may be eligible to extend their renewal period 12 additional months.

- 3. Find out if your client is on Medi-Cal and what their renewal due-date is so you can help them prepare for the process. Providers can find out clients' Medi-Cal information by: looking in HMIS to see if a copy of their Medi-Cal card is uploaded in their files; asking the client if they have a Medi-Cal card; asking the client if they have a managed care plan (MCP) in case they know the MCP provider name but don't know their Medi-Cal status; and/or calling their county Medi-Cal office. The goal is to find out the name of the MCP, the client's Medi-Cal number, and ideally their renewal date.
- 4. Identify mailing options for clients: Medi-Cal members can navigate the renewal process by calling the County or using the online benefits portal (BenefitsCal.com), but the State's main approach for sending Medi-Cal renewal notices and packets relies on regular mail. Does your facility accept mail for clients? Do you have partnerships with other providers who can provide that service for the community? Even if your client won't live permanently at their current unit, they should provide the County with a current address where they will be able to get their mail.
- 5. Prepare your clients to access their personal documents: In the renewal process, your clients may need to share personal identification and documents with the County. You can help your clients make a plan to access and gather their documents. Check your systems to see if you have access to any of these documents. For example, do you have documentation of their current income?

How to Help Your Clients Experiencing Homelessness Keep Their Medi-Cal

Helping Clients Renew their Medi-Cal

If an individual is not automatically renewed, you can assist your clients with the renewal process. The California Department of Health Care Services has helpful resources to guide you and your client through the renewal process, especially if your client received a renewal packet in the mail. See KeepMediCalCoverage.org.

Anyone can become an <u>authorized representative</u> to assist clients with Medi-Cal coverage. The client has to sign paperwork that tells Medi-Cal that they give permission for another individual to speak on their behalf about their Medi-Cal coverage, application, renewal, and more.

There are 4 ways to renew Medi-Cal:



Online at BenefitsCal.com. The fastest and easiest way to renew is online. You can help your client log in or create a new account online. See "<u>How to Submit a Medi-Cal Renewal Online</u>".



In-person at the client's county Medi-Cal office. You can help clients complete their renewal in-person at the local <u>county Medi-Cal office</u>. There might be a long wait time. If you go in person and provide evidence of homelessness, the office may be able to renew coverage for your client in real-time.



On a telephone call with the county Medi-Cal office. You can call the county Medi-Cal office together with your client or through a three-way call with the county Medi-Cal office. The Medi-Cal member must be with you or on the telephone when you make the call - the county Medi-Cal office will not speak with you about your client's Medi-Cal without the member present, unless the client has made you their authorized representative. There might be a long wait time.



Mail in a completed renewal form. Follow the directions on the client's renewal forms if they received them; if they did not receive renewal forms in the mail and cannot or do not want to complete the process online, you can help them request a new set of renewal paperwork.

To renew, the County will need proof of any change in the person's household income.

NOTE: If someone did not receive a renewal notice in the mail AND did not receive a renewal packet (or they lost or misplaced it), they still will have to complete one. You can call the county Medi-Cal office to complete the renewal over the phone, either as an authorized representative for an individual, or in a three-way call with the County and the member on the phone. A member can also complete the renewal on BenefitsCal.com. If they do not submit a renewal form, they could lose their Medi-Cal coverage.

How to Support Your Client if They are Having Issues with their Medi-Cal Renewal or Lose Coverage

Your client's Medi-Cal coverage may end if they do not turn in the renewal form when required or are missing information that the County requests. Their county Medi-Cal office will mail them a letter (Notice of Action) to let them know if their eligibility has been renewed, or if they will lose coverage because they didn't turn in their renewal form or are missing information. Medi-Cal members who lose their coverage can have their coverage reinstated up to 90 days after they were terminated, if they provide any missing information to the County. If you are within what's known as "the 90-day cure period," the County can turn Medi-Cal back on without requiring a new Medi-Cal application.

If it is more than 90 days after the date on the Notice of Action letter, they must turn in a new Medi-Cal application.

If your client has their Medi-Cal wrongfully terminated

If your client has a complaint about how their benefits were handled, has trouble interacting with their county, or has their Medi-Cal wrongfully terminated, there are steps they can take to address the problem.

Contact the client's **county Medi-Cal office** to review their case. If they think their Medi-Cal ended in error, they can ask for a Medi-Cal Fair Hearing. Clients must file for a fair hearing within 90 days of receiving the Notice of Action that indicates a termination of coverage. If they did not receive a denial letter because they do not have a home address but learned their coverage was terminated when they interacted with the health care system, they should still ask for a Medi-Cal Fair Hearing.

Contact the Health Consumer Alliance for a free, confidential consultation at 888-804-3536. The Health Consumer Alliance helps California individuals and families get the health care services they need. They provide free legal services to all consumers, in all languages, regardless of income level.

Help Clients Reapply for Health Care

If your client loses Medi-Cal coverage – because they do not submit their renewal packet or required information on time or are over the income limits - it will be important to help them access health coverage again.

Re-Apply for Medi-Cal

If your client loses Medi-Cal and more than 90 days have passed since it ended, a new Medi-Cal application is required. The application for Medi-Cal requires much more effort than renewing on time or within the 90-day cure period. If they have to re-apply, you can help them.

Clients can reapply by mail, in person, by telephone, or online.

- Go to BenefitsCal.com or contact their local county Medi-Cal office to learn where to update their information and complete a new application.
- Contact a benefits access or social services organization to help your clients through the application process. Applying for Medi-Cal is more involved than the renewal process.
- Help your clients access the key documents they may need in the application process, such as a photo ID, proof of current income, etc. Please note that Medi-Cal will attempt to verify all information electronically before requiring physical documents.

Access Affordable Health Care through Covered California

There may be some clients who are no longer incomeeligible for Medi-Cal; they can find affordable options through Covered California. For members who lose coverage, Medi-Cal will automatically send their case to Covered California. Covered California will enroll them into a low-cost health plan. People must confirm their plan enrollment and pay any premium (if they have one) to continue the process on Covered California.

To learn more, see Western Center on Law and Poverty and the National Health Law Program's overview of the rules about transitions to Covered California. Covered California also has guidance on the topic.

Medi-Cal Renewal Frequently Asked Questions

How do I know when a renewal is due?

Medi-Cal members renew their Medi-Cal once per year. Everyone has a different renewal date – it is one year from when they first applied for Medi-Cal or the last time they were redetermined for eligibility. They should get a letter in the mail that tells them when their renewal is due, or they should get a letter from Medi-Cal telling them they were automatically renewed. If they did not receive either letter, they can find out their renewal date by logging in or creating an online account on BenefitsCal.com or by contacting their local county Medi-Cal office.

My clients don't have homes to get their renewals by mail. Does that mean they will lose their Medi-Cal?

Medi-Cal members do not need to have a home address. But it is harder to renew coverage when they don't have a place to get mail. Providers can help:

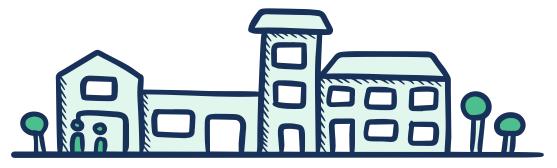
- While you are with your client, you can call the local <u>county Medi-Cal office</u> and ask them when the client's Medi-Cal is up for renewal. During the call, be sure to tell them that your client is experiencing homelessness and ask to renew coverage immediately.
- You can offer clients a place to receive their mail so they can receive their renewal forms and notices.
 Make sure you have them update their address with their county Medi-Cal office.
- You can help your clients create online accounts.
 Members can visit <u>BenefitsCal.com</u> or contact their county Medi-Cal office to complete their renewal information.
- Clients can check online to see when their Medi-Cal is up for renewal. Updates made in BenefitsCal are reflected in near real time; depending on the type of information submitted, it may take an hour or two to appear in their account. If not, changes are typically visible by the following day.

How do I know if my clients need to complete Medi-Cal renewal forms?

- Not all Medi-Cal members need to complete a renewal form. While you are with your client, contact the local <u>county Medi-Cal office</u> and have them review the information they have about your client. You can ask them to see if your client can get an ex parte renewal or is eligible for an extended renewal through the change of circumstances because they are from a hard-to-reach population, if that has not already happened. Make sure they know that your client does not have their own regular mail address. You can tell them to send the notice to your office mailing address.
- If clients get a renewal form, they will need to complete it or return the information by telephone or online by the due date.

What information do my clients need to give to their local Medi-Cal office?

- Some clients will need to provide more information to the County. The local <u>county Medi-Cal office</u> will ask for what they need. The renewal form/paperwork will include a list of information that the County needs the client to report.
- They only ask for information and documents that affect Medi-Cal eligibility. The County will need to know about things that have happened since your client last renewed their Medi-Cal.
- Clients may need to give proof of any changes. The renewal form lists examples such as pay stubs and tax returns.
- Many clients do not need to tell Medi-Cal about assets like bank accounts, property, or vehicles.



How did Medi-Cal get the information that is pre-populated on my client's renewal form?

- The renewal form has all the information Medi-Cal knows about your client, to make it easier for your client to complete the application.
- They got most of the information from your client's previous applications, reported changes, and renewals.
- Some of the information may have come from other sources Medi-Cal has access to like Social Security or the Employment Development Department.
- If some of the information is not accurate, your client should change it.

My client did not turn in their renewal form or information. They got a notice that their Medi-Cal is ending, found out their Medi-Cal is ending when they checked online, or found out that their coverage ended when they interacted with their health care provider. What can I do?

- If it is less than 90 days after their Medi-Cal ended, they can still complete their renewal. Help them turn in their renewal form or missing information. The local <u>county Medi-Cal office</u> will see if they can still get Medi-Cal. They do not have to submit a new application.
- Tell the local county Medi-Cal office that the client is currently experiencing homelessness. They may be able to renew more simply.
- If it is more than 90 days after Medi-Cal ended, they will have to turn in a new Medi-Cal application.
 You can help them apply online and collect the documents they need to reapply.

Where can my clients get legal assistance if they are having problems with their renewals?

Contact the Health Consumer Alliance for a free, confidential consultation at 888-804-3536. The Health Consumer Alliance helps California individuals and families get the health care services they need. They provide free legal services to all consumers, in all languages, regardless of income level

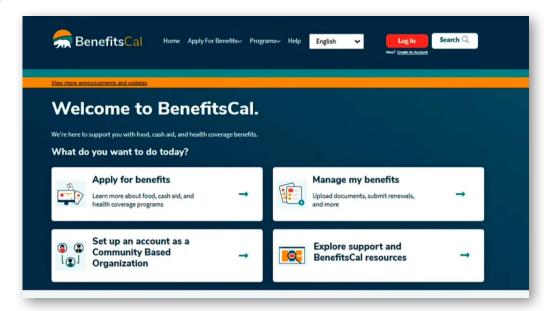


Anyone can apply for or renew their Medi-Cal benefits online. Members can visit KeepMediCalCoverage.org or contact their local county Medi-Cal office to learn where to go online to update their information or complete their renewal information. The below information is for BenefitsCal.com, where most people in California can apply for or renew their Medi-Cal.

1

Create an account on BenefitsCal.com

(Skip Step 1 if you already have an online account)

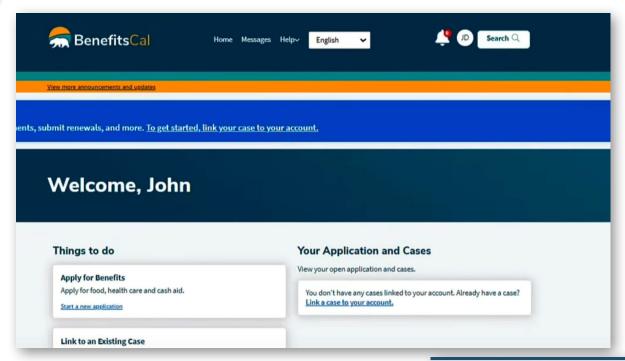


You will have to enter information:

- Choose the county where you live or the county where you last applied for Medi-Cal.
 If you live in a shelter, in your car, or on the streets, choose the county where you are staying. You can also contact the county where you used to live when you had a home.
- Type in your first and last name.
- **Email** is required. If you do not have an email, you will need to find someone who can receive email for you. Email is the way the <u>County Medi-Cal office</u> can contact you about your Medi-Cal.
- **Create a Password**. You will need to create a password. Passwords can be difficult to remember. You should write down your password and keep it somewhere safe.
- Type in your mobile telephone number. Telephone is the way to get a password reset. Be sure you have your phone with you when you use your online account. The system will text you to be sure you are you. If you don't have a telephone, you should be able to skip this question.

You will have to set up security questions. Once you are done, you will be invited to login.

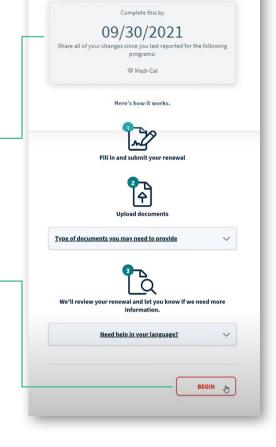
- Sign into your account on BenefitsCal.com
- Go to "Things to Do"



Under "Things to Do" click on "Start Your Renewal."

> The next screen tells you about the renewal process. At the top is the date when your renewal forms have to be filled out.

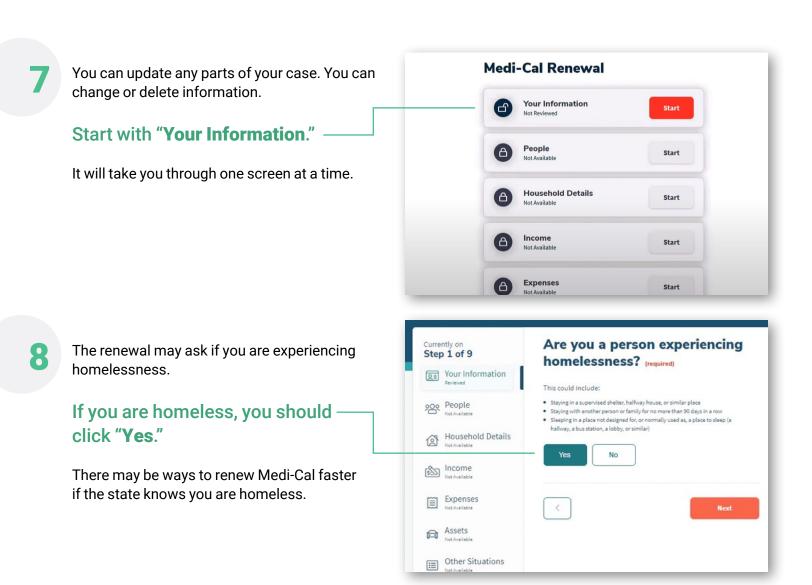
Select "Begin" at the bottom of the screen.



Let's keep those benefits going!

Currently on We are pulling your current case Step 1 of 8 details. The next page shows all the information you will Your Information need to renew Medi-Cal. Your Information People Not Availab Click "Next" on each page to update or **Household Details** Household Details change any of your information. Income Sincome Not Available Income Expenses Expenses Other Situations Let's review your current case details and edit what's changed. Document Upload Next

Review and Submit



Go through each step to update your information.

There will be a chance at the end of each section to press "This Looks Correct."

After going through all the questions, you will see a new screen. It lists other programs and help you can apply for.

You can click on any of the programs to see if you can get more help.

Next is the document upload section.

If your income has changed, this is the time to upload proof of your income. You do not have to upload documents to submit a renewal. You will need to submit documents at some point if the County requests them.

The system will tell you the documents you need to upload; if you need help finding or uploading documents, you can ask someone you have worked with (like an outreach worker, a case worker, or navigator) to help you.

If you are not ready to share documents, skip the upload documents, by pressing "Next."



12

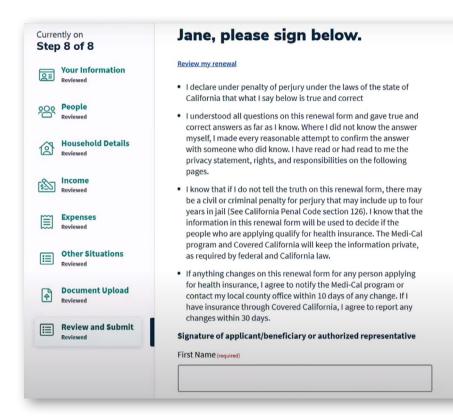
Now you can review your renewal and "sign" it online.

You will enter your first name and last name. Then the date. You will need to click the box that says you agree to use this as your electronic signature.

Then press "Submit Renewal."

13

If possible, take a picture or download the renewal summary after submitting the renewal.



14

Watch your email and regular mail for any requests from the County.

They may contact you to ask for documents to prove your income or more information that they need to complete your renewal. Check your online account once a week so you don't miss any questions they might have for you.



There is a Youtube video that walks through the renewal process at BenefitsCal.com: How to Submit a Medi-Cal Renewal