

2023 ITUP Regional Workgroups



Transitioning Beyond Continuous Coverage: Local Insights and Additional Opportunities to Support Medi-Cal Redetermination

See ITUP's [2023 Regional Health Coverage Fact Sheets](#) to learn more about who is covered across all health insurance types, the uninsured population in each region, and local data on social drivers of health.



Redetermination is an annual process where the state determines if current Medi-Cal members are still eligible for Medi-Cal coverage. Currently, the state is in the process of redetermining eligibility for over [15 million Medi-Cal members](#).

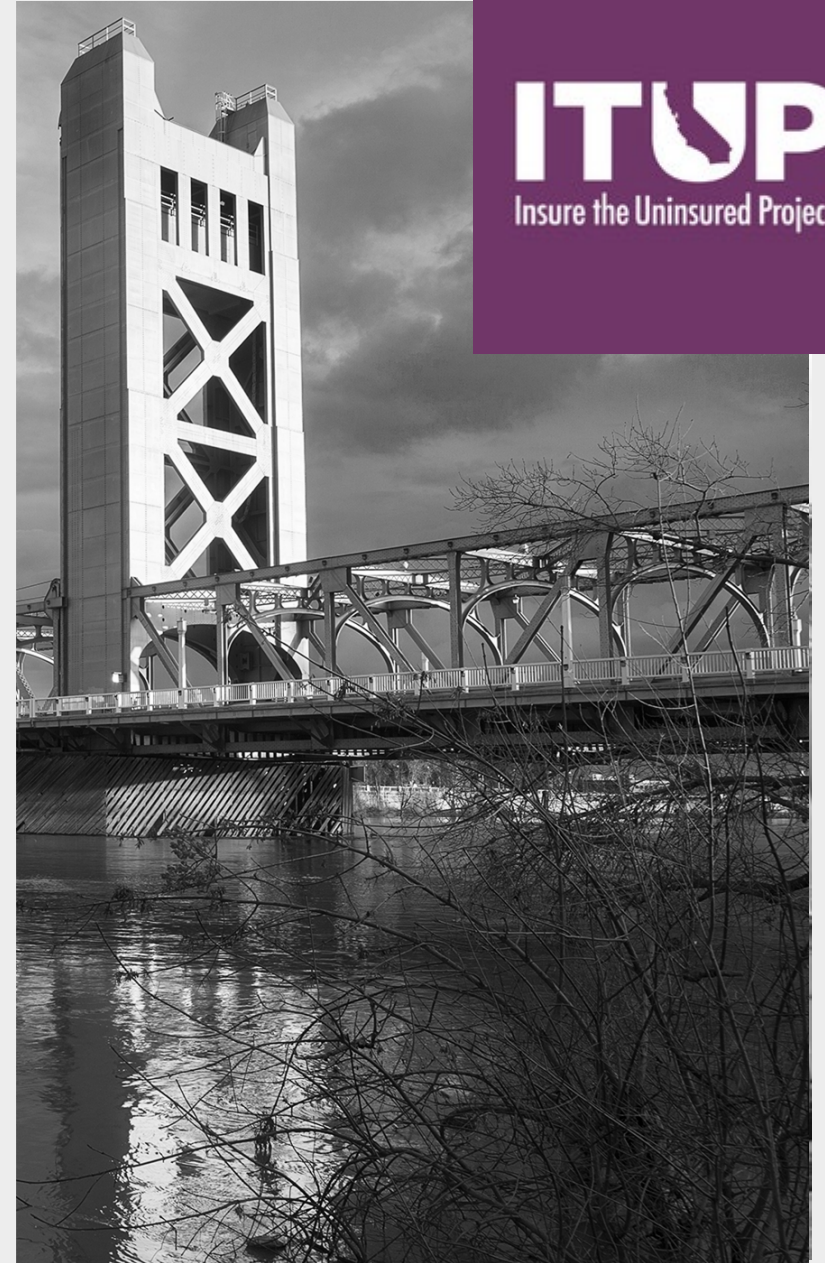


10 Regional Workgroups/Listening Sessions: ITUP convened 10 listening sessions across the state to learn about redetermination with the partners carrying out this work, including but not limited to:

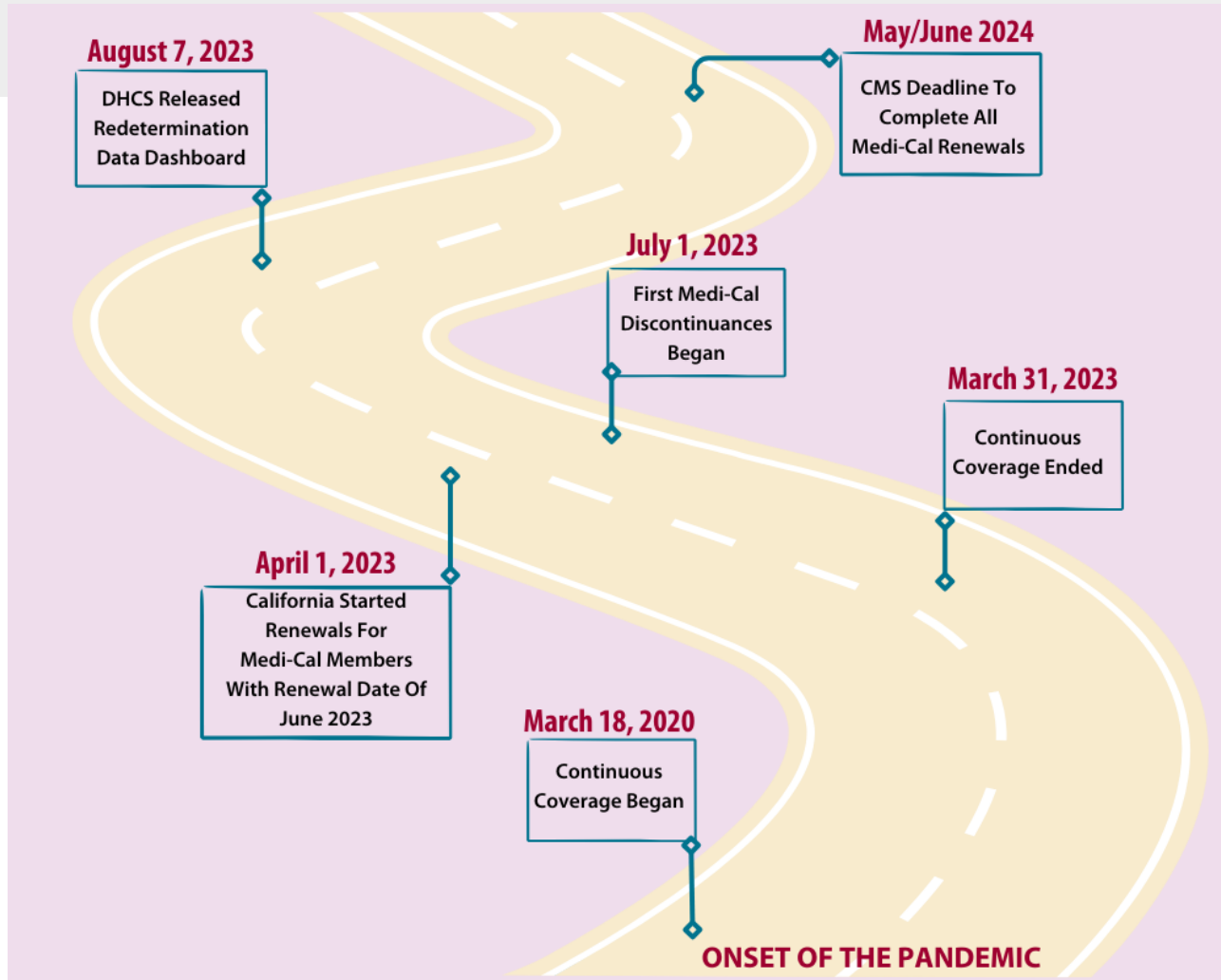
- Medi-Cal Managed Care Plans (MCPs)
- Hospitals and Health Clinics
- County Officials
- Community-Based Organizations (CBOs)
- Nonprofit Organizations

Conversations Focused on Redetermination: These listening sessions focused on experiences attendees had conducting redetermination to ensure as many Californians as possible maintain their coverage.

Unwinding the Public Health Emergency: The End to Continuous Medi-Cal Coverage



Redetermination Roadmap



- The federal [Families First Coronavirus Act](#) provided a **Continuous Coverage** flexibility for state Medicaid programs which began on March 18, 2020.
- The **Continuous Coverage** flexibility meant that for three years, the state would *not disenroll any Medi-Cal member* unless a member voluntarily decided to terminate their Medi-Cal coverage.
- California has [14 months](#) from the end of continuous coverage to complete all renewal applications.

Redetermination Process

Renew Your Medi-Cal Coverage By:



Contacting Medi-Cal Services at
(800)-541-5555



Mailing Your Redetermination Packet to
Your Local County Social Services Office
at [Bit.ly/DHCS-County](https://bit.ly/DHCS-County)



Visiting Someone at Your Local County
Social Services Office at [Bit.ly/DHCS-County](https://bit.ly/DHCS-County)



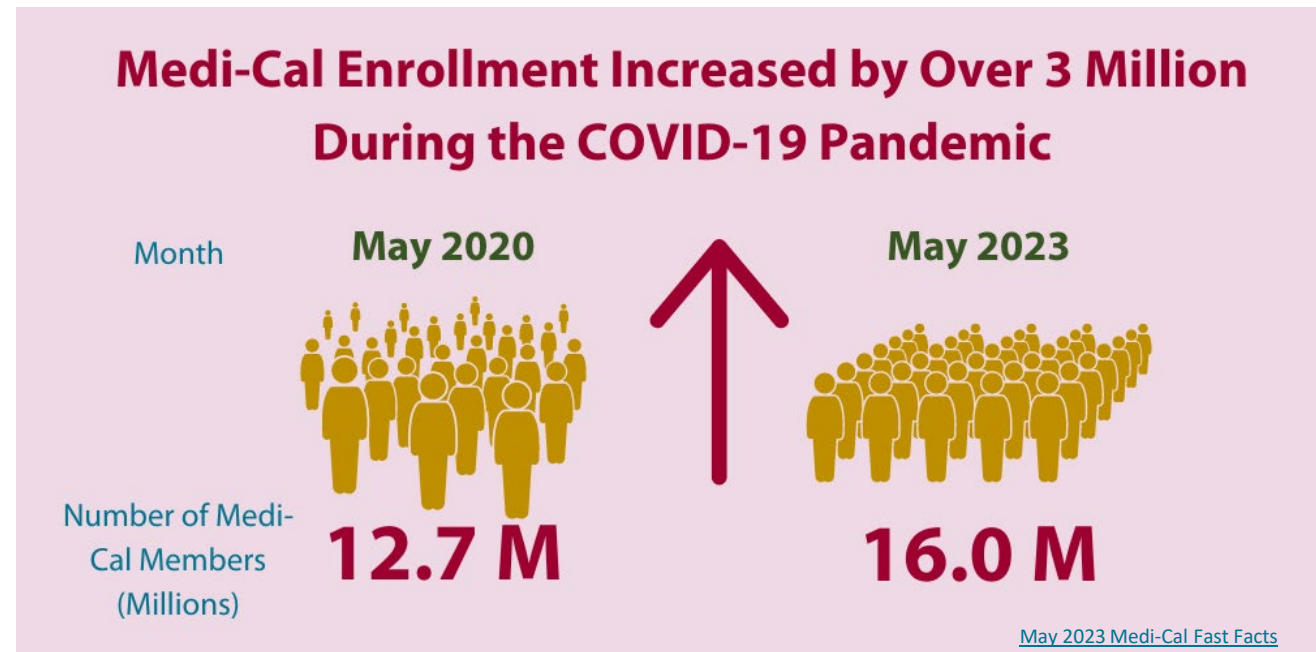
Submitting Your Information and
Completing Your Renewal On
[BenefitsCal.com](https://www.benefitscal.com)

- **Medi-Cal redetermination packets** were sent to all members **60-75 days** before their annual renewal date.
- Medi-Cal members have **90 days** after their termination date to submit required information to county. This is known as the **90-day cure period**. To learn more, check out [DHCS's 90 Day Updates](#).
- If Medi-Cal members submit the required information during the 90-day cure period and the county determines they are eligible for coverage, **the county must grant coverage retroactively to the date of discontinuance to prevent a lapse in coverage for the Medi-Cal member.**
- After 90 days, the Medi-Cal member must reapply for coverage.

Continuous Coverage Was an Effective Policy to Keep More People Covered

Continuous coverage flexibilities during the pandemic gave communities uninterrupted access to health care coverage during a health care crisis that impacted the health, wellbeing, and financial stability of many.

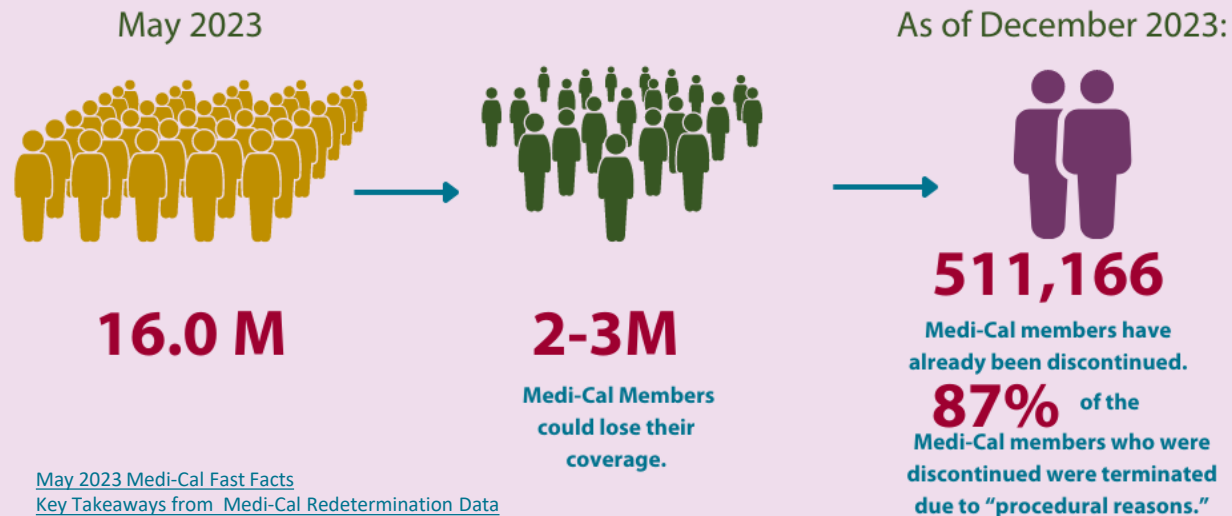
- Medi-Cal enrollment increased by nearly **26%** from May 2020 to [May 2023](#).
- Throughout the annual redetermination process, up to [2-3 million Californians](#) are at risk of losing coverage.



What's at Stake?

Marginalized communities, especially communities of color and people with disabilities, were hit the hardest by the COVID-19 pandemic, will take the longest to recover, and are most at risk of losing coverage.

Medi-Cal Members Are Losing Their Coverage

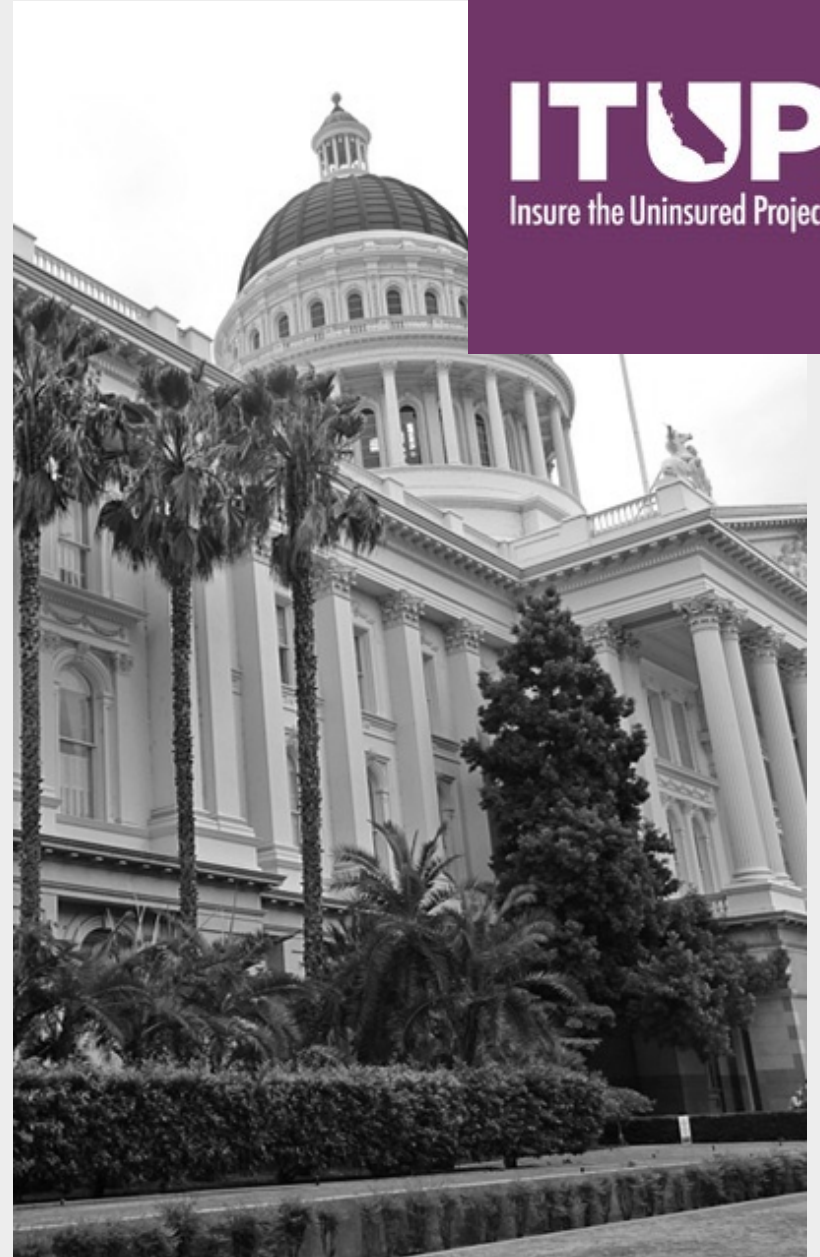


Reasons for Discontinuation

- Lack of updated contact information to reach existing Medi-Cal member,
- Counties unable to find submitted paperwork on the state's online portal,
- Incorrect information on redetermination forms,
- Language barriers resulting in unreturned redetermination packet, and/or,
- Difficulties using a computer and/or reading and writing.

Keeping Californians Covered Through Redetermination: Insights from California's Local Health Ecosystems

The rest of this report reflects the community insights gained from [ITUP's 2023 10-regional workgroups](#).



Across California Counties, Many are Finding it Difficult to Contact Medi-Cal Members

1. Redetermination Packets Go Undelivered.

- Although participants reported taking an all hands-on-deck approach in communicating to all Medi-Cal members the need to update their contact information and health plans periodically report address changes to the county, many redetermination packets still go undelivered.

2. Reminder Notices Sent Back.

- Local health care providers and community health organizations report that although they send out notices in advance of a Medi-Cal member's redetermination date to prepare them for the redetermination process, many notices are sent back because counties do not have updated addresses for Medi-Cal members.

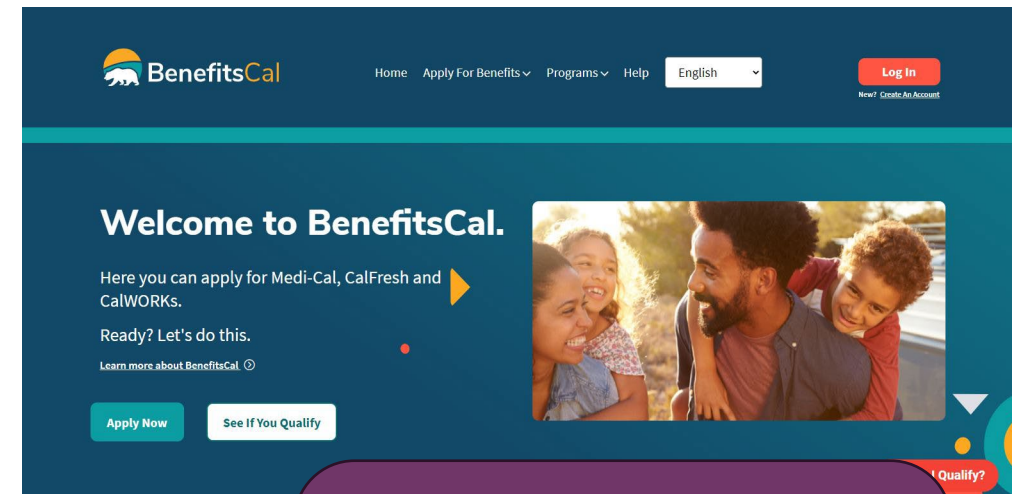
3. Confusion About How To Update Addresses.

- Although federal flexibilities allow counties to [partner](#) with USPS to receive Medi-Cal members' updated contact information, Central Coast participants, report they were not receiving the updated addresses that Medi-Cal members provide to the post office.

The State's Renewal Website, BenefitsCal, Presents Advantages to Keeping Medi-Cal Members Enrolled

1. Participants found success in leveraging eligibility and enrollment in social program benefits to keep Medi-Cal members enrolled.
2. Renewing benefits such as CalFresh and/or CalWORKs automatically renews Medi-Cal for another year, helping to keep people covered.

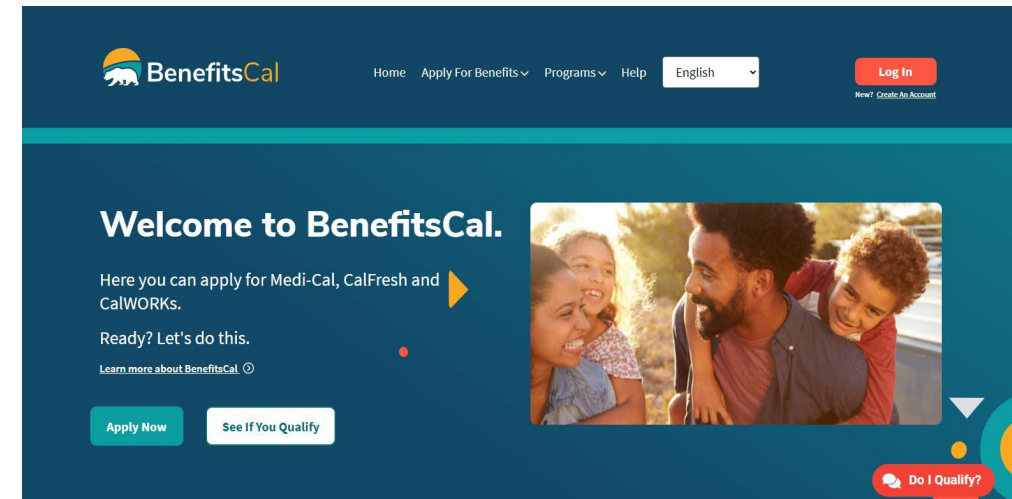
*For more information about federal flexibilities allowing counties to partner with USPS to update Medi-Cal members' contact information, check out [APL I 23-09](#)



To learn more about federal flexibilities, check out ITUP's [Federal Waivers: Streamlining Redetermination Procedures](#)

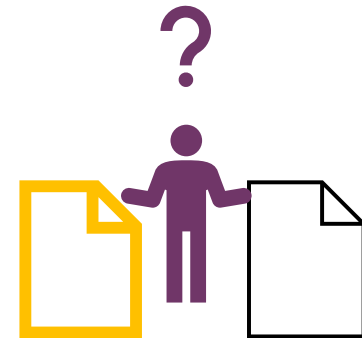
The State's Renewal Website, BenefitsCal, Presents Disadvantages to Keeping Medi-Cal Members Enrolled

1. Although participants reported success in directing Medi-Cal members to benefitscal.com, community health organizations, public health organizations, and counties also report there are barriers to Medi-Cal members submitting their renewal packets online.
 - In Los Angeles County, participants report that online packets are often being marked as 'not submitted' by the county because of procedural errors.
2. Many Medi-Cal members endure long wait times calling the county to discuss their renewal resulting in longer verification.
 - Many Medi-Cal members do not have the time to wait on the phone for hours to resolve this issue and these technical difficulties could result in termination even if members submitted their redetermination packets.

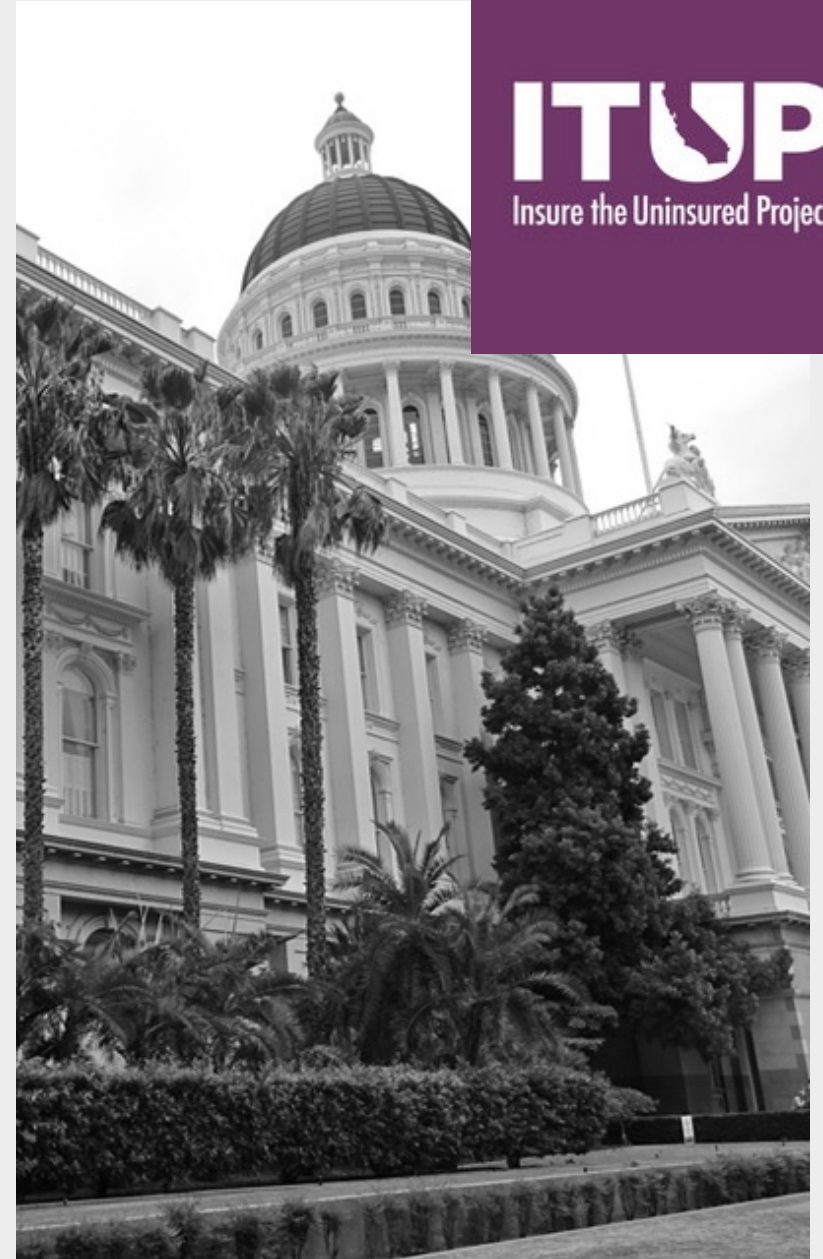


Differing Envelope Colors and Transition to a New Computer System Makes Redetermination Harder to Process

- 1. Participants reported that the state ran out of yellow envelopes for the redetermination packets and started sending out white envelopes.**
 - Unclear messaging about the visual presentation of the redetermination packets creates confusion for Medi-Cal members as the state maintained a consistent message that Medi-Cal members would receive a yellow redetermination packet.
 - For clarification purposes, participants demonstrated the need for the state to update their messaging to inform members that their redetermination packets could either be yellow or white (or other colors if that becomes applicable).
- 2. County officials reported that the state transitioned to a new computer system and that transition created difficulties in locating redetermination paperwork that members upload to the patient portals.**
 - In the Bay Area, county officials are recommending that Medi-Cal members send their paperwork in paper form instead of through the online process. This strategy helps Bay Area county officials avoid the difficulty of individually locating someone's redetermination paperwork that did not come through online even if a Medi-Cal member submitted it.



What Strategies Have Been
Helpful for Local Partners?



Workgroup Attendees Report Taking an All-Hands-On Deck Approach

- 1. Workgroup attendees report training all their staff so anyone can direct Medi-Cal member on what to do.**
 - Participants train not just patient support staff, but also front desk attendants and those in the billing department.
 - Training all staff ensures that Medi-Cal members get the enrollment assistance they need at that moment without being transferred to different staff members.
- 2. Even if members do not have to fill out a redetermination packet due to ex-parte, community health centers still send them notices to keep them informed.**
 - Letting members know that they do not have to take any further action to keep their coverage is important because this action provides relief to those members who will automatically maintain coverage for another year.

To learn more about ex-parte, check out ITUP's [Federal Waivers: Streamlining Redetermination Procedures](#)

Identified Strategies to Combat the Lack of Updated Addresses for Medi-Cal Members

- 1. Medi-Cal health plans are now reminding their members to update their contact information.**
 - Historically, once a member has been terminated from a health plan, a health plan would never reach out to them again unless they are reenrolled.
- 2. Due to a [temporary federal waiver](#), Medi-Cal health plans report they periodically send social services updated information about addresses and contact information changes as they receive them.**
 - Before the temporary waiver, for verification purposes, members had to have a three-way call with health plans and social services to update their contact information creating administrative burden for everyone.
 - This waiver has been incredibly helpful in updating contact information as it allows counties to reach members and inform them about the redetermination process so they can maintain their coverage.
- 3. Bay Area community health centers send bright purple renewal reminder notices to Medi-Cal members 60-days ahead of their renewal date so that Medi-Cal members know what they must do to keep their coverage.**
 - With bright colors, Medi-Cal members are more likely to stop and take notice of the renewal reminder and not throw it away.

To learn more about federal flexibilities, check out ITUP's [Federal Waivers: Streamlining Redetermination Procedures](#)

In-Person Events Effective for Outreach and Engagement

- 1. In-person events provided a great opportunity for Medi-Cal members to bring their redetermination packets in and ask questions.**
 - To help support Medi-Cal members, community health organizations make efforts to implement in-person outreach and engagement at community events, schools, and health fairs, etc.
 - A health care clinic in Orange County hosted an event which had a turnout of over 4,000 people.
- 2. In-person events were effective for outreach and engagement especially for Medi-Cal members who cannot read.**
 - Not all Medi-Cal members can read and not all members are digitally literate, which means that benefitscal.com and solely sending them the redetermination packet will not help those members maintain their coverage.



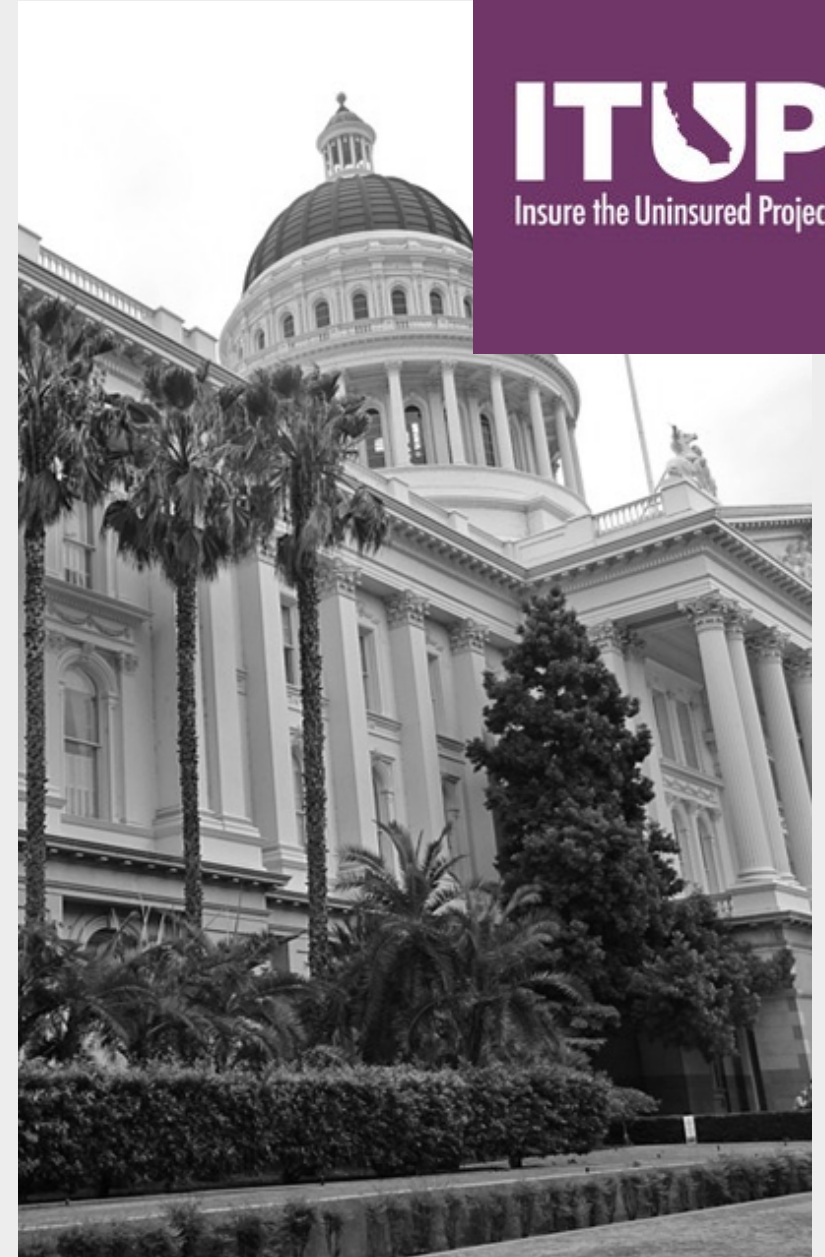
* Although in-person events are effective for outreach and enrollment, it is important to implement public health measures and provide virtual options for the immunocompromised.

Additional Community Insights

- 1. Orange County participants reported fraudulent practices happening in the community where scammers are calling Medi-Cal members and trying to charge them money to renew their redetermination.**
- 2. Participants reported a lack of clarity as to what to do in this situation or who to communicate with when fraudulent practices like this happen.**
 - DHCS has a forum to [report Medi-Cal fraud](#), and explicitly says on their FAQs [page](#) to call the Medi-Cal fraud hotline to report scams like this, but the Medi-Cal fraud page describing the definitions of Medi-Cal fraud do not include this type of scam in the [‘Beneficiary/Recipient Section’](#).
 - Raising awareness about the [Medi-Cal fraud hotline](#) to combat this misinformation would be helpful.
- 3. Participants reported challenges handling both implementing redetermination and implementing the 2024 Medi-Cal expansion, regardless of immigration status.**
 - People newly eligible for Medi-Cal in 2024 may not know they will have to renew their coverage annually to keep their coverage.

Policy Considerations I

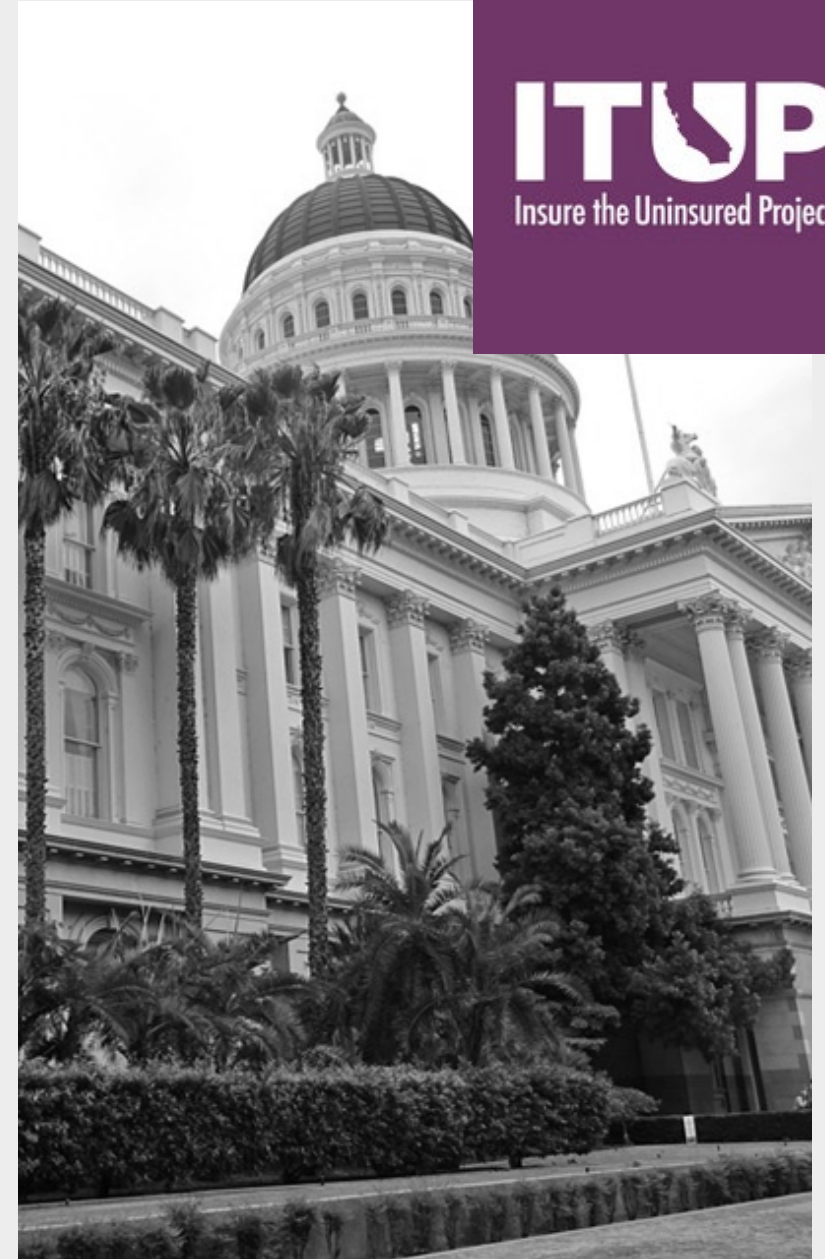
1. Should any one of the federal flexibilities provided during the pandemic be made permanent? If so, which ones?
2. What additional policies can the state implement to reduce or even eliminate administrative burden for vulnerable communities?
3. Can the state make messaging regarding the color of redetermination packets more consistent to reduce confusion for Medi-Cal members and improve outreach/enrollment?
4. What strategies can the state implement to inform Californians while also fostering human connection during both in-person and virtual events?



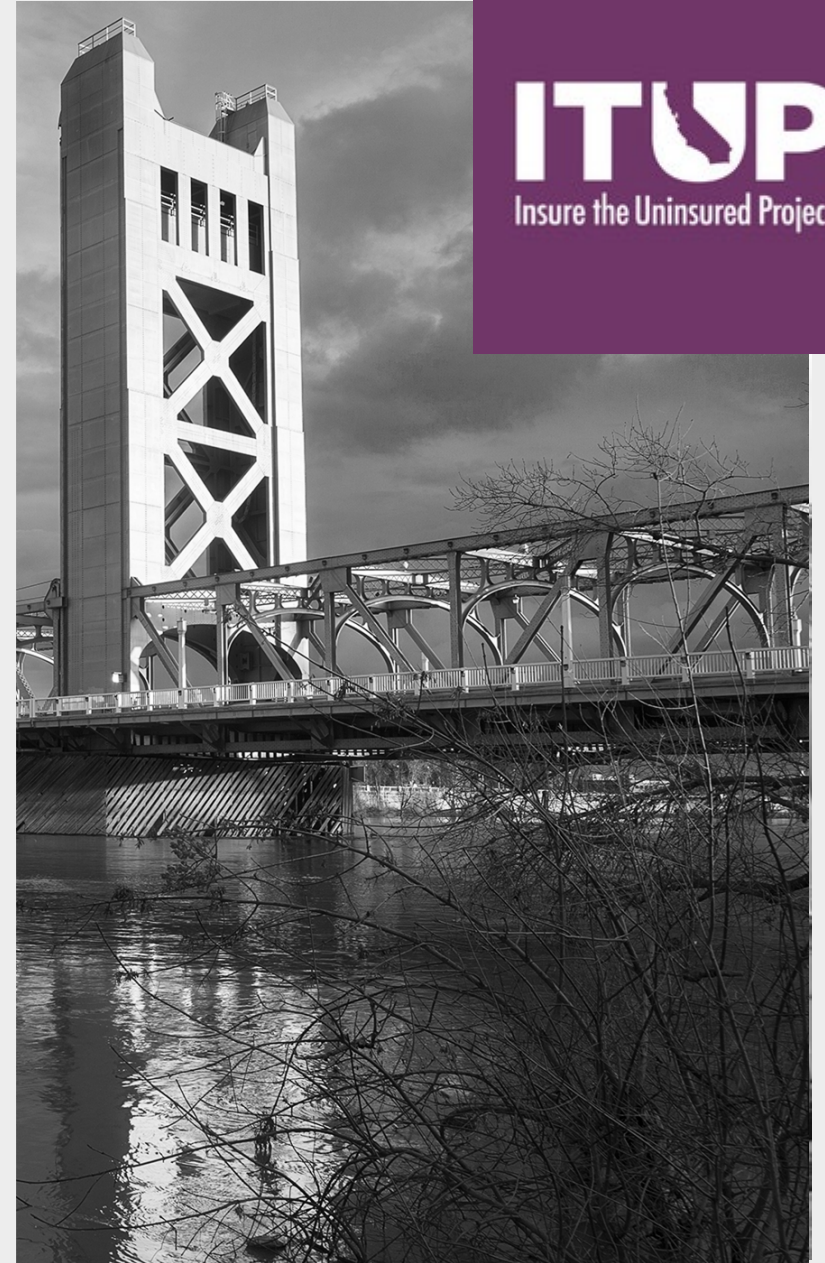
ITUP
Insure the Uninsured Project

Policy Considerations II

5. What outreach and engagement would be helpful to clarify exact steps counties and Medi-Cal members must take to effectively update contact information?
6. How can the state improve the functionality of BenefitsCal so that counties do not have to individually look for paperwork that Medi-Cal members did in fact submit on time? Can the state put members' cases on hold allowing them to maintain their coverage while also giving the county more time to determine their eligibility?



Resources and Sources



Keep Your Medi-Cal Resources



- [DHCS: Keep Your Medi-Cal Resources](#)
- [Contact Your Local Medi-Cal Office](#)
- [Contact Health Consumer Alliance for Free in-person or Over the Phone Help In Updating Contact Information](#)
- [Become a DHCS Coverage Ambassador](#)
- [DHCS Partner Resources](#)
- [DHCS Keep Your Medi-Cal Message Guides and Communication Toolkits in 19 Languages](#)
- [Medi-Cal Managed Care Health Plan Directory](#)
- [DHCS Medi-Cal PHE and Continuous Coverage Operational Unwinding Plan \(Updated: September 18, 2023\)](#)
- [DHCS Plan for Outreach and Enrollment \(April 6, 2023\)](#)
- [California Healthcare Foundation Redetermination Resources](#)
- [Latino Coalition For Health California Medi-Cal Resources in English and Spanish](#)
- [The Children's Partnership: How Medi-Cal Continuous Coverage Protects California Kids](#)

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**Mailing Your Redetermination Packet to
Your Local County Social Services Office
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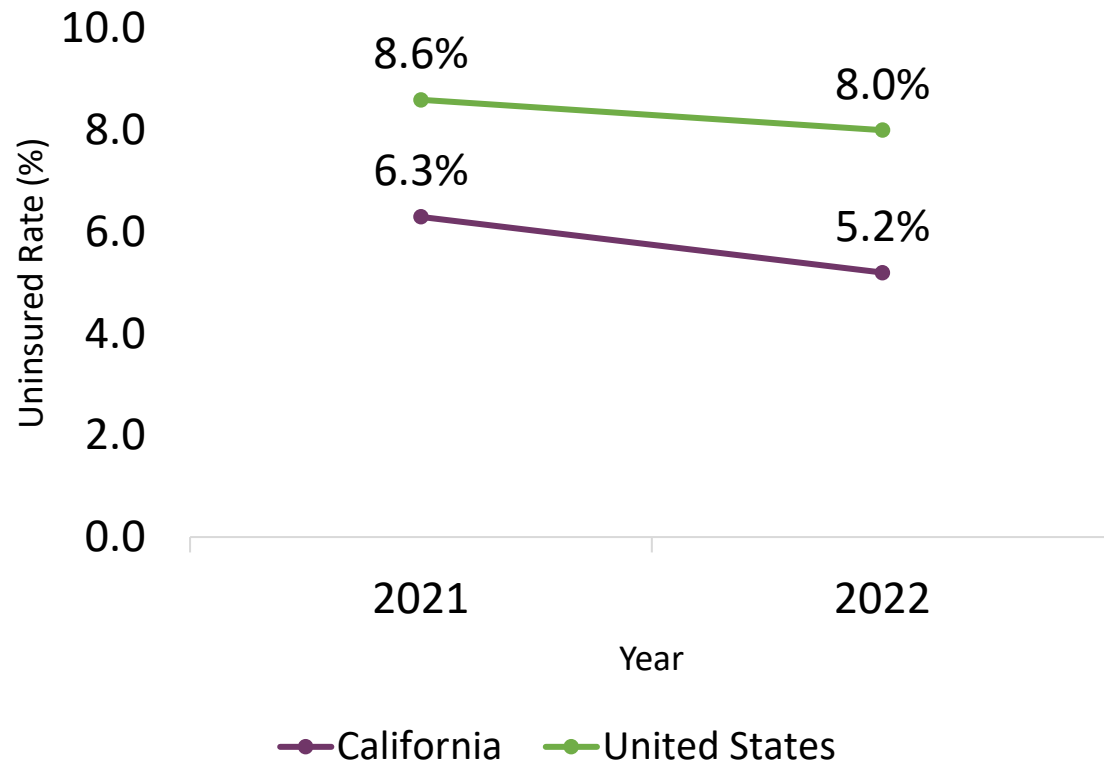


**Visiting Someone at Your Local County
Social Services Office at [Bit.ly/DHCS-County](https://bit.ly/DHCS-County)**



**Submitting Your Information and
Completing Your Renewal On
BenefitsCal.com**

Uninsured Rate in California Versus the Rest of the Country



Latest Policy Changes to Insure the Uninsured

- [Medi-Cal 2024 expansion for all regardless of immigration status](#)
- [The justice-involved initiative.](#)
- [The birth equity initiative](#)
- To learn more about California's Culture of Coverage, check out [ITUP's Policy Forum: California's Culture of Coverage.](#)



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