



Dear

**This letter includes important information about your health coverage**

Thank you for sending us the renewal forms and information we asked for. We used that information, as well as state and federal data, to see what health coverage you and each member of your family can get, including:

- MAGI Medi-Cal (Modified Adjusted Gross Income) which is the new Medi-Cal program based on tax rules;
- Other Medi-Cal programs, such as Medically Indigent, Medically Needy, and programs for people with disabilities; and
- Covered California private health insurance.

**We are sending you this letter because you or someone in your family is not eligible for MAGI Medi-Cal. You may be eligible for other Medi-Cal programs and/or Covered California private health insurance with tax credits. To keep health benefits without a break in coverage, you must complete the last page of this form by**

**This is not a notice terminating your Medi-Cal. If we determine you or your family members are no longer eligible for Medi-Cal after we get any additional information from you, you will get a letter (called a "Notice of Action") telling you, you are no longer eligible. You can still file an appeal at that time if you disagree.**

Below is health coverage information for each person in your home.

You are not eligible for MAGI Medi-Cal. You have **not** lost your Medi-Cal benefits at this time.

You may still be eligible for other Medi-Cal programs – either free Medi-Cal or Medi-Cal with a share of cost. Information about these programs is in the materials with this letter.

You may also be eligible for a tax credit to help buy private insurance through Covered California. See the Covered California section below for information about the help your family can get.

### **What are other Medi-Cal programs?**

The other Medi-Cal programs are not MAGI Medi-Cal. They include the Medically Needy program and Medi-Cal for people with disabilities. See the **“Other Medi-Cal Programs Brochure”** for more information.

### **What are some of the differences between MAGI Medi-Cal and other Medi-Cal programs?**

Other Medi-Cal programs use different rules for counting income and household size than MAGI Medi-Cal. If you are not eligible for MAGI Medi-Cal, you may be eligible for these other Medi-Cal programs. For example, if there is a step-parent with income, a person with disability income, a child with income, or parents that are not married, you may be eligible for free Medi-Cal under these other Medi-Cal programs.

Even if you cannot get free Medi-Cal through these other Medi-Cal programs, you may still be eligible for Medi-Cal with a share of cost.

Under these other Medi-Cal programs, there is a limit on how much property (assets) you can have. This is different from MAGI Medi-Cal.

### **What if I want to see if I am eligible for other Medi-Cal programs?**

You have the right to find out if you can keep Medi-Cal coverage through other Medi-Cal programs.

**If you want us to check if you are eligible, mark the box on Page 3 that says “I want you to check if my family and I are eligible for other Medi-Cal programs”.**

We can only figure out if you are eligible for one of these other Medi-Cal programs, if you send us page 3 with your signature and date, and fill out and send us the last page of this letter and the **“Medi-Cal Income, Deductions, and Property Supplement”** form that we included with this letter. **You must send us this information or you may lose your Medi-Cal eligibility.**

### **What if I am interested in tax credits to buy private insurance through Covered California?**

Covered California offers tax credits to help pay for the cost of health insurance. The tax credits are based on your household income and household size. Covered California offers several health plans that you can choose from.

We can check if you are eligible for Covered California coverage with tax credits. **If you want us to check if you are eligible, mark the box on Page 3 that says “I want you to check if my family and I are eligible for tax credits to help pay for health coverage through Covered California.”** Make sure to sign and date the last page of this letter.

**Can I get Medi-Cal and Covered California coverage?**

Yes. Some people may be eligible for both Medi-Cal with a share of cost and Covered California private insurance with tax credits. You may decide you want us to check if you are eligible for both, other Medi-Cal programs and Covered California. Or, you may just pick one option. Either way, we need to hear your decision for you to continue to receive benefits without a break in coverage.

Medi-Cal covers some services that Covered California insurance does not cover such as Long Term Care services.

**What Must I Do Now?**

1. To keep health benefits without a break in coverage, you must select one or both of the two options below.

I want you to check if my family and I are eligible for other Medi-Cal programs. I have filled out the **“Medi-Cal Income, Deductions, and Property Supplement”** form. I am sending both forms to you in the envelope included.

I want you to check if my family and I are eligible for tax credits to help pay for health insurance through Covered California.

2. You must send this form and any required documents in the envelope included by to continue your health benefits.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If you do not answer this letter, you will get a Notice of Action (NOA) and your current Medi-Cal benefits will end on

You will have the right to appeal the action. You can keep your Medi-Cal while you appeal if you appeal before your benefits end.

**You have the right to ask for and receive translated materials and interpreter services in your language. The State will provide a free language interpreter including American Sign Language if you ask. Call \_\_\_\_\_ for more information.**