COVID-19 Update: How to Get Your Medi-Cal Services

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Here are some changes to Medi-Cal services during the COVID-19 emergency.

**Medi-Cal COVID-19 Testing**

COVID-19 testing is free for all people who get Medi-Cal.\(^i\) In fact, all healthcare insurance is required to pay for COVID-19 testing.\(^ii\) Californians should not have to pay even if they receive testing and screening at emergency rooms or urgent care.

This means that:
- You should not pay out-of-pocket for any COVID-19 testing.
- Your healthcare provider does not need to wait for approval from Medi-Cal to test for COVID-19.

You can find more information about COVID-19 testing from your county public health department: https://www.cdph.ca.gov/Pages/LocalHealthServicesAndOffices.aspx.

**Medi-Cal COVID-19 Treatment**
Fee-for-service Medi-Cal pays for COVID-19 treatment. All Medi-Cal managed care plans have to give free care to people who need COVID-19 treatment.

This means that:
- Medi-Cal or your Medi-Cal plan does not need to wait for approval for services related to COVID-19 treatment.

Another program called Presumptive Eligibility for COVID-19 (PE for COVID-19) is available for California residents who have no insurance, currently have private insurance that does not cover diagnostic testing, testing-related services, and treatment service for COVID-19, and who are not otherwise eligible for Medi-Cal. Examples of people who are not eligible for Medi-Cal include people who have incomes that are too high for Medi-Cal or are not eligible for Medi-Cal due to immigration status. PE for COVID-19 is not considered a public charge for immigration purposes. PE for COVID-19 is short-term coverage that ends on the last day of the following month. This program is only offered in some hospitals. For information on qualified PE for COVID-19 hospitals, you can call (800) 541-5555, Monday - Friday, 8:00 A.M. to 5:00 P.M or review the “HPE Provider Lists” located at the bottom of the webpage: https://www.dhcs.ca.gov/services/medi-cal/eligibility/Pages/HospitalPE.aspx.

Changes to Medi-Cal Services Because of COVID-19


Medi-Cal is giving additional services to people who receive Medi-Cal due to the COVID-19 public health emergency.
Changes to your Medi-Cal benefits

During this emergency, the state will continue all Medi-Cal coverage until the end of the COVID-19 public health emergency. Counties must ensure people keep their Medi-Cal. This means, Counties should not terminate or decrease your Medi-Cal benefits.

If your Medi-Cal benefits terminated or decreased after April 1, 2020, then you should call your County to request that your Medi-Cal be reinstated back to April 1, 2020. For this request, Counties should not require you to submit additional documents, verifications and/or information to reinstate your benefits. Counties must prioritize these requests to reinstate Medi-Cal benefits that have been terminated or decreased. In addition, you may flag the county’s erroneous decrease or termination of Medi-Cal benefits for the Department of Health Care Services (DHCS) by sending an email to dhscfs@dhcs.ca.gov. In the initial email to DHCS, do not share your personal and confidential information. Instead, ask DHCS to send you an encrypted email response so you can share your specific confidential information.

Medi-Cal Redeterminations

If you received a Medi-Cal renewal packet after March 17, 2020, and you choose to send your renewal information, then your county worker might not process it right away.

However, if your renewal information would result in a beneficial Medi-Cal action or an increase in Medi-Cal benefits, then the County should prioritize processing your information. For example, the county should prioritize processing information that would: move a person from Medi-Cal with a Share of Cost to Medi-Cal with no Share of Cost; move a person from restricted-scope Medi-Cal to full-scope Medi-Cal, etc.

If the information provided would result in a negative Medi-Cal action, then the negative action will be suspended until the COVID-19 public health emergency ends. Again, this is because counties cannot terminate or decrease your Medi-Cal benefits during the COVID-19 public health emergency.

Toll-Free Phone-Lines
Nurse phone line: The toll-free phone line is called the “Medi-Nurse” line. It is for Medi-Cal patients without a health plan (fee for service) and uninsured Californians. The “Medi-Nurse” line is 1-877-409-9052. It is available 24 hours a day for 7 days a week for COVID-19 concerns or for general medical issues.

Phone lines to call if you cannot reach your doctor: Some doctor’s offices in your area may be closed for now due to the COVID-19 PHE.

- If you are in a managed care plan, call your health plan to find out your choices. Your health plan can help you find the best way to get medical care. If you need more help, call the DHCS Ombudsman, Monday through Friday, 8 a.m. to 5 p.m. at 1-888-452-8609.
- If you get services in fee-for-service Medi-Cal and are not in a Medi-Cal health plan, you can get help to find a Medi-Cal provider. Call the DHCS COVID Line at 1-877-409-9052.

Durable Medical Equipment (DME)

Medi-Cal will replace DME that is lost, damaged or unusable due to COVID-19. DME are items such as braces and wheelchairs. Medi-Cal is not requiring a face-to-face meeting, a new doctor’s order, or new medical necessity documentation to replace DME due to COVID-19 during this emergency. xviii

Telehealth

Medi-Cal is expanding telehealth coverage. xix Telehealth helps people get services from their doctors without having to travel. Telehealth services include outpatient care, preventive services, ambulance services, and durable medical equipment like wheelchairs.xx Call your doctor or Medi-Cal managed care plan for information on telehealth.

Virtual Communication

Medi-Cal is expanding virtual communication. xxi Virtual communication allows you to speak with your healthcare providers without needing a face-to-face visit. This includes visits with doctors, therapists, and specialists. Call your doctor or Medi-Cal plan for information on virtual communications.

Behavioral Health
Associate Clinical Social Worker (ACSW) and Associate Marriage and Family Therapist (AMFT) services are temporarily available to help Medi-Cal beneficiaries with behavioral health at Federally Qualified Health Centers (FQHCs) and Rural Health Clinics (RHCs).

**Dental**

If you have dental pain or a dental emergency, call your dentist’s office. If you do not have a dentist or your dental office is closed or cannot see you, call the Medi-Cal Dental Telephone Service Center. They can help you find a dentist. Their number is 1-800-322-6384.

**Transportation**

Medi-Cal still pays for Non-Medical Transportation (NMT) and Non-Emergency Medical Transportation (NEMT).

Medi-Cal provides help with transportation during the COVID-19 emergency. This includes paying for rides to the hospital and appointments for testing or treatment in some situations.

Medi-Cal may pay for private or public transportation if you show you cannot travel without help. This could include a taxi. This is called Non-Medical Transportation.

You can get Non-Medical Transportation by:

- Calling your Medi-Cal plan and telling them you can’t get to your medical appointment without help.
- Calling your county Medi-Cal office to see if they can help you find NMT providers.
- Calling your Medi-Cal provider and ask about a transportation provider in your area.
- You can find providers here: [http://dhcs.ca.gov/mymedi-cal](http://dhcs.ca.gov/mymedi-cal).

In some cases, you may not be able to travel using normal public or private transportation. Medi-Cal may pay for medical transportation, such as an ambulance or wheelchair van. You must get your doctor to submit a Treatment Authorization Request (TAR) saying you need medical transportation. This is called Non-Emergency Medical Transportation.
You can get Non-Emergency Medical Transportation by:

- Calling your Medi-Cal plan. Normally, you would need a prescription from your doctor about your need for NEMT; however, this is not needed during the COVID-19 emergency.\textsuperscript{xviii} Instead, the doctor needs to submit a TAR for NEMT and write “Patient impacted by COVID-19” in the “Miscellaneous Information” field.\textsuperscript{xxiv}
- Calling the medical provider who prescribed NEMT. The prescribing provider will put you in touch with a transportation provider to coordinate your ride to and from your appointment(s).

See here for more information about Medi-Cal covered transportation: [https://www.disabilityrightsca.org/publications/transportation-services-for-medi-cal-recipients](https://www.disabilityrightsca.org/publications/transportation-services-for-medi-cal-recipients)

**Community Based Adult Services (CBAS) Centers**

During the emergency, CBAS providers are required to conduct a COVID-19 wellness check and risk assessment for COVID-19 at least once a week, with greater frequency as needed.\textsuperscript{xxv}

CBAS centers are reducing day center activities. CBAS centers are only offering individual activities.\textsuperscript{xxvi} Individual activities may include one person coming to the center to pick up supplies, meals, or get help with a shower. CBAS centers can help with home delivered meals, food items, hygiene products, medical supplies and transportation.\textsuperscript{xxvii}

CBAS Centers can give you services at your house, by phone, or video conferencing.\textsuperscript{xxviii} CBAS at home may include nursing services and therapy.

If you have a Medi-Cal plan, then your Medi-Cal plan may conduct the CBAS eligibility determination by phone.\textsuperscript{xxix} If you already have CBAS through your Medi-Cal plan then the plan may extend CBAS eligibility re-determinations for up to 12 months.\textsuperscript{xxx}

**In-Home Support Services (IHSS)**
IHSS helps people stay safe in their own homes. For more information on IHSS you can go here: https://www.disabilityrightsca.org/publications/in-home-supportive-services-ihss.

If you need more services, you should call your county now. For more information about IHSS and COVID-19, see our fact sheet (https://www.disabilityrightsca.org/post/coronavirus-rights-of-people-who-get-ihss-and-caregivers).

**Long-Term Care and Assisted Living Facilities**

If you live in a long-term care or assisted living facility, you should be able to keep your COVID-19 stimulus payment or economic impact payment. This stimulus payment is a tax credit which means long-term care and assisted living facilities should not be taking that money from you, even if you get Medi-Cal.xxxi

**Medi-Cal State Fair Hearings**

The state will continue to have hearings. Specifically, individuals for whom the 90-day deadline would have occurred between March 1, 2020, through the end of the COVID-19 public health emergency, are now allowed up to an additional 120 days to request a State Fair Hearing. xxxii This means that you have the initial 90-days from the date of your Notice of Action to request a hearing, plus an additional 120 days, for a total of up to 210 days.

If you filed an appeal with your Medi-Cal Managed Care Plan, then you have 240 days from the date of the Plan’s Notice of Appeal Resolution (NAR) to request a Medi-Cal State Fair Hearing.xxxiii

Hearings will be only by phone until further notice.xxxiv If you have requested an in-person hearing, then the State Hearings Division will contact you to inform you that they will be scheduling your hearing via video-conference or tele-conference.xxxv When the state contacts you, if you can require an in-person hearing due to your disability then let the state representative know that you need an in-person hearing as a reasonable accommodation due to your disability.
If you have already gone to hearing and you receive a negative hearing decision, then the County will delay the negative action, as a result of a fair hearing decision, through the duration of the COVID-19 public health emergency.\textsuperscript{xxxvi}

We want to hear from you! Please complete the following survey about our publications and let us know how we are doing!

Click here to complete the DRC Publication Survey Form.

To request assistance, you can call 800-776-5746 or complete a request for assistance form. Click here to fill out the DRC Intake/Assistance Questionnaire.

Disability Rights California is funded by a variety of sources, for a complete list of funders, click here for the DRC website Grants and Contracts page.

\textsuperscript{i} http://files.medi-cal.ca.gov/pubsdoco/newsroom/newsroom_30339.asp?utm_source=iContact&utm_medium=email&utm_campaign=medi-cal-newsflash&utm_content=30339
\textsuperscript{ii} https://www.cdph.ca.gov/Programs/OPA/Pages/NR20-012.aspx
\textsuperscript{iii} https://www.dhcs.ca.gov/Documents/COVID-19/COVID-19_Medical_Services_and_Telehealth_Notice.pdf
\textsuperscript{v} https://www.dhcs.ca.gov/Documents/COVID-19/COVID-19-Emergency-Services.pdf,
\textsuperscript{ix} Any beneficiaries in areas affected by public health crises or disasters that were discontinued due to not providing required documents may have their benefits reinstated to the previous benefit level and be allowed additional time to provide required documents., https://www.gov.ca.gov/wp-content/uploads/2020/03/3.17.20-N-29-20-EO.pdf, MEDIL 20-14, MEDIL 20-15
\textsuperscript{x} MEDIL 20-07, MEDIL 20-08, ACWDL 19-01 at p. 3, MEDIL 20-14, MEDIL 20-15
\textsuperscript{xi} MEDIL 20-07, MEDIL 20-08, MEDIL 20-14, MEDIL 20-15
\textsuperscript{xii} MEDIL 20-25, MEDIL 20-26
\textsuperscript{xiii} MEDIL 20-07, MEDIL 20-14, MEDIL 20-15
\textsuperscript{xiv} https://www.dhcs.ca.gov/Documents/Beneficiary-Outreach-Letter.pdf
\textsuperscript{xv} https://www.dhcs.ca.gov/Documents/Beneficiary-Outreach-Letter.pdf
\textsuperscript{xvi} MEDIL 20-25, MEDIL 20-26
\textsuperscript{xvii} MEDIL 20-07, MEDIL 20-08, MEDIL 20-14, MEDIL 20-15