

## Medi-Cal

You have the right to ask for a fair hearing. (see page 62, "Hearings and Complaints.") While waiting for a state hearing, the HMO must continue to provide medical services to you.

- Pregnancy and abortion
- Family planning
- Outpatient mental health (not overnight in a hospital)
- Sexual abuse.

If you are under 21 and living with your parents, or temporarily away such as in school, you may apply for Medi-Cal to cover those specific services without your parents' consent or knowledge.

Your parents won't be required to give information about their income or resources or pay toward the medical services, unless you want Medi-Cal for services other than those listed above.

The DPSS won't tell your parents or send Medi-Cal mailings to your home without your permission. "Minor Consent Services" are available regardless of your immigration status. They provide more services than Medi-Cal that is restricted due to immigration status.

To apply, fill out the regular Medi-Cal application and another short form for Minor Consent Services at DPSS or with an Eligibility Worker at the site where you are receiving care. You will have to fill out a new short form each month you need treatment, except for mental health services. For that, you need a letter from a mental health professional explaining that you meet certain conditions for getting mental health services and how long you will need treatment. You will still have to complete the short form each month to update your eligibility.

If you already get Medi-Cal through your parents' case, you may already have a plastic Medi-Cal card. But don't use the plastic card for Minor Consent services.

## 8. Medi-Cal Mental Health Managed Care

Mental Health services for Medi-Cal recipients are also provided through a managed care system operated through "Local Mental Health Plans" in each county. For further discussion of these services (see page 51 "Mental Health..Services.")

### MEDI-CAL FOR TEENS

If you are between 12 and 21 years old, you can apply for "Minor Consent Services" to get free and confidential medical treatment without parental consent related to:

- Drug or alcohol abuse (except methadone treatment)
- Sexually transmitted diseases

# Health Care for Children

## HEALTHY FAMILIES PROGRAM

Healthy Families is a program that provides low-cost health insurance for many low-income children. With Healthy Families, a family pays a small amount each month to receive health care for their children.

### 1. Am I Eligible?

To be eligible the applicants must be low-income, uninsured California resident children ages 1 to 19, who are not eligible for free Medi-Cal (Medi-Cal without a "Share of Cost") and who have had no other health insurance. The child must be without employer or private health insurance for at least three months before the application, with some exceptions. The child can obtain three months of retroactive Medi-Cal prior to becoming eligible for Healthy Families, or can be on "Share of Cost" Medi-Cal. Eighteen-year-olds can apply on their own. The child stays eligible for 12 months continuously once it is decided that he or she is eligible, even if the income changes.

### 2. Income Limits

To be eligible for Healthy Families, the monthly income must be between the amounts in the chart below.

Family Size	Age 1-5	Age 6-18
1	\$1,062 - \$1,994	\$799 - \$1,994
2	\$1,423 - \$2,673	\$1,021-\$2,673
3	\$1,785 - \$3,353	\$1,342-\$3,353
4	\$2,146 - \$4,032	\$1,614-\$4,032
5	\$2,507 - \$4,711	\$1,886-\$4,711
6	\$2,869 - \$5,390	\$2,157-\$5,390

Each additional member: +\$680 to the number on the right hand side.

The cost of the items you own ("resources") does not count against you.

### 3. Residency Requirements

You must sign a statement that each person who is applying for Healthy Families intends to stay in California with no plans to leave. Immigrant children can be eligible if they are "qualified" immigrants (see page 58 "Guide for Non Citizens.")

### 4. What Does It Cost?

Depending on your income and which plan you choose, you will pay a premium of \$4 to \$9 per month for each child or starting July 1 of 2005, \$12 to \$15, if your income is slightly higher. However, you will never pay for more than 3 children, either \$27 a month, or \$45, depending on the income group you are in no matter how many children are covered. If a family falls in the higher income group, they will receive a report in the middle of the year to see if their income has dropped and they can pay less. Also, if a family pays three months of premiums in advance, they will get a fourth month of coverage for free. If a family pays 9 months in advance, they get 12 months of coverage. Except for the first month, you can pay your premiums at Rite Aid stores.

There is also a \$5 co-payment for most outpatient services such as doctor's office visits, but not for preventive services like immunizations and dental check-ups. However, there is a "cap" or upper limit for these co-payments of \$250 per family per year, so keep the receipts.

**5. What Are the Benefits?**

The program offers health, dental, mental health, and vision services. You can't get the same amount and kind of services from Healthy Families as you can from Medi-Cal, especially for mental health and substance abuse treatment. If your family is eligible for Medi-Cal with a Share of Cost you may have "Share of Cost" Medi-Cal and Healthy Families at the same time.

**6. How Do I Apply?**

You may get an application form at any DPSS Office, or call (800) 880-5305 for a packet.

**Keeping Healthy Families While Your Child Qualifies for Medi-Cal**

If your child is found to be ineligible for Healthy Families at the annual redetermination (e.g. because your family income goes down) your child should keep Healthy Families coverage for up to 2 months while the information is sent to the county (with your permission) to determine if your child is eligible for no-cost Medi-Cal. This is called the "Bridging Program." You should not be required to apply separately for Medi-Cal or to provide any information again, unless the county needs more information from you to determine eligibility.

**OTHER PROGRAMS**

**1. Healthy Kids and Kaiser Permanente**

Healthy Kids is provided through the LA Care Health Plan for children from birth through age 18 who do not qualify for no-cost Medi-Cal or for Healthy Families.

Family income must be below the limits in the chart below. There are low-cost monthly premiums of \$4 or \$6 and small payments at visits. You only pay for two children monthly no matter how many are enrolled. Call (888) 452-5437 for more information.

Healthy Kids Eligibility	
Family Size	Monthly Income
1	\$2,393
2	\$3,208
3	\$4,023
4	\$4,838
5	\$5,653
6	\$6,468

Children under age 19 with no medical coverage who are not eligible for health care coverage that is paid for, in any part, by an employer and who are not eligible for no-cost Medi-Cal or Healthy Families may be eligible for **Kaiser Permanente Cares for Kids** Child Health Plan. There are no immigration requirements. The monthly cost is \$8 or \$15, and there are some copayment costs for visits. Dental, mental health and vision care are included. The number is (800) 255-5053.

**2. Child Health and Disability Program (CHDP)**

CHDP provides free early and regular health exams for many low-income children up to 19 years of age; Medi-Cal eligible children up to 21 years of age; and Head Start and State preschool children. There are no immigration requirements, however, visits are allowed based on a "periodicity schedule", with some exceptions for physical exams needed for school, for children in foster care and for problems that might occur between screenings. Children in Medi-Cal Managed Care can get more screenings than the state's schedule allows. CHDP offers physical exams, immunizations, vision and hearing testing, lead poisoning testing, nutritional check, teeth and gum check, and some lab tests including sickle cell. For more information call (800) 993-2437.

A new program called the "CHDP Gateway To Health Insurance" allows children who go to a CHDP provider for a health exam or well child check-up to pre-enroll in full no-cost Medi-Cal temporarily if they agree to complete a simple confidential (electronic) application at the provider's office. If your child qualifies for no-cost Medi-Cal after completing the simple application, your child will receive no-cost Medi-Cal temporarily, beginning on the first day of the month that the simple application is submitted and ending the last day of the following month. Also, if you request it on the application, a Joint Medi-Cal/Healthy Families mail-in application will be sent to you automatically. If you apply for Medi-Cal and/or Healthy Families for your child during the Medi-Cal pre-enrollment period, the no cost Medi-

Cal coverage will continue until a final Medi-Cal or Healthy Families determination is made.

Infants under one year of age who are born to a mother on Medi-Cal at the time of birth, and who lived with their mother in the month of birth are eligible for "deemed eligibility" to have full-scope Medi-Cal until their first birthday without filling out the additional Joint Medi-Cal/Healthy Families application.

**3. California Children's Services**

Children's Medical Services (or California Children's Services) case manages and provides health services for children up to age 21 with eligible major conditions caused by accidents, diseases, and congenital or developmental disabilities, whether or not the children also have Medi-Cal. Undocumented children may qualify if their parents live in Los Angeles County. For eligibility information, call (800-288-4584). Service providers are all over the county.

Children enrolled in Healthy Families are automatically eligible, but must be referred and screened for acceptance. Family income must be less than \$40,000 a year, or may be greater if their CCS-related medical expenses are expected.

There is no family income limit for children who need services to confirm a CCS eligible medical condition; or were adopted with a known CCS eligible medical condition; or are applying only for services through the Medical Therapy Program; or are Medi-Cal beneficiaries, full scope, no share of cost; or are Healthy Families subscribers.