What is Medi-Cal?

Medi-Cal is a public health insurance program that offers eligible individuals and families access to free or low-cost health care coverage. Medi-Cal is supported by federal and state taxes. Medi-Cal is administered by the County Social Services Agencies.

How do I apply for Medi-Cal?

- You can apply online at https://www.mybenefitscalwin.org/ or http://www.coveredca.com/

- Apply over the phone or in person
  Toll Free (855) 355-5757
  1440 Harrison Street or 1235 Mission Street
  San Francisco, CA 94103
  Monday - Friday from 8:00 a.m. to 5:00 p.m.

- You can also submit your application via mail, email, or fax
  Human Services Agency
  PO BOX 7988
  San Francisco, CA 94120
  SFMedi-Cal@sfgov.org
  Fax: 415-558-2324

What happens when an application is submitted?

Once your application is received and assessed for eligibility, you will receive a Notice of Action listing the eligibility of each individual in your household. If additional information is required to make a determination, a worker may contact you by mail or phone to request the needed information.

If we find that you are not eligible for Medi-Cal, and you have given us consent, your application will be also evaluated for the following programs:

- **Covered California** is where Californians can get brand-name health insurance under the Patient Protection and Affordable Care Act and see if they qualify for financial subsidies from the federal government to help them pay their monthly premiums.

- **Healthy Kids** is a health insurance program for children who can't get other publicly funded insurance programs. The County Children's Health Initiative Program, also called CCHIP, is a part of the Healthy Kids program in San Francisco. You may qualify if you are not eligible for no-cost Medi-Cal, meet income requirements, and are under 19 years of age.

- **Medi-Cal Access Program (MCAP)** is for middle-income pregnant women who do not have health insurance and whose income is too high for no-cost Medi-Cal. MCAP is also available to women who have other health insurance plans that doesn't cover maternity services or with a maternity-only deductible or copayment greater than $500.

What is retroactive Medi-Cal and who can apply?

Retroactive Medi-Cal covers unpaid medical expenses from the three months prior to the month you apply for Medi-Cal. If you have unpaid bills from the three previous months, enter that information during the application process. If you qualify for Medi-Cal, you will also be evaluated for retroactive coverage. You will have to provide some basic information about the past months to qualify; a Medi-Cal representative will contact you and explain the process.

What if I have other health coverage, can I still apply for Medi-Cal?

Yes. Your health plan or HMO will be billed for services it covers. Medi-Cal will be billed for services your health plan does not cover.

Do I have to be a U.S. citizen to get Medi-Cal?

No. U.S. Citizenship and immigration status is not a condition of eligibility. Assuming all eligibility requirements are met, U.S. citizens, and individuals with Satisfactory Immigration status are entitled to receive full scope Medi-Cal benefits. Undocumented eligible adults will have access to Emergency and Pregnancy related services.

Note! All eligible children (up to 19 yo.) are entitled to receive full scope Medi-Cal benefits, regardless of immigration status.

How can I send additional verifications for pending applications?

Verifications can be submitted via:

- Mail to
  Medi-Cal
  P.O. Box 7988
  San Francisco, CA 94120-9939
- E-Fax to (415) 558-2324
- E-mail scanned documents to: SFMedi-Cal@sfgov.org
- In-person at one of SFBenefits Net service centers
    - 1440 Harrison St. Service Center (between 11th and 10th Streets)
    - 1235 Mission St. Service Center (between 8th and 9th Streets)

Can you help me choose a Medi-Cal Managed Care Plan?

To enroll in a Medi-Cal Managed Care Plan, you must have active Medi-Cal benefits. **Health Care Options can assist you with the selection of Anthem Blue Cross or San Francisco Health Plan.**

- By Phone: (800) 430-4263
- In-person:
    - 1235 Mission St: Monday to Wednesday 8:00am – 4:30pm / Friday 8:00am -12:00pm
    - 1440 Harrison St: Monday to Friday 8:30am – 4:30pm
    - 170 Otis St: Monday to Friday 8:00am – 4:30pm

How long will it take to receive my Medi-Cal card?

Each Medi-Cal card is processed and issued from Sacramento, California. **It normally takes 7-10 business days to process and mail.**

Does my Medi-Cal card Expire?

No, your Medi-Cal card will not expire. However, you must comply with the Annual Redetermination process and/or request for information for your case to remain in good standing. Noncompliance may result in termination of benefits. If you have an old Medi-Cal card, ask us if it's active.

Are dental and vision covered by Medi-Cal?

Yes, some dental and vision services are covered under Medi-Cal. For more information, please contact:

Denti-Cal (800) 322-6384 ww.denti-cal.ca.gov

Vision- please contact your Managed Care Plan

- San Francisco Health Plan (415) 547-7800 / (800) 288-5555
- Anthem Blue Cross (800) 224-0336

Medi-Cal Beneficiary Call Line: (800) 541-5555