



MEDI-CAL FACT SHEET

Statement of Purpose

The Medi-Cal program helps pay for medically necessary health care services for certain residents of California.

Medi-Cal Program Categories

Medi-Cal covers certain groups if they meet other eligibility requirement:

- Person who are 65 or older, blind or disabled, receiving a check through the Supplemental Security Income / State Supplemental Payments (SSI / SSP) program.



- Children and parents who receiving financial assistance through the California Work Opportunity and Responsibility to Kids (CalWORKs). The CalWORKs Program also

provides financial assistance and food stamps to children who are deprived due to the death, absence, incapacity, or unemployment of their parent or parents.

- Medically Needy persons who are 65 or older, blind, disabled, working disabled or families meeting the deprivation requirements of CalWORKs who cannot pay for all their health Care and are not receiving financial assistance.
- Medically Indigen persons who are not eligible as Medically Needy persons and are in one of the following categories:
 - People less than 21 years of age
 - People 21-64 years of age residing in a skilled nursing or intermediate care facility
 - Women who are pregnant
 - Eligible refugee during the first eight months after their arrival in the United States.

- Certain individuals may be eligible for full scope or restricted benefits special Medi-Cal programs if they meet other eligibility requirements. These include:
 - Otherwise eligible pregnant woman, infants and children of certain ages who have a share-of-cost programs.
 - Otherwise eligible aliens who meet the same eligibility criteria as citizens except for alien/status may be eligible for certain benefits.
 - Persons under 21 years of age, unmarried, and living with their parents may be eligible to certain confidential medical services based on their own income and property. Medical services included under this special program are those which relate to family planning, pregnancy, drug / alcohol abuse, sexually transmitted diseases, sexual assault and mental health (which includes child or sexual abuse).
 - Special treatment programs cover certain eligible person who need dialysis treatment or parenteral Hyperalimentation services.
 - Special Medicare payment programs such as the Buy-In program and the Medicare Savings programs will pay for Medicare premiums, co-insurance and deductibles for person who meet special eligibility criteria.

Basic Medi-Cal Eligibility Criteria

BASIS OF LINKAGE

Linkage to one of the programs previously identified must be established

RESIDENCE

The application must be physically present and living in California with the intention of remaining permanently or for an indefinite period.



PROPERTY

Property includes, but is not limited to cash on hand, money in the bank, real property not a home, cash surrender value of life insurance policies, the value of additional automobiles, stocks, bonds, etc. Property used as a principal residence is exempt. In some circumstances, one property formerly used, as a principal residence may be exempt. Real property other than the principal residence is limited to \$6,000 net equity and must be utilized. Some cars, used for transportation and personal belongings such as furniture are exempt from consideration as property.



MAXIMUM GROSS PROPERTY FOR MEDI-CAL ELIGIBILITY

# of Persons	Max Amount
1	\$2,000
2	\$3,000
3	\$3,150
4	\$3,300
5	\$3,450
6	\$3,600
7	\$3,750
8	\$3,900
9	\$4,050
10 or more	\$4,200

INCOME

There is no upper limit on how much monthly income a family may receive and still be eligible for Medi-Cal benefits. Some types of income are not counted in the Medi-Cal eligibility determination.

SHARE OF COST

The amount of income a family received determines whether the family has a share of cost (SOC). The share of cost is like a deductible.

Persons whose income, after allowable deductions (net income), exceeds the amount allowed for living expenses (maintenance need) will have to pay for part of their Medi-Cal expenses. The SOC is determined by subtracting the maintenance need from the net income. The SOC is the amount of Medi-Cal expenses the person or family must pay or obligate to pay before Medi-Cal pays any remaining Medi-Cal expenses.

A share of cost is met in the month Medi-Cal services are provided. If a beneficiary does not receive Medi-Cal services in a month, there is no share of cost to meet for that month.

MAINTENANCE NEED

The maintenance need is the amount of monthly income that Medi-Cal regulations allow a person / family for food, clothing, housing, etc.

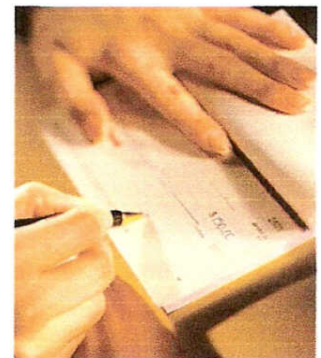
MAINTENANCE NEED AMOUNTS

Persons	Max. Amt.
1 person	\$600
1 adult & 1 child	\$750
2 adults	\$934
3 persons	\$934
4 persons	\$1,100
5 persons	\$1,259
6 persons	\$1,417
7 persons	\$1,550
8 persons	\$1,692
9 persons	\$1,825
10 persons	\$1,959
Each additional person	Add \$14

The maintenance need for a person who will remain in long-term care for the entire calendar month is \$35 per month for personal and incidental needs.

Co-Payments for Medi-Cal Services

Many Medi-Cal recipients are required to pay a small amount of money (co-payment) each time they receive Medi-Cal service or prescribed drugs, or if they go to a hospital emergency room when they do not need an emergency service.



NO CO-PAYMENT IS REQUIRED

- For certain health care plans,
- Any person age 18 or under,
- Any woman receiving services during pregnancy or the postpartum periods,
- Persons receiving family planning, emergency services or hospice care,
- Any person who is an inpatient in a health facility, or
- Children living in boarding homes or in foster care.

The provider collects the co-payment at the time the service is rendered and also has the option of not collecting co-payment.

Health Care Coverage

FULL SCOPE BENEFITS

Medi-Cal recipients who receive a full scope Medi-Cal card are eligible to full scope of necessary Medi-Cal care including doctors, hospitals, drugs, dental services, and eyeglasses. Some services require prior approval by the state. They recipient may use any provider who accepts Medi-Cal.

RESTRICTED BENEFITS

Medi-Cal recipients who receive a restricted Medi-Cal care are eligible to only those services indicated on the card. For any other Medi-Cal services these individuals must meet their share of cost for full scope benefits or apply for benefits through the Sacramento County Medically Indigent Services program, as appropriate.

PRIVATE HEALTH INSURANCE

All eligible persons are required to use any other health insurance benefits to the maximum.

Managed Health Care in San Mateo County of San Mateo

The Health Plan of San Mateo (HPSM) is a licensed health plan that manages your health care if you are eligible for Medi-Cal. HPSM works to meet your health care needs through a network of qualified doctors, Medi-Cal groups, clinics, hospitals, pharmacies and provider located in San Mateo County. The network also includes some providers in San Francisco and Santa Clara counties.

HPSM's service area includes all of San Mateo County. If you live in the service area, it is important that you use doctors who participate in the Health Plan of San Mateo.

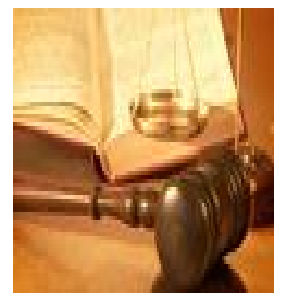
As a HPSM member health care needs and those of each eligible family member will be managed by the Primary Care Physician (PCP) you select from the network. Your PCP will take care of most of your health care need, including preventive care such as checkups and immunizations. Your PCP will also refer you to Specialists you may need and will make arrangement if you need to be hospitalized.



Some HPSM members are called "Special Members". As a Special Member, you don't have an assigned PCP and HPSM is listed on your HPSM ID card as your PCP. New HPSM members are Special Members for the first month only. This allows time for a new member to choose a PCP. If you do not choose a PCP, HPSM will automatically assign one to you. Other Members are Special Members because of their Medi-Cal eligibility group. Some of these groups include adopted children or children in foster care, children served by California Children Services, and adults in nursing homes. Some member with complicated Medi-Cal conditions that required frequent visits to Specialists may also be Special Members.

Appeal Rights

Medi-Cal or Medicare Savings Program (QMB applicants or recipients have the right to appeal decisions, which they do not believe are right. The appeal process is explained at the time of application and on the back of notice of action



Where to Apply for Medi-Cal

NORTHERN REGION

PeninsulaWorks Daly City
271 - 92nd St., Daly City
(650) 301-8440

Human Services Agency
350 - 90th St., Daly City
(650) 301-8720

Human Services Agency
1487 Huntington, So. San Francisco
(650) 877-5608

Bayshore Family Resource Center
155 Oriente St. Rm. 11, Daly City
(650) 301-8828

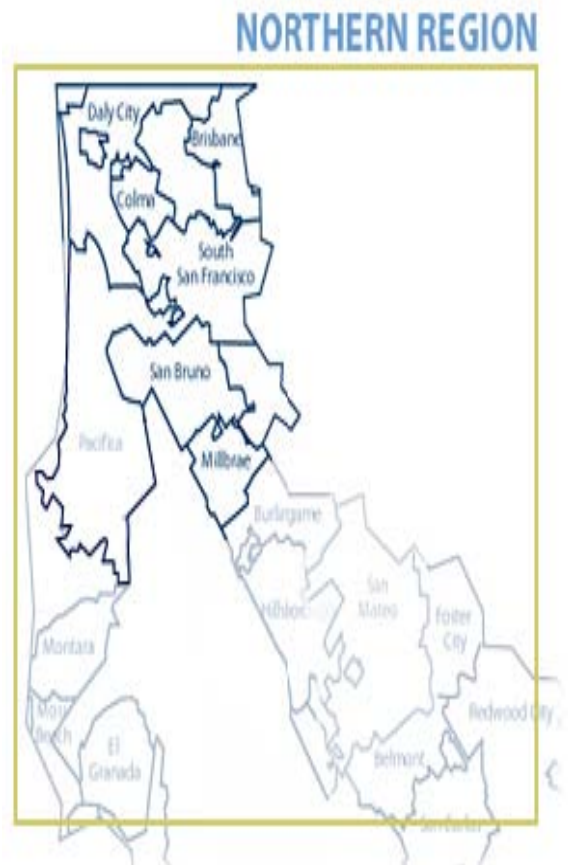
Ben Franklin Family Resource Center
700 Stewart St., Rm. 41, Colma
(650) 301-8845

Jefferson Family Resource Center
6996 Mission St., Rm. 600, Daly City
(650) 301-8836

Daly City Community Services Center
350 - 90th St., 1st Fl., Daly City
(650) 991-8007

North Peninsula Neighborhood Service Center
600 Linden Ave., So. San Francisco
(650) 583-3373 or 588-8822

Seton Medical Center
1900 Sullivan Ave., Daly City
(650) 992-4000



SOUTHERN REGION

PeninsulaWorks Redwood City
2500 Middlefield Rd., Redwood City
(650) 367-0190

Human Services Agency
2500 Middlefield Rd., Redwood City
(650) 363-4441

Human Services Agency
2415 University Ave., East Palo Alto
(650) 363-4218

Kennedy Family Center
2521 Goodwin Ave., Redwood City
(650) 569-3864

Connect Family Resource Center
2450 Ralmar Ave., East Palo Alto
(650) 617-1400

PeninsulaWorks Menlo Park
1200 O'Brien Dr., Menlo Park
(650) 330-6490

Garfield Charter School
Family Resource Center
3600 Middlefield Rd., Menlo Park
(650) 369-3759

Taft Family Resource Center
903 10th Ave., Redwood City
(650) 569-3868

Fair Oaks
Family Resource Center
2950 Fair Oaks Ave., Redwood City
(650) 482-5926

Hoover School
Family Resource Center
701 Charter St., Rm. 403, Redwood City
(650) 482-5925

Fair Oaks Community Center
2600 Middlefield Rd., Redwood City
(650) 361-8730

Sequoia Teen Resource and Health Clinic
1201 Brewster Ave., Redwood City
(650) 366-2927

El Concilio Emergency Social Services
1798B Bay Rd., East Palo Alto
(650) 330-7432

Ravenswood Family Health Center
1798 Bay Rd., Bldg. A, East Palo Alto
(650) 330-7400

North Street Community Resource Center
620 N. St., Pescadero
(650) 879-1691

