



Medi-Cal Frequently Asked Questions

1. 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 county social services agencies.

2. How do I apply for Medi-Cal?

You can apply in one of these ways:

- **Online:** mybenefitscalwin.org
- **Call:** (855) 355-5757
- **In person:** 1440 Harrison Street or 1235 Mission Street, Monday–Friday, 8:00 a.m. to 5:00 p.m.
- **Fax:** (415) 355-2432
- **Mail** to San Francisco Human Services Agency, P.O. Box 7988, San Francisco, CA 94120

3. What happens after I submit an application?

You will receive a Notice of Action listing the eligibility of each individual in your household. We may contact you by mail or phone to request more information.

If you are not eligible for Medi-Cal, we can evaluate you for other health coverage programs:

- **Covered California** is available through the Patient Protection and Affordable Care Act. If you qualify, you can get financial subsidies from the federal and state government to help you pay your monthly insurance premiums.
- **Healthy Kids** is for children under 19 years old who do not qualify for other no-cost government-funded insurance programs. The County Children’s Health Initiative Program (CCHIP) is a part of the Healthy Kids program in San Francisco.
- **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 do not cover maternity services or with a maternity-only deductible or copayment greater than \$500.

4. If I get Medi-Cal will it pay for my unpaid medical bills?

“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 to explain the process.

5. 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 Medi-Cal covered services that your health plan does not cover.

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

No. Immigration status does not determine eligibility for Medi-Cal. If you're between the ages of 26 and 49 years old, your immigration status will only be used to determine the type of Medi-Cal you receive.

To receive full scope Medi-Cal you must have "Satisfactory" immigration status, if you're in the 26 to 49 years old age group. If you are an eligible undocumented adult between 26 and 49 years old, you will receive "Restricted" Medi-Cal, which covers Emergency and Pregnancy services only.

All eligible individuals under the age of 26 and older than 50 are entitled to full-scope Medi-Cal benefits, regardless of immigration status.

For questions about public benefits and your immigration status, call Bay Area Legal Aid's Legal Advice Line at (800) 551-5554

7. How can I send additional verifications for pending applications?

Verifications can be submitted in one of these ways:

- **Mail:** Medi-Cal, P.O. Box 7988, San Francisco, CA 94120-9939
- **E-Fax:** (415) 355-2432
- **Email:** Send scanned documents to SFMedi-Cal@sfgov.org
- **In-person:** Our Service Center at 1440 Harrison Street or 1235 Mission Street

8. 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. We can help you select one of the two plans available to San Franciscans: Anthem Blue Cross or San Francisco Health Plan. Contact us in one of these ways:

- **Call:** (800) 430-4263
- **In-person:** At a SFHSA Service Center:
 - **1235 Mission Street:** Monday to Wednesday, 8:00 a.m. to 4:30 p.m. | Friday, 8:00 a.m. to 12:00 p.m.
 - **1440 Harrison Street:** Thursday, 8:00 a.m. to 4:30 p.m. | Friday, 1:00 to 4:30 p.m.
 - **170 Otis Street:** Monday to Friday, 8:00 a.m. to 4:30 p.m.

- **Online** healthcareoptions.dhcs.ca.gov/enroll/online

9. 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.

10. Does my Medi-Cal card expire?

No. Your Medi-Cal card will not expire if you renew your Medi-Cal coverage each year. We will notify you of the date and requirements for your next renewal process. Noncompliance may result in termination of benefits. If you have an old Medi-Cal card, ask us if it is active.

11. Are dental and vision covered by Medi-Cal?

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

- **Denti-Cal:** (800) 322-6384, website www.denti-cal.ca.gov
- **Vision:** Contact your Managed Care Plan
 - San Francisco Health Plan, (415) 547-7800 or (800) 288-5555
 - Anthem Blue Cross, (800) 407-4627
- **Medi-Cal Beneficiary Call Line:** (800) 541-5555

About this FAQ

This FAQ provides general guidance only and is not meant to substitute for legal advice.