

Alameda County Housing Community Supports (HCS)

STEPS TO HELP CLIENTS GET AND RETAIN MEDI-CAL

HOW DO I CHECK THE MEDI-CAL STATUS OF MY CLIENTS?

To check your client's eligibility and renewal status:

- → You will need your client's Social Security Number.
- → Assist the client with setting up a <u>BenefitsCal</u> account, if they don't already have one.
- → Once logged in, you and the client can view benefits status¹ OR
- → Call the "Medi-Cal Status Automated Phone Line" at 1-888-999-4772 (client must be present for the call unless you are an authorized representative).

CHR: The CHR shows current Medi-Cal enrollment status. If your client has a signed <u>Information Sharing</u>
<u>Authorization</u> (ISA), then you can also see the redetermination date. (If your client does not have a signed ISA, please work with your client to get one signed.)

For clients who get SSI, the Medi-Cal is tied to their SSI so the renewal is automatically part of their annual SSI renewal.

For clients who get SSDI but not SSI, they must apply separately through Social Services to get Medi-Cal. Starting 24 months after the date of disability onset, SSDI recipients get Medicare.

WHAT DOCUMENTS AND INFORMATION DO I NEED TO HELP MY CLIENT HAVE READY?

- □ Photo identification such as a driver's license, passport, or other school/government-issued identification card with a photo.
 - Social Services Agency may be able to assist the applicant with obtaining a reduced fee California ID at the DMV.
- ☐ Social Security number
 - This is not applicable/not required if your client is undocumented.
- ☐ **Proof of income** (pay stubs, Social Security award letter, child support, alimony, disability/unemployment stubs, veteran

DON'T just rely on asking your client if they are enrolled.

You should check to see if your client is enrolled and if they are enrolled, check the redetermination date.

- benefits) if available. If applicable, previous year's federal income tax return and other tax documents.
- ☐ **Proof of residency** (lease, mortgage receipt, utility bills) may be requested if it is not clear that client lives in California.

HOW OFTEN SHOULD I CHECK THE MEDI-CAL STATUS OF MY CLIENTS?

When you enroll a client in a Housing Community Supports program such as Housing Navigation or Tenancy Sustaining Services, you should:

- → Check Medi-Cal enrollment as part of your initial intake. Do NOT just rely on client report.
- → It is also important to **regularly track** the Medi-Cal status of your client at least quarterly.

If they are NOT enrolled?	If they are enrolled?
Help ensure they complete the enrollment process	 Check redetermination date Add the date to your client's calendar with an annual reminder Add the date to any Shared Care Plans to alert yourself and other providers of renewal dates
	 Assist your client with the renewal form and ensure it has been mailed in or dropped off to the social services agency

HOW DO I KEEP ADDRESSES UP TO DATE?

- → If clients do not have an address, they can use one of the Alameda County Social Services Agency offices as their mailing address. Clients can pick up their mailed Medi-Cal letters at the SSA office. Client should be reminded to check their mail at the SSA office regularly.
- → When clients change their address, notify Alameda County Social Services Agency immediately.

¹ There is a planned future update to BenefitsCal that will allow CBOs to look up case information as long as the client signs a release of information. More information to come.

HOW TO GET ASSISTANCE WITH APPLICATIONS AND REDETERMINATIONS?

Some clients may have their coverage auto-renewed through the Federal Hub. You can verify whether or not this is the case through BenefitsCal.

If your client needs to enroll or renew their Medi-Cal, there are several options to help:

- → Go online to the BenefitsCal website.²
- → Go online to <u>Covered California's website</u> or call: 1-800-787-6921.
- → Get an appointment with an eligibility and enrollment specialist for your client:
 - » With their medical home (many, but not all, clinics provide eligibility and enrollment assistance).
 - » Use <u>Covered California's database</u> to find a Certified Enrollment Counselor.
- → Visit an Alameda County Social Services Agency office Monday–Friday 8:30am–5:00pm
 - » Enterprise Self-Sufficiency Center 8477 Enterprise Way, Oakland, CA 94621
 - » Eastmont Town Center—Self Sufficiency Center 6955 Foothill Blvd #100, Oakland, CA 94605
 - » North County Self-Sufficiency Center, Thomas L Berkeley Square, 2000 San Pablo Ave, Oakland, CA 94612
 - » Gail Steele Multi-Service Center (formerly Eden Area) 24100 Amador St, Hayward, CA 94544
 - » Livermore Self-Sufficiency Center 2499 Constitution Dr, Livermore, CA 94551
 - » Fremont Office 39155 Liberty St., Suite C330, Fremont, CA 94536
- → Schedule an appointment for your client with the Alameda County Health Care Services Agency Health Insurance Technician team directly by calling 1-800-422-9495 or send an email referral to appassist@acgov.org.
 - » Best practice when referring a client: 1) one referral per e-mail, 2) include the preferred language in the subject line, 3) in the e-mail include: the full name of the client plus an adult's name if the client is a minor, phone number, and the service they are requesting.
 - » Please encourage clients to answer all calls, have voicemail set up if possible, and listen to all messages after the referral is made.

HOW DO I BECOME AN AUTHORIZED REPRESENTATIVE?

To access your client's application status and receive future correspondence on behalf of your client, you need to list yourself as an **authorized representative**.

- → Download and fill out the Authorized Representative Form
- → The MC 382 (Appointment of Authorized Representative) must be completed if the Authorized Representative is an individual. The form needs to be completed for each Authorized Representative.
- → The MC 383 (Authorized Representative for Standard Agreement for Organizations) must be completed if the Authorized Representative is a clinic or organization. Each individual that will be acting as the applicant's/beneficiary's Authorized Representative should be listed on Form MC 383.
- → If you aren't listed as the authorized representative, your client will need to be present to receive information about benefits status, or request verification letters.

WHEN AUTOMATING RENEWALS THROUGH CALHEERS, WHAT IS CONSENT FOR ELECTRONIC VERIFICATION?

When a consumer fills out their application, they choose to allow Covered California to verify the information in their application electronically using the Federal Data Services Hub (FDSH)—this is called **Consent for Verification**. Consumers may authorize Covered California to verify their information electronically for a period of zero (0) to five (5) years without the consumer having to take any action. To ensure that your consumers receive any increased financial help they may be eligible

to receive, please confirm that their Consent for Verification is provided.

→ For instructions, see the <u>Consent for Verification</u> <u>Quick Guide</u>



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