What Are My Medi-Cal Choices?

This is a guidebook for people with disabilities and seniors who have Medi-Cal.

This guidebook explains the two kinds of Medi-Cal: Regular Medi-Cal and Medi-Cal Health Plans.

This guidebook can help you choose which kind of Medi-Cal is right for you.

Questions and Answers
If you would like this guidebook in another language or on cassette, CD, or Braille, please call Health Care Options.

Δανέζικα 1-800-840-5032
Khmer 1-800-430-5005
粵語 1-800-430-6006
English 1-800-430-4263
Hmoob 1-800-430-2022
한국어 1-800-576-6883
國語 1-800-576-6885
Русский 1-800-430-7007
Español 1-800-430-3003
Tagalog 1-800-576-6890
Việt 1-800-430-8008

1-800-576-6881 عربي
1-800-840-5034 فارسي

You can also get this guidebook online at http://dhcs.ca.gov/MediCalChoices
This section explains the kinds of Medi-Cal that you can choose.

2 There Are 2 Kinds of Medi-Cal
4 You Can Choose the Kind of Medi-Cal You Want

This section explains Medi-Cal services.

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There Are 2 Kinds of Medi-Cal

Medi-Cal is a California health care program for many people with low incomes.

Many counties in California have 2 kinds of Medi-Cal. The 2 kinds are

1. Regular Medi-Cal.

Both kinds of Medi-Cal give you the same basic benefits.

You can choose which kind of Medi-Cal you want. With both kinds, you will get the same basic benefits and care. But the way that you get care may be different.
How Regular Medi-Cal Works

In Regular Medi-Cal, you must find your own doctors, pharmacies, and other providers. You must make sure that they take Regular Medi-Cal. The government pays the providers directly each time you visit them.

How Medi-Cal Health Plans Work

In Medi-Cal Health Plans, your Plan will help you find doctors, pharmacies, and other providers in the Plan’s network. The government pays the Plan a fee each month to provide your care. You do not pay anything. Some Plans are insurance companies that also cover people who do not have Medi-Cal. Medi-Cal Health Plans are also called “Medi-Cal Managed Care Plans.”

The kinds of Medi-Cal in your county

Sarah’s county has Regular Medi-Cal and Medi-Cal Health Plans.
To learn about the kinds of Medi-Cal in your county, see page 39.

Questions and Answers

Do I have to pay for a Medi-Cal Health Plan?
No. You do not have to pay anything for it.

If I do not like my Medi-Cal Health Plan, can I change back to Regular Medi-Cal?
Yes, you can change back at any time. To change, call Health Care Options at 1-800-430-4263.

Is Medi-Cal the same as Medicare?
No. They are different health care programs, but some people have both of them. Medicare offers some added benefits. To learn if you qualify for Medicare, call the Health Insurance Counseling and Advocacy Program (HICAP) at 1-800-434-0222. Or call Medicare at 1-800-633-4227.

If you have both Medicare and Medi-Cal, this guidebook is not for you.
If you are not satisfied with your care, you can change the kind of Medi-Cal you have. See page 39 to learn about the kinds of Medi-Cal in your county.

- You can choose the kind of Medi-Cal you want if you qualify for Medi-Cal because you have a disability.
- You can choose your kind of Medi-Cal if you are 65 or older.
- People who qualify for Medi-Cal for other reasons usually do not have a choice.
- In order to choose, you must live in a county that has Regular Medi-Cal and Medi-Cal Health Plans.

**Know Which Kind of Medi-Cal You Have Now**

- Ask your doctor or pharmacist, or look at your membership card or cards.
- If you are in Regular Medi-Cal, you will have a white card. This is called your Beneficiary Identification Card (BIC).
- If you are in a Medi-Cal Health Plan, you will have a membership card with the name of your Plan on it. You will also have the white Regular Medi-Cal card.
- You can also call **Health Care Options** at **1-800-430-4263** to find out which kind of Medi-Cal you have.

**Learn more about your choices**

Leo was not sure if Regular Medi-Cal or a Medi-Cal Health Plan was right for him. After reading this guidebook, he learned more about his choices and decided to change to a Medi-Cal Health Plan.
Questions and Answers

When I first got SSI, I got Regular Medi-Cal. Can I really change?
Yes, you can change to a Medi-Cal Health Plan.

I have Regular Medi-Cal. Do I have to change?
No. If you want, you can change to a Medi-Cal Health Plan. But you do not have to change. This guidebook can help you decide what is best for you.

Do I have to pay anything to change?
No, you do not pay anything to change.

Will I lose my benefits if I change?
No, you will not lose your benefits if you change.

How do I change?
Call Health Care Options at 1-800-430-4263 and ask for an enrollment packet, or enroll over the phone.

How long does it take to change to a Medi-Cal Health Plan?
It takes up to 45 days to change. You should continue to go to doctors who take Regular Medi-Cal until you get the membership card for your new Plan.

How long does it take to change back to Regular Medi-Cal if I don’t like my Medi-Cal Health Plan?
It takes up to 45 days to change back.

Not everyone has a choice
Angela qualifies for Medi-Cal because of her disability. She can choose between Regular Medi-Cal and a Medi-Cal Health Plan. People with disabilities and seniors can choose the kind of Medi-Cal they want. Most other people have to be in a Medi-Cal Health Plan.
Both Regular Medi-Cal and Medi-Cal Health Plans pay for the same basic benefits. You must use doctors and other health care services that take your kind of Medi-Cal.

You Have These Basic Medi-Cal Benefits

- Doctor visits
- Hospital stays and surgery
- Hospital outpatient procedures and services, like MRIs and X-rays
- Emergency and urgent care, including emergency ambulance services
- Prescription drugs
- Procedures, like biopsies or having a colonoscopy
- Screening tests, like mammograms or cholesterol blood tests
- Preventive care, like vaccines, check-ups, and family planning
- Physical, occupational, and speech therapy
- Pregnancy tests and pre-natal care
- Durable medical equipment (DME), like a walker or wheelchair
- Long-term care
- Transportation, in limited cases
- Dental care for people under age 21 (Call Denti-Cal at 1-800-322-6384.)
- Some mental health care (For details, call your County Mental Health Department. The phone number is on your county-specific information, beginning on page 39.)
Can I get all of the benefits that are listed on page 6?
You can get a benefit when you have a medical need for it. This means that you need the service to prevent or treat a health problem. Usually your doctor decides what services you need. Both kinds of Medi-Cal must approve some treatments and services before you can get them. This is called pre-approval.

If the basic benefits are the same, why does it matter which kind of Medi-Cal I choose?
It matters because some of the rules for getting care are different. Also, Medi-Cal Health Plans offer extra services. They help you find doctors, coordinate your health care, and offer health education programs.

Do benefits ever change?
Yes. Benefits can change. Call Health Care Options at 1-800-430-4263 if you have questions.

Are all Medi-Cal Health Plans the same?
No. Different Plans have different providers and different lists of approved drugs. To learn more about the Plans in your county, look at your county-specific information, beginning on page 39.
In both kinds of Medi-Cal your care is free. But prescription drug costs may be different.

**Costs of Doctor Appointments and Hospital Care**

- If you have Medi-Cal because you are a person with a disability or a senior, you usually do not pay anything for your health care. Your providers cannot bill you for your appointments.
- Most people with disabilities and seniors do not have share-of-cost Medi-Cal. Share-of-Cost is for people who have more money. This guidebook is not for people who have share-of-cost Medi-Cal.

**Prescription Drug Costs**

- If you are in Regular Medi-Cal, a pharmacy may charge you $1 for covered drugs. If you cannot pay $1, you don’t have to. In this case, the pharmacy should not charge you anything for the drug.
- If you are in a Medi-Cal Health Plan, you do not pay anything for covered drugs.
- For more information on prescription drugs, see page 14.

**Paying for prescription drugs**

Willie is 78 years old and has Regular Medi-Cal. He pays $1 for each of his prescriptions. His neighbor is in a Medi-Cal Health Plan and does not pay anything for prescriptions.
Make sure that you do not have to pay

Ana has Regular Medi-Cal. She went to a new doctor. They made a copy of her Medi-Cal card. They did this so that they could send the bill to Medi-Cal instead of to Ana.

Questions and Answers

What if I get a bill from a doctor in my Medi-Cal Health Plan?
The law says that providers in your Plan cannot send you a bill. If you get a bill, it is a mistake and you should not pay it. Call your Plan and explain the problem—they will help you.

What if I get a bill from a doctor and I am in Regular Medi-Cal?
The law says that Medi-Cal providers cannot bill you for services covered by Medi-Cal. If you get a bill, it is a mistake and you should not pay it. Call your provider and ask if they need a copy of your Medi-Cal card.

Why do I need prior authorization for some medicines?
Some medicines need authorization before Medi-Cal will pay for them. Ask your doctor or pharmacist to send an authorization form to Medi-Cal. Or ask your doctor if another medicine would work for you.

How to Avoid Getting a Bill

- Know which kind of Medi-Cal you have.
- Before you get any service, ask if they take your kind of Medi-Cal. For example, ask before you fill a prescription, go to the doctor, or have a test.
- Always show your Medi-Cal card or cards to your provider.
A provider is a doctor or another professional who offers medical care. Specialists, hospitals, clinics, pharmacies, labs, medical supply stores, and therapists are examples of providers.

**Your Primary Care Doctor**

Your main doctor is called your primary care doctor or Primary Care Provider (PCP). This doctor gives you most of your care. Over time, your doctor gets to know you and your health care needs.

- In Regular Medi-Cal, you can have a primary care doctor, but you do not have to have one. You usually find this doctor on your own.
- In Medi-Cal Health Plans, you must have a primary care doctor. Your Plan can help you find a doctor.
- In Medi-Cal Health Plans, your doctor helps you get the services you need, like referrals to specialists, medical equipment, and prescription drugs.
- You can change your doctor if you want to, in both kinds of Medi-Cal.
- If you want to try a new doctor, you can call his office and ask questions before you make a decision.

**Seeing a specialist**

Hannah qualifies for Medi-Cal because she has AIDS. Her primary care doctor gave her a standing referral to see an AIDS specialist in her Medi-Cal Health Plan.
Which Providers Can You See?

- If you are in Regular Medi-Cal, you must see providers who accept Regular Medi-Cal. If you have a primary care doctor, this doctor can help you find other providers.

- If you are in a Medi-Cal Health Plan, you must see providers in the Plan. Your primary care doctor must give you a referral. You can get a Provider Directory for each Plan. Call the Plan or call Health Care Options at 1-800-430-4263. Regular Medi-Cal does not have provider directories.

- If you have providers you like, ask them which kinds of Medi-Cal they take.

How to Find a Specialist

In both kinds of Medi-Cal, it can be hard to find specialists. Also, there may be long waiting lists.

In a Medi-Cal Health Plan, if you have trouble finding a specialist, your Plan must help you find one.

Remember, before you see a specialist, you may need to get pre-approval. Check with your doctor or your Medi-Cal Health Plan.

To get the names of specialists,

- Ask your doctor.
- Ask at a hospital or clinic.
- Ask your Medi-Cal Health Plan.

Questions and Answers

Can I keep my doctor if I join a Medi-Cal Health Plan?

You can only keep your doctor if she is in your Medi-Cal Health Plan’s network.

What if I want to see a provider who is not in my Medi-Cal Health Plan?

Almost always, you will have to see a provider in your Plan first. Then, if you still want to see a provider outside your Plan, you need to get pre-approval from your Health Plan before seeing that provider.

What is a Provider Directory?

A Provider Directory is a booklet that lists all of the doctors in a Plan. It has primary care doctors and specialists in it. Most Provider Directories have addresses, phone numbers, hours, and languages spoken for each doctor. Some list if they are taking new patients and how accessible they are. Each Plan has its own Provider Directory.
In an emergency, call 9-1-1 or go to any hospital Emergency Room. Do this, no matter which kind of Medi-Cal you have.

**Emergency Care**

- An emergency is when you think your health is in serious danger and you need care right away.
- Examples of emergencies are a bad injury, severe pain, a sudden serious illness, or a psychiatric emergency.

**Urgent Care**

Urgent care is care that you need soon, usually within 24 hours. For example, you might need urgent care for a high fever, an earache, a sprain, or a minor burn.

- If you need urgent care, you should call your doctor’s office. If you have a Medi-Cal Health Plan, you may be able to call a 24-hour advice nurse.
- If you are traveling away from home, call your doctor’s office and ask what to do. If you cannot reach your doctor, go to the nearest clinic or urgent care center. Both kinds of Medi-Cal cover urgent care away from home.
Do you need emergency care or urgent care?

Joseph hurt his arm, but his dad was pretty sure it was not broken. His dad called the doctor, and the doctor had them come in later that day. Joseph did not go to the emergency room because his problem was not life-threatening. He needed urgent care, not emergency care.

Questions and Answers

What if I have an emergency while I am in another county or state?

With both kinds of Medi-Cal, you can get emergency care anywhere in the U.S.

- Go to the nearest hospital emergency room.
- Show your Regular Medi-Cal card, if you have one.
- If you are in a Medi-Cal Health Plan, show that card too. If you are hospitalized, call your Plan as soon as possible.

What if I need follow-up care after I get emergency or urgent care?

Go to your primary care doctor for follow-up care. If you are traveling, call your doctor or your Medi-Cal Health Plan and ask what to do.
Prescription Drugs

Medi-Cal covers many prescription drugs and some over-the-counter drugs.

**Your Preferred Drug List**

You must get drugs from a list of preferred drugs, called a formulary. Regular Medi-Cal has a list. Each Medi-Cal Health Plan has its own list. To see the list, ask your doctor, pharmacist, or Medi-Cal Health Plan.

The drugs on the list may change. A committee of doctors and pharmacists reviews the list. This committee may remove or add drugs because medical guidelines or drug costs change.

If you need a drug that is not on the list or was removed from the list, your doctor must ask for authorization. Then, Regular Medi-Cal or your Medi-Cal Health Plan must approve the drug or one that is similar.

**Your Pharmacies**

You must use pharmacies that accept the kind of Medi-Cal that you have. Many local pharmacies accept both kinds of Medi-Cal.

Most Medi-Cal Health Plans offer delivery and mail-order services for some prescriptions.

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Using a local pharmacy

Lin wants to join a Medi-Cal Health Plan, so she is asking her local pharmacy if they take the Plan. They said they do, so now Lin knows that she can change to the Plan and keep using this pharmacy.

Lin wants to keep this pharmacy because she gets her over-the-counter medicines here. Her pharmacist can tell her if these medicines are safe to take with her prescription drugs.
Questions and Answers

Will I have to pay for drugs?
If you are in Regular Medi-Cal, a pharmacy may charge you $1 for covered prescriptions. If you cannot pay $1, the pharmacy should not charge you anything for the drug. In Medi-Cal Health Plans, pharmacies cannot charge you anything for drugs.

How many drugs can I get?
In Regular Medi-Cal, you can get at least 6 prescriptions each month. In many Medi-Cal Health Plans, there is usually no limit on prescriptions. In both kinds of Medi-Cal, your doctor can ask for authorization for more prescriptions, if necessary.

Are generics the same as brand-name drugs?
Usually, generics work the same as brand-name drugs. Very rarely, people have a problem with a generic drug. If this happens to you, you can ask for authorization to use the brand-name drug.

Some medicines need authorization
The pharmacist told John that his medicine was not covered any more. John asked the doctor to fill out an authorization form. After his doctor sends the form to the Plan, authorization should take no more than 2 business days.

Make Sure Your Drugs Are Covered by Medi-Cal
- When your doctor prescribes a drug, ask if it is covered and if it needs authorization. Some drugs need authorization, even if they are on the preferred list.
- Use a pharmacy that takes your kind of Medi-Cal.
- If the pharmacist says your drug is not covered, you can ask for a free emergency supply. Then, ask your doctor to fill out an authorization form so that you can get the rest of the prescription.

Drug Safety Tips
- When you pick up a prescription, make sure it is the correct one.
- You can ask for directions on how to take your medicine in large print or in your language.
- Tell your doctor if you have side effects from a drug.
Supplies and Equipment

Medi-Cal covers medical supplies and equipment. You must get pre-approval from Regular Medi-Cal or your Medi-Cal Health Plan before you can get some supplies and equipment.

Medical Supplies

Medical supplies are usually used once and then thrown away. Examples are bandages or syringes for injections.

Durable Medical Equipment (DME)

Durable medical equipment is usually used many times. Examples are respirators, walkers, canes, wheelchairs, and adjustable beds.

Getting medical equipment

When Edward got out of the hospital, he needed a walker. When he was still in the hospital, his doctor gave him a prescription for the walker and told him where to get it. Edward called the store and got the walker without a problem.
Questions and Answers

Can I go to any medical supply store?
You must use a medical supply store that takes your kind of Medi-Cal. If there is a store you like, ask which kinds of Medi-Cal it takes. If you have a Medi-Cal Health Plan, ask your Plan which stores you can use.

I need some expensive equipment. How can I get Medi-Cal to pay for it?
Usually, your doctor will refer you to a rehab clinic or an occupational therapist. They will evaluate you and recommend the best kind of equipment. The doctor will write a Treatment Authorization Request (TAR). Then Regular Medi-Cal or your Medi-Cal Health Plan will decide whether to approve or deny the equipment. If you have a problem, see page 32.

Finding medical supplies and equipment
José was thinking about joining a Medi-Cal Health Plan. He asked several medical supply stores if they took the Plan. He also called the Plan and asked about the process for approving equipment.
In both kinds of Medi-Cal, your primary care doctor may provide some mental health care services and help you find other services you need. If you have serious mental health problems, you will usually get services from your County Mental Health Department.

**Your Primary Care Provider’s Role in Mental Health Care**

Your main doctor may be able to help you with some mental health problems. For example, your main doctor is able to prescribe medicine for common mental health conditions such as depression and anxiety. If your problem is more serious, your doctor may refer you to your County Mental Health Department.

To find mental health providers in either kind of Medi-Cal, ask your primary care doctor for a referral. If you are in a Medi-Cal Health Plan, you can also ask your Plan.

**Your County Mental Health Department’s Role in Mental Health Care**

Your County Mental Health Department will help you with serious mental health problems that primary care doctors do not normally treat.

- You must contact your County Mental Health Department for services. The phone number is on your county-specific information, beginning on page 39. You will still have Medi-Cal, and your benefits will stay the same.

- If you have difficulty getting County Mental Health services in either kind of Medi-Cal, call the **Medi-Cal Mental Health Care Ombudsman** at **1-800-896-4042**. You can also ask your Medi-Cal Health Plan to help you.
Questions and Answers

My pharmacy said that the drug my county psychiatrist prescribed is not on my Medi-Cal Health Plan’s list of preferred drugs. What can I do?

Ask your pharmacist to check the Regular Medi-Cal preferred drug list instead of your Health Plan’s list. If your drug is on the Regular Medi-Cal list, you can get it. If it’s not on the list, the pharmacist can ask your psychiatrist if he can prescribe another drug. If you need a drug that is not on the list, the pharmacist should fill out a Medi-Cal authorization form for the drug. Ask your pharmacist for a free emergency supply while you are waiting.

I get my mental health care from the county. Why does it matter if I have Regular Medi-Cal or a Medi-Cal Health Plan?

It matters because your other health care needs are also important. Choose the kind of Medi-Cal that will help you get the providers and care you need. Look for a primary care doctor who can help you take care of your other health needs.

I have been depressed. How can I see a therapist?

Go to your primary care doctor and ask for a referral.

How can I make sure that the drugs I get from different providers will not have bad interactions?

Tell each provider all the medicines, herbs, and vitamins you are taking. Always go to the same pharmacy so they can check for interactions.

Take care of all of your health care needs

David has bipolar disorder, high blood pressure, and high cholesterol. He sees a psychiatrist from his County Mental Health Department who prescribes medicines to treat his bipolar disorder. For his high blood pressure and high cholesterol, he sees his primary care doctor in his Medi-Cal Health Plan.

Finding Mental Health Providers

- To find a provider, ask your primary care doctor.
- If you are in a Medi-Cal Health Plan, you can ask the Plan.
- If you have Regular Medi-Cal, ask your County Mental Health Department for a list of mental health providers who take Regular Medi-Cal.
Both kinds of Medi-Cal cover some home health care and nursing health care. Long-term care in a nursing home that lasts more than 60 days is usually covered under Regular Medi-Cal, not by the Medi-Cal Health Plan. If you need long-term care that lasts more than 60 days, you will remain in Regular Medi-Cal or your Medi-Cal Health Plan will change you back to Regular Medi-Cal.

**Home Health Care**

Home health care is health care that is provided in your home by nurses, home health aids, and others. You may also get physical therapy and other kinds of therapy at home.

You may also need personal care at home. In-Home Supportive Services (IHSS) helps with personal care, such as bathing, getting dressed, and changing bandages. Both kinds of Medi-Cal will help you get IHSS.

**Nursing Home Care**

Both kinds of Medi-Cal cover care of less than 60 days in a nursing home. If you need care in a nursing home for more than 2 months, your Medi-Cal Health Plan will usually change you to Regular Medi-Cal.

**Getting nursing home care**

Patricia had a mild stroke. She will need to be in a nursing home for a few weeks after she gets out of the hospital. Patricia has a Medi-Cal Health Plan, so her doctor referred her to a nursing home in her Plan.
Questions and Answers

What if I need to be in a nursing home for a few weeks? Is this covered in a Medi-Cal Health Plan?
Yes. And you can also talk to your primary care doctor about getting help at home. That way you may not need to go to a nursing home.

What if I need ongoing care?
If you need care in a nursing home for more than 2 months, your Medi-Cal Health Plan will usually change you to Regular Medi-Cal.

Home health care
Sherry just came home from the hospital, and needs to use a wheelchair for several months. Her Medi-Cal Health Plan approved an occupational therapist to come to her home and help her learn to take care of herself while in a wheelchair.
Health education programs can help you prevent and manage health problems.

- Some doctors and clinics in Regular Medi-Cal offer health education classes.
- All Medi-Cal Health Plans offer free health education programs. To learn more about health education services, call the Medi-Cal Health Plans in your county. See page 39.

**Health Education Topics**

Medi-Cal Health Plans offer free programs. These may include programs that help you learn how to

- Eat well and exercise safely.
- Manage asthma or diabetes.
- Lose weight in a healthy way.
- Manage chronic pain.
- Control blood pressure or cholesterol.
- Quit smoking.
- Prevent drug and alcohol problems.

**Taking a health education class**

Tanya has diabetes. Her Medi-Cal Health Plan offered a class on cooking healthy food. Tanya got lots of recipes she can use at home. Now she is eating the right foods and feels much better.
Different Ways to Learn

Medi-Cal Health Plans offer a variety of health education services, which may include

- Classes at clinics and hospitals.
- Booklets, audiotapes, CDs, DVDs, and videotapes that you can use at home.
- Health experts you can talk to, in person or by phone.
- Support groups where people learn from each other and help each other.
- Advice nurses you can talk to on the phone.

Questions and Answers

I have high blood pressure. Could health education help me?

Yes. For example, you could take a class on managing high blood pressure, reducing stress, healthy eating, or weight management.

How can I get help to stop smoking?

Ask your doctor or your Medi-Cal Health Plan. Medi-Cal Health Plans have classes or resources to help you stop smoking.

How can I get help for a drinking problem?

Ask your doctor to refer you to a local drug or alcohol treatment program. If you are in a Medi-Cal Health Plan, your Plan must help you find a treatment program. Some programs are free, but there may be a waiting list.
Most children with Medi-Cal must be in a Medi-Cal Health Plan. But if your child qualifies for Medi-Cal because of a disability or special health care need, you can choose the kind of Medi-Cal you want for your child.

**Your Child’s Doctor**

In both kinds of Medi-Cal, your child can have a primary care doctor. This helps your child get physical exams, shots, and other care to help prevent problems. Regular care helps prevent problems and keeps your child as healthy as possible. Your child’s doctor will do a physical exam and check your child’s hearing, vision, and dental needs.

- If you have Regular Medi-Cal, you can ask your hospital or clinic to recommend a doctor for your child.
- In Medi-Cal Health Plans, your Plan will help you find a doctor for your child.

**Finding specialists for children**

Jasmine is 8 years old and has severe asthma. Her mom changed Jasmine to a Medi-Cal Health Plan. Before choosing a Plan, her mom called the Plan to make sure that they have a children’s lung specialist. She called the specialist and asked how long it would take to get an appointment. She found out that Jasmine could get an appointment more quickly than in Regular Medi-Cal, so she made the change.
California Children’s Services (CCS)

CCS offers special services for children with some disabilities and special health care needs. If your child is in Regular Medi-Cal and changes to a Medi-Cal Health Plan, your child still gets CCS services and sees CCS providers. Your child’s Medi-Cal Health Plan will work with CCS.

CHDP and EPSDT Programs (Child Health and Disability Prevention Program, and Early Periodic Screening, Diagnosis, and Treatment Program)

These programs provide preventive health services for children with Medi-Cal. Follow-up care to prevent problems is also covered. Children from birth to age 21 may receive these services in both kinds of Medi-Cal.

If your child needs to travel to get a treatment, EPSDT can pay for travel and housing. It can also pay for an attendant to travel with the child—if the attendant is not a family member.

Questions and Answers

Does my child need to have the same kind of Medi-Cal that I have?

No. However, it may be more convenient for you if you both have the same kind of Medi-Cal.

My child has Regular Medi-Cal, and I really like her clinic. Can she still go there if I enroll her in a Medi-Cal Health Plan?

Ask the clinic. Many clinics take both kinds of Medi-Cal.
Using a care coordinator

Monica is 77 years old and was recently diagnosed with Alzheimer’s disease. She is in a Medi-Cal Health Plan. Her doctor asked the Plan to provide a care coordinator. This is someone who helps patients get the services and medicines they need.
You May Qualify for Medicare at Age 65 (or If You Have a Disability)

- If you get Medicare, you can keep your Medi-Cal. Medi-Cal will pay for some services that Medicare does not cover, like skilled nursing home care for chronic conditions.
- To find out if you qualify for Medicare, ask your Medi-Cal eligibility worker or call HICAP at 1-800-434-0222. HICAP counselors can talk to you on the phone or face-to-face. Their services are free. You can also call Medicare at 1-800-633-4227.

Questions and Answers

Are Medi-Cal Health Plans and Medicare Advantage Plans the same?
No. A Medicare Advantage Plan is a different kind of Plan. It is for people with Medicare.

What is a Special Needs Plan for dual eligibles?
Special Needs Plans for dual eligibles serve people who have both Medi-Cal and Medicare. They provide extra services to meet the needs of people with disabilities and seniors. To learn more, call HICAP at 1-800-434-0222, or call Medicare at 1-800-633-4227.

What are PACE programs?
PACE stands for Program of All-inclusive Care for the Elderly. It helps older adults who qualify for nursing homes get care in their own home. For more information, call 1-888-633-7223.

What is a SCAN?
SCAN stands for Senior Care Action Network. It provides services to older adults eligible for both Medi-Cal and Medicare. SCAN is only available in Los Angeles, Riverside, and San Bernardino counties. For more information, call 1-877-452-5898.
If you do not speak English, you can look for doctors who know your language. Or you can have a trained interpreter at your medical appointments. Trained interpreters have learned to translate medical information correctly. Also, they must keep your information private.

**Finding Interpreters and Translated Materials**

- Both kinds of Medi-Cal should provide interpreters. They should also provide forms and directions in your language. However, it may be easier to get these services in a Medi-Cal Health Plan.

- If you are in Regular Medi-Cal, call your doctor before your appointment to ask for an interpreter. Some community clinics offer many language and interpreter services.

- Medi-Cal Health Plans must provide and pay for interpreters for most languages that their members speak. This includes American Sign Language. A Plan might have doctors who speak your language. If it doesn’t, it must pay for an interpreter. A Plan must also provide forms in your language, like health history and consent forms.

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**Sign language services**

Eric is Deaf. He called his Medi-Cal Health Plan using the TTY Relay Service and asked for a trained interpreter to come to his doctor appointments. If Eric had Regular Medi-Cal, he would have to work directly with his doctor’s office to get an interpreter.
Find a doctor who speaks your language

Lan’s mom speaks Chinese. She wanted a doctor who could talk to her in Chinese about Lan’s special health care problems. Both Lan and her mom really like Dr. Chiang.

If you are in a Medi-Cal Health Plan, you can ask the Plan to help you find a doctor who speaks your language.

Questions and Answers

What if I get to my doctor appointment and the interpreter is not there?

Ask for a telephone or video interpreter. Also, make sure that you are on time for your appointments. The interpreter may not wait if you are late.

My doctor’s office will not get an interpreter for me. What can I do?

If you are in a Medi-Cal Health Plan, you can file a complaint with your Plan. See page 32. If you still have a problem, call the Medi-Cal Managed Care Ombudsman at 1-888-452-8609.

When I go to the doctor and my child is with me, the doctor sometimes asks her to interpret for me. Is that OK?

No. The doctor should provide an interpreter so that he can talk to you directly.

Do I need to ask for an interpreter each time I make an appointment?

Ask your doctor to put it in your medical file. However, it’s a good idea to remind the staff each time you make an appointment.

Can I get this guidebook in large print or cassette?

Yes. You can also get it on CD and Braille. Call Health Care Options at 1-800-430-4263.
If you have a disability, you may need one of the following services, called “access services.” Some examples are

- A ramp into the building.
- An exam table that lowers.
- Information in large print, Braille, or audio.
- Longer appointments.
- Experienced staff who can help move you from a wheelchair to the exam table.

In both kinds of Medi-Cal, you have a right to services and support to help you get health care. Your doctor or clinic should help you find these services. If you are in a Medi-Cal Health Plan, the Plan must help you find these services.

Access at the clinic

Rachel wanted to go to a clinic with ramps, wide hallways, and big bathrooms, so that she could get around in her wheelchair. She asked her Medi-Cal Health Plan to find a clinic. They did, and now it is much easier for her to go to her appointments.
Finding the Disability Services You Need

- Talk to your doctor about your needs. Make sure they are listed in your medical chart. Ask your doctor to try to refer you to specialists and labs that you can use.

- Some Medi-Cal Health Plans can give you the names of providers who have the services you need and experience with your disability. You can also ask your Plan for a care coordinator to help you get the services you need.

- Call providers before your first visit and make sure that they can meet your needs.

Equipment at the clinic

Jane asked her Medi-Cal Health Plan to suggest a doctor who had an exam table that could be raised and lowered. Her Plan gave her the names of 2 clinics that might work for her. She called both clinics and found that one had the exam table she needed.

Questions and Answers

I stopped going to my doctor because I can’t get onto his exam table. Will it be any better in a Medi-Cal Health Plan?

It may be better, because your Plan should find you a provider with an exam table you can get onto. Be sure to tell your doctor what you need and remind the clinic before each appointment. If you have a problem, see page 32.

I have diabetes and my vision keeps getting worse. Can I get forms in big print?

Both kinds of Medi-Cal must provide some forms in big print. Examples include medical history and consent forms.

Can I get this guidebook in other formats?

Yes. Call Health Care Options at 1-800-430-4263.
If you have a problem with your Medi-Cal services, try to talk it over with your doctor. If you are in a Medi-Cal Health Plan, talk to your Plan. If this doesn’t work, you can file a complaint.

**If You Are in a Medi-Cal Health Plan**

If you have a problem, you can call your Medi-Cal Health Plan and file a complaint over the phone. If you think your problem is medically urgent, ask for an expedited appeal. This means that your complaint is handled quickly.

- Every Plan has a customer service office to help people.
- If you have a problem, you can get more help in a Plan than in Regular Medi-Cal.
- If you are not satisfied with your Plan’s response, you can call the **Medi-Cal Managed Care Ombudsman** at 1-888-452-8609. Call between 8 am and 5 pm. Your call is free and help is offered in many languages. They can help you talk to your plan and get a State Hearing, if you need one.
- You can also call the state’s health plan **Help Center** at 1-888-466-2219. They can help you file a complaint or ask for an Independent Medical Review. This is a review of your problem by one or more doctors who are not in your Plan. Your Plan must do what these doctors decide.
Ask for a Medi-Cal State Hearing in Both Kinds of Medi-Cal

With both kinds of Medi-Cal, you can ask for a Medi-Cal State Hearing. You can ask for this hearing if Medi-Cal denies, reduces, or stops a service. This hearing is a review of your problem by the State. Call Medi-Cal State Hearing at 1-800-952-5253.

If Medi-Cal reduces or stops a service you are getting and you ask for a State Hearing, Medi-Cal will continue to pay for the service until the State Hearing is done.

If you have a problem with your Medi-Cal Health Services

Emilia’s Plan would not pay for a treatment that her doctor recommended. She called her Plan and was able to solve the problem over the phone. If Emilia had not solved the problem, she could have filed a formal complaint over the phone.

Questions and Answers

I cannot get the health care service I need. Is there anyone I can talk to?

First, talk to your doctor. If you are in a Medi-Cal Health Plan, call the Plan’s customer service number on your membership card. In both kinds of Medi-Cal, you can also ask for a Medi-Cal State Hearing by calling 1-800-952-5253. You can also call one of the community groups on page 38 for help.

Can I complain if I think I received poor care or could not get an appointment soon enough?

Yes. You can complain if you have any problem related to care or service.
The questions below can help you decide which kind of Medi-Cal is right for you. Check the questions that are important to you.

**Ask for More Information**

To help decide which kind of Medi-Cal would be best for you, ask for more information.

☐ Do you have a doctor or other provider you like?
   Ask them which kinds of Medi-Cal they take.

☐ Do you take any prescription drugs?
   Ask the Medi-Cal Health Plans in your county if your drugs are on their preferred lists.

☐ If you have a disability, do you know providers with accessible offices and equipment?
   Ask them which kinds of Medi-Cal they take.

☐ Do you want to compare Medi-Cal Health Plans in your county?
   Call **Health Care Options** at **1-800-430-4263**.
   Or look at your county-specific information, beginning on page 39.

☐ Do you want to learn more about the laws that all Medi-Cal Health Plans must follow?
   Call the state’s health plan **Help Center** at **1-888-466-2219** or go to www.dmhc.ca.gov. The Help Center is open 24 hours a day, every day, and offers free help in many languages. It is part of the California Department of Managed Health Care (DMHC), which makes sure that health plans follow California laws.
This list can help you decide which kind of Medi-Cal is right for you. Check the reasons that are true for you.

**Reasons to Stay in Regular Medi-Cal**
- I am going to move out of my county soon.
- I have a doctor I like and she is not in a Medi-Cal Health Plan.
- I have other providers I like and they are not in a Medi-Cal Health Plan.
- I prefer to find specialists on my own.
- I am in a nursing home.

**Reasons to Enroll in a Medi-Cal Health Plan**
- I want help finding doctors, specialists, and other providers.
- I want a list of doctors and other providers I can go to.
- I want help getting interpreters and information in my language.
- I want help finding care that is accessible to me.
- I want help if I need to file a complaint or an appeal.
- I want help coordinating my care.
How to Enroll in a Medi-Cal Health Plan

To enroll in a Medi-Cal Health Plan, call Health Care Options at 1-800-430-4263. You can enroll over the phone or you can ask for an enrollment form.

1. If you need help filling out the form, call Health Care Options. You can also ask if Health Care Options will be giving a presentation in your area so that you can learn more.

2. When you fill out the form, you must choose a Medi-Cal Health Plan. If you want, you can also choose your primary care doctor by using the Provider Directories. (If you do not choose a doctor, the Plan will choose one for you. You can change your doctor later, if you want.)

3. Mail the form back to Health Care Options.

4. In 15 to 45 days, your new Medi-Cal Health Plan will send you a membership card and a list of all the providers in the Plan. Make sure to keep your white Medi-Cal card, too. You will need it for some services.

5. Use Regular Medi-Cal providers until you get your new Plan membership card.
How to Leave or Change Your Medi-Cal Health Plan

Returning to Regular Medi-Cal is called disenrolling. To disenroll, ask Health Care Options (1-800-430-4263). You can disenroll over the phone, or you can ask them to send you a disenrollment form.

To change to a different Medi-Cal Health Plan, ask Health Care Options (1-800-430-4263) to mail you a Medi-Cal Choice Form. Or, you can change over the phone.

Questions and Answers

Do I still have Medi-Cal while I am waiting for my enrollment in a Medi-Cal Health Plan to be complete?

Yes. You should still use your white Regular Medi-Cal card and your same providers until you receive a membership card for your Medi-Cal Health Plan.

Does it cost me anything to change?

No, it does not cost you anything to change from Regular Medi-Cal to a Medi-Cal Health Plan. If you decide to change back to Regular Medi-Cal, that will not cost you anything either.

Can I change the kind of Medi-Cal I have at any time of the year?

Yes, you can change the kind of Medi-Cal you have at any time.

Enrolling in a Medi-Cal Health Plan

Kiran was in Regular Medi-Cal. After she read this guidebook, she wanted to change to one of the Medi-Cal Health Plans in her county. Kiran called Health Care Options, and they sent her an enrollment packet. She filled it out and mailed it in. In less than 45 days, she got her membership card for her new Plan. Kiran did not have to pay anything to do this. Kiran could have changed over the phone with Health Care Options, but she wanted to fill out the paperwork herself.
### Government Resources

<table>
<thead>
<tr>
<th><strong>Department of Managed Health Care (DMHC) Help Center</strong></th>
<th><strong>Medi-Cal State Hearing</strong></th>
</tr>
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<tbody>
<tr>
<td>Help if your Medi-Cal Health Plan denies the services you need.</td>
<td>This is where you file an appeal if Regular Medi-Cal or your Medi-Cal Health Plan denies the services you need.</td>
</tr>
</tbody>
</table>
| 1-888-466-2219  
TTY: 1-877-688-9891  
www.dmhc.ca.gov | 1-800-952-5253  
TTY: 1-800-952-8349 |

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<tr>
<th><strong>Medi-Cal Managed Care Ombudsman</strong></th>
<th><strong>Denti-Cal</strong></th>
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<tr>
<td>Help if you have a problem you cannot solve with your Medi-Cal Health Plan.</td>
<td>Dental services for people with Medi-Cal under age 21.</td>
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| 1-888-452-8609 | 1-800-322-6384  
TTY: 1-800-735-2922 |

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<tr>
<th><strong>Medi-Cal Mental Health Care Ombudsman</strong></th>
<th><strong>Medicare</strong></th>
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<tr>
<td>Help with Medi-Cal mental health care services.</td>
<td>The national Medicare number and website.</td>
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| 1-800-896-4042  
TTY: 1-800-896-2512 | 1-800-633-4227  
TTY: 1-877-486-2048  
www.medicare.gov |

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<tr>
<th><strong>Health Care Options</strong></th>
<th><strong>Legal Aid</strong></th>
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<tbody>
<tr>
<td>Information and help to enroll in, change, or leave a Medi-Cal Health Plan.</td>
<td>Legal aid programs often provide assistance with Medi-Cal problems.</td>
</tr>
</tbody>
</table>
| 1-800-430-4263  
TTY: 1-800-430-7077  
www.healthcareoptions.dhcs.ca.gov | 1-800-551-5554 |

### Community Groups that Can Help You

| **Health Consumer Alliance** | Consumer assistance for 13 California counties.  
www.healthconsumer.org |
|-----------------------------|--------------------------------------------------|

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<tr>
<th><strong>HICAP (Health Insurance Counseling &amp; Advocacy Program)</strong></th>
<th>Free help for people with Medicare, or people with both Medicare and Medi-Cal. Call for telephone help or to set up a free face-to-face meeting with a HICAP counselor.</th>
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|                                                           | 1-800-434-0222  
www.calmedicare.org |

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<td>1-800-551-5554</td>
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<tr>
<th><strong>Protection &amp; Advocacy, Inc.</strong></th>
<th>Free information and advice on Medi-Cal rights for children and adults with disabilities.</th>
</tr>
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</table>
|                                  | 1-800-776-5746  
TTY: 1-800-649-0154 |
To the reader

We wrote this guidebook to help you learn more about your Medi-Cal choices. Please remember that Medi-Cal information changes often. Information in this guidebook may become out of date or incorrect. To learn more about a Medi-Cal Health Plan, please talk to a representative from that Plan. For medical advice, talk to your health care provider. For legal advice, talk to lawyers and advocates. The California Department of Health Care Services and the developers and the advisors for this guidebook cannot be held responsible for any direct or indirect damages that result from using this guidebook or any information in it.

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- Our advisory group members, who were generous with their expertise and shared their commitment to Medi-Cal beneficiaries throughout California.

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This guidebook was developed by Health Research for Action at the University of California, Berkeley, for the California Department of Health Care Services. For more information about Health Research for Action, please contact:

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