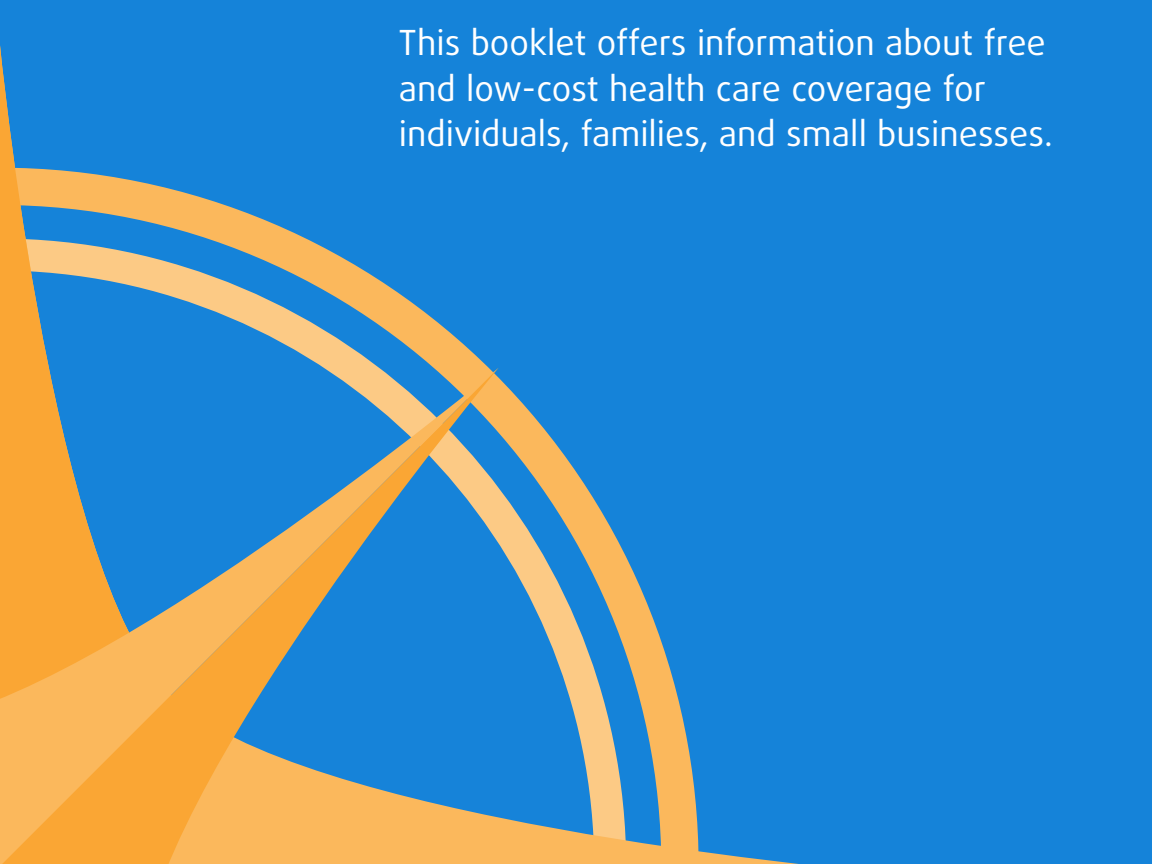


Finding Health Care Coverage in California

This booklet offers information about free and low-cost health care coverage for individuals, families, and small businesses.



Finding Health Care Coverage That Works for You

This booklet can help you, your family, or your employees find free or affordable health care coverage. Options are available to all Californians and are offered through both publicly-sponsored programs or private health care coverage. On the following pages, you will find descriptions of the many options available to you. Regardless of your income, having health care coverage is essential to ensuring your family's health, safety and security. Health coverage connects you and your family to a doctor, and that means you and your children get the care needed to stay healthy.

If you or someone you know is uninsured, please visit our website, www.CoverageForAll.org. There, you will find our 5-question Eligibility Quiz, which will give you a personalized list of health coverage options, complete with program contact and cost information, sign-up checklists of important documents needed to enroll, and application links.

How does the U.S. health care system work?

In the U.S., we have two systems for providing health care: private and public. In the private system, many people get their health insurance from their employer; if you do not have insurance from your employer, you can buy your own plan as an individual or a family.

The public system includes programs for individuals and families who may not be able to afford private health insurance.

Why is health care coverage so important?

Taking care of our health is our responsibility. Even when we're not sick, going to the doctor for regular check-ups can help us stay healthy. If you do become ill, having health care coverage means you will have your own doctor who can help you. It's especially important for children to see a doctor regularly.

Why can't I just go to the emergency room?

Emergency rooms are designed to take care of life-threatening emergencies. Going to the emergency room for your health care can cost 5-10 times more than a visit to a doctor's office. It wastes money and makes health care more expensive for everyone.

What if I can't afford health insurance?

Many people think they can't afford private health insurance – but the fact is, there are many affordable plans. This booklet includes phone numbers you can call to see what plan is best for you. There are also public programs available at low or no-cost if your income qualifies.

Who pays for health care?

Private insurance companies pay the doctors and hospitals when their members need medical care. Our government pays the bills for some people until they can afford to pay for their own health care. You can help keep costs from rising by signing up for a plan, even if you can only afford to pay a small amount. It is important for all of us to have private or public health care coverage.

For what health care programs am I eligible?

Many uninsured people are eligible for public programs, but aren't signed up. Many others are healthy people who don't realize how affordable health insurance can be. This booklet will help you find the plan that's right for you.

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How to Use This Booklet

In this booklet, we discuss some publicly-sponsored health care coverage programs and private insurance options. Use the Income Worksheet on the next page to determine your income. Then, use the Federal Poverty Level (FPL) Income Guidelines Chart on page 4 to determine your eligibility for a publicly-sponsored health care coverage program. Once you know your income percentage from the FPL chart, you can look through this booklet to find programs that may be right for you, your family, or your small business.

The FPL Income Guidelines are used as a “starting point” to help determine eligibility for certain programs. If your income exceeds the FPL Income Guideline limits, you may still be eligible for publicly-sponsored programs. Government programs look at each family’s circumstance individually to determine eligibility. Also, affordable coverage through private insurance companies is available. For more information, visit our website at www.CoverageForAll.org.

Income Worksheet

Use this worksheet to calculate your family or household total income after deductions. Look for the income amount closest to the number in step one within the chart on the opposite page to determine which percentage of the Federal Poverty Level (FPL) you are. Remember this percentage, as it will help you determine for which public programs you are eligible.

Your Monthly Income: + _____

Spouse's Monthly Income: + _____

TOTAL INCOME = _____

Please fill in the following information, separate from amount that you just calculated:

Begin with \$0. For each working parent in the household, add \$90. + _____

If you pay for childcare for children **under** the age of 2, add \$200 for each child. + _____

If you pay for childcare for children **over** the age of 2, or for a child with disabilities, add \$175 for each child. + _____

If you receive child support, add \$50 for each child. + _____

If you pay alimony and/or child support, enter the amount. + _____

TOTAL DEDUCTIONS = _____

Now, subtract your Total Deductions from your Total Income.

TOTAL INCOME _____

TOTAL DEDUCTIONS - _____

TOTAL INCOME AFTER DEDUCTIONS = _____

Find an amount closest to this total within the chart on the opposite page to determine your Federal Poverty Level (FPL) percentage.

Note: This income worksheet is only intended to serve as a guide. Some factors in determining your eligibility may not be represented above. Deductions listed here are typical for most public programs, but may vary by agency.

Federal Poverty Level (FPL) Income Guidelines

To use the income chart below, start by finding the number of family members in your household. Next, use your total income after deductions (see page 3) to figure out which percentage applies to you. Your monthly income can be up to the dollar amount shown below.

Remember this percentage when you are looking at the plans in this booklet.

Your Federal Poverty Level (FPL) Based on monthly family gross income							
Family Size (Household)	100%	133%	175%	200%	250%	300%	400%
1	\$931	\$1,238	\$1,629	\$1,862	\$2,327	\$2,793	\$3,723
2	\$1,261	\$1,677	\$2,206	\$2,522	\$3,152	\$3,783	\$5,043
3	\$1,591	\$2,116	\$2,784	\$3,182	\$3,977	\$4,773	\$6,363
4	\$1,921	\$2,555	\$3,361	\$3,842	\$4,802	\$5,763	\$7,683
5	\$2,251	\$2,994	\$3,939	\$4,502	\$5,627	\$6,753	\$9,003
6	\$2,581	\$3,433	\$4,516	\$5,162	\$6,452	\$7,743	\$10,323
7	\$2,911	\$3,871	\$5,094	\$5,822	\$7,277	\$8,733	\$11,643
8	\$3,241	\$4,310	\$5,671	\$6,482	\$8,102	\$9,723	\$12,963
Based on yearly family gross income							
1	\$11,170	\$14,856	\$19,548	\$22,340	\$27,925	\$33,510	\$44,680
2	\$15,130	\$20,123	\$26,478	\$30,260	\$37,825	\$45,390	\$60,520
3	\$19,090	\$25,390	\$33,408	\$38,180	\$47,725	\$57,270	\$76,360
4	\$23,050	\$30,657	\$40,338	\$46,100	\$57,625	\$69,150	\$92,200
5	\$27,010	\$35,923	\$47,268	\$54,020	\$67,525	\$81,030	\$108,040
6	\$30,970	\$41,190	\$54,198	\$61,940	\$77,425	\$92,910	\$123,880
7	\$34,930	\$46,457	\$61,128	\$69,860	\$87,325	\$104,790	\$139,720
8	\$38,890	\$51,724	\$68,058	\$77,780	\$97,225	\$116,670	\$155,560

- A pregnant woman counts as two for the purpose of this chart.
- Add \$330/month for each additional family member after eight.
- Contact individual programs for deduction allowances on child/dependent care; working parent's work expenses; alimony/child support *received* or court ordered amount *paid*.

The following figures are the 2012 HHS poverty guidelines as of January 26, 2012. (Source: <http://aspe.hhs.gov/poverty/12poverty.shtml>)
 Monthly percentage data calculated by FHCE and rounded to the nearest dollar.
 Please visit www.CoverageForAll.org for further details and updates on the 48 continuous states, Hawaii and Alaska FPL charts.

Reminder

Income guidelines and eligibility requirements for programs can change. To be sure you have the most current information, please visit www.CoverageForAll.org.

PUBLICLY-SPONSORED PROGRAMS

Low-Income Families & Medically-Needy

Medi-Cal

This government program is available to all individuals and families who meet the Federal Poverty Level (FPL) Income Guidelines.

Health Services Available:

- Medical
- Dental (Limited)
- Vision
- Prescription
- Treatment for special health problems like breast cancer, kidney problems, and AIDS

Who can get Medi-Cal?

- California residents
- Persons with high medical expenses
- Children ages 0-18 whose family incomes range between 100-200% FPL
- Children under age 21 in foster care
- Certain adults, between 21 and 65 years of age, if they have dependent children living with them
- Persons with disabilities or who are blind
- Pregnant women
- Persons receiving nursing home care



WHO TO CONTACT:

Your Local County Social Services Agency (see page 18)

Medi-Cal: 800-952-5253, 888-747-1222, or www.medi-cal.ca.gov

PUBLICLY-SPONSORED PROGRAMS

Medi-Cal (Continued)

How to Qualify:

You can obtain no-cost coverage for your children:

- If your child is under 1 year of age and your income is up to 200% of the FPL Income Guidelines (page 4).
- If your children are ages 1-5 and your income is up to 133% of the FPL Income Guidelines (page 4).
- If your children are ages 6–18 and your income is up to 100% of the FPL Income Guidelines (page 4).

You can obtain no-cost coverage for yourself:

- If you are pregnant and your income is up to 200% of the FPL Income Guidelines (page 4).
- If you are elderly or disabled and your income is up to 100% of the FPL Income Guidelines (page 4).
- If you are the parent of a child 18 years of age or younger and your income is 107% of the FPL Income Guidelines (page 4).

Reminder:

- Program eligibility will depend on many factors, including family income and certain income deductions.
- If you do not fall within the listed income guidelines, you may still be eligible for Medi-Cal, but may be asked to pay some of the costs based upon your income, also known as share-of-cost.
- If you have high medical expenses, you may still qualify for Medi-Cal, even if your income is higher than the income guidelines, also known as spend-down.
- Contact your local county social services agency for assistance or to apply. (page 18–19).



WHO TO CONTACT:

Your County's Social Services Agency (see page 18)

Medi-Cal: 800-952-5253, 888-747-1222, or www.medi-cal.ca.gov

PUBLICLY-SPONSORED PROGRAMS

Children in Families with Moderate Income

Healthy Families Program

Healthy Families is available to children from families whose incomes are at or below 250% of the FPL Income Guidelines.



Health Services Available:

- Medical
- Dental
- Vision Care
- Prescriptions

How to Qualify:

- Children must live in California and be citizens or legal immigrants.
- If your children qualify for no-cost Medi-Cal (see page 6) or have a health plan with your job, your children cannot participate in Healthy Families.
- If your children have not been on an employer-covered health plan for at least three months they may qualify.
- If your child is under 1 year of age, your income must be between 200%–250% of FPL Income Guidelines (page 4).

- If your children are ages 1–5, your income must be between 133%–250% of FPL Income Guidelines (page 4).
- If your children are 6–18 years old, your income must be between 100%–250% of FPL Income Guidelines (page 4).

What Services Cost:

- Your monthly payment (\$13–\$72 per child) will depend on your income and the plan you choose.
- You will usually pay a small amount (\$10–\$15) for doctor visits and prescriptions.
- Some check-ups are no-cost.

WHO TO CONTACT:

Your County's Social Services Agency (see page 18)

Healthy Families: 800-880-5305, or www.healthyfamilies.ca.gov

PUBLICLY-SPONSORED PROGRAMS

Children Ineligible for State Programs

County-Medical Services Programs (CMSP)

County-sponsored programs are available in some counties for children who families do not qualify for Medi-Cal or Healthy Families. In counties without county-sponsored programs, services may be available to children through CaliforniaKids, Healthy Kids, or Kaiser Child Health Plan. Children with physical disabilities, severe medical conditions, or who are in need of surgical or rehabilitative services may be eligible for no or low-cost treatment programs through California Children's Services (CCS) or the Medical Therapy Program (MTP). Legal immigration status may not be required to participate in these programs.

Health Services Available:

- Medical & hospital care for your children
- Check-ups to prevent health problems for your children

How to Qualify:

- Your income must be less than 300% of FPL Income Guidelines (page 4).
- For Kaiser Child Health Plan, your children must live in a Kaiser plan area.
- Not all counties share Healthy kids or CaliforniaKids. Rules may vary.
- If you qualify for no-cost Medi-Cal or Healthy Families, or have coverage through your employer, your children cannot qualify for these programs.

What Services Cost:

- For CaliforniaKids, families pay a premium of \$75 per month per child. CaliforniaKids does not pay for hospitalization.
- For Kaiser Child Health Plan, you could pay \$8–\$15 per child per month for up to three children (\$45 max per family). Some services require co-pays of \$5–\$35 up to \$250 per year (\$500 for 2 or more children).

WHO TO CONTACT:

Your County's Social Services Agency

(see page 18)

Your County's Children's Health Initiative:

www.cchi4families.org

California Children's Services (CCS) &

Medical Therapy Program (MTP):

www.dhcs.ca.gov/services/ccs

CaliforniaKids:

818-755-9700

www.californiakids.org

Kaiser Child Health Plan:

800-464-4000

info.kp.org/childhealthplan

PUBLICLY-SPONSORED PROGRAMS

Immigrants Awaiting Legal Status

Restricted Medi-Cal & Family PACT

If you are an immigrant awaiting legal status, you may be eligible for certain publicly-sponsored programs, including Restricted Medi-Cal and Family PACT.



Health Services Available:

Restricted Medi-Cal:

- Emergency medical services
- Pregnancy-related care (prenatal and delivery)
- Kidney dialysis
- Treatment for breast and cervical cancer

Family PACT

- Comprehensive family planning & reproductive services

How to Qualify:

- You live in California & plan to stay
- For Restricted Medi-Cal, you meet the FPL Income Guidelines for Medi-Cal (page 6).
- For Family PACT, your income must be less than 200% of the FPL Income Guidelines (page 4).

What Services Cost:

- \$0 or minimal share-of-cost based on your income.

Reminder:

- For additional programs for children, see page 7.
- For assistance with your specific circumstance, contact your local county social services agency (page 18).

WHO TO CONTACT:

Your County's Social Services Agency (see page 18)

Ask for information about Restricted Medi-Cal.

Family PACT (CA Office of Family Planning's Information & Referral Service):

916-650-0414 or www.familypact.org.

PUBLICLY-SPONSORED PROGRAMS

Pregnant Women & Infants

Medi-Cal & Access for Infants and Mothers (AIM)

AIM and Medi-Cal offer special health care services to pregnant women and infants. Pregnant women can contact the Baby Cal Help Line for education and assistance in early prenatal care. Pregnant women, infants, and children can also get assistance through Healthy Families and Women-Infant-Children (WIC).

Health Services Available:

- Medical & pregnancy-related care
- Health care for your baby
- Health care for mothers for 60 days after she gives birth

How to Qualify:

- If you are pregnant, you may qualify for no-cost Medi-Cal if your income is below 200% of the FPL Income Guidelines (page 4).
- For AIM, you must have an income between 200%–300% of the FPL Income Guidelines (page 4).
- For AIM, you must be pregnant less than 31 weeks and have lived in California for at least 6 months. You need legal immigration status to qualify.
- Low-income women with insurance deductibles or co-payments over \$500 may also qualify for AIM.

What Services Cost:

- For AIM, it will cost 1.5% of your annual family income (see income worksheet on page 3).
- For no-cost Medi-Cal, it is \$0, if you have an income below 200% of the FPL Income Guideline (page 4).



WHO TO CONTACT:

Medi-Cal: 800-952-5253, 888-747-1222, or www.medi-cal.ca.gov.

AIM (Access for Infants & Mothers): 800-433-2611 or www.aim.ca.gov

Healthy Families: 800-880-5305 or www.healthyfamilies.ca.gov

Women-Infant-Children (WIC): 888-942-9675 www.wicworks.ca.gov

Baby Cal Help Line: 800-BABY-999 (800-222-9999)

PUBLICLY-SPONSORED PROGRAMS

Adults without Dependents

County Programs & GHPP

Uninsured single adults who are not able to get Medi-Cal may qualify for the County Medical Services Program (CMSP). Adults with qualifying genetic diseases can qualify for the Genetically Handicapped Persons Program (GHPP).

Note: In 34 California's rural counties, adults can be covered through the County Medical Services Program (CMSP).

The other 24 metropolitan counties each administer their own Medically-Indigent Adult (MIA) program, so benefits and eligibility standards will vary.

Health Services Available:

- Medical & hospital care
- Prescriptions
- For GHPP, also includes nutrition products and medical foods

How to Qualify:

- For both CMSP & GHPP, you must be 21-64 years of age and have an income up to 200% of the FPL Income Guidelines (page 4).
- You must live in California and be a citizen or legal immigrant.
- For CMSP, you must not be eligible for Medi-Cal & must show you live in a county where CMSP is available.



- For GHPP, must have been diagnosed with a genetic condition

What Services Cost:

- For CMSP, will have to pay a share-of-cost equal to the net of your non-exempt income minus maintenance need
- For GHPP, may be required to pay an annual enrollment fee

WHO TO CONTACT:

Your County's Social services Agency (see page 18)

County Medical Services Program (CMSP): www.cmsspcounties.org

Genetically Handicapped Persons Program (GHPP):

800-639-0597, 916-327-0470, or www.dhcs.ca.gov/services/ghpp

PUBLICLY-SPONSORED PROGRAMS

Individuals with Pre-Existing, Severe, or Chronic Medical Conditions

MRMIP (Major Risk Medical Insurance Plan) & Pre-Existing Condition Insurance Plan (PCIP)

Both programs offer health coverage to individuals who have had a difficult time finding insurance due to their pre-existing conditions. After MRMIP coverage, subscribers have the opportunity to enroll into guaranteed coverage that health plans are required to offer in the individual insurance market due to HIPAA). PCIP is the federal high risk pool program created by the PPACA and run by the Medical Risk Insurance Board (MRMIB).

Health Services Available:

- For MRMIP, medical care provided by HMOs and PPOs up to \$75,000 a year with lifetime limit of \$750,000
- For PCIP, primary and specialty care, hospital care, and prescription drugs.

How to Qualify:

- You must live in California and be a citizen of the U.S.
- You must show proof that you were denied coverage or that you were offered a plan that is more expensive than what is available through MRMIP or PCIP.
- For MRMIP, you cannot be qualified for COBRA (page 14) or other public programs.
- For PCIP, you must have been uninsured for at least 6 months.

What Services Cost:

- The cost depends on your age, where you live, and which health plan you choose.
- For MRMIP, the maximum cost to you is \$2,500 per year, with about \$4,000 annual out-of-pocket limit per household.



WHO TO CONTACT:

MRMIP: 800-289-6574 or www.mrmib.ca.gov

PCIP: 866-717-5826 or www.PCIP.ca.gov

Employees & Small Businesses (2–50 Employees)

Group Health Insurance

Private health insurance is available to small business owners and their employees in California, purchasing insurance through the “small group” market (2–50 employees) may be more affordable than purchasing health coverage for the business owner alone.

Health Services Available:

- Medical care & hospitalization for individuals and families

- Business owners can count as workers.
- The business owner must earn wages from the company.

Advantages of Purchasing Health Insurance as a Business:

- In California, you cannot be turned down. Coverage is guaranteed.
- Small business owners may receive certain tax advantages by purchasing small group coverage for themselves and their employees.
- The self-employed may also be able to deduct the cost of their health care coverage.

Health Services Available:

- Cost depends on how much the business owner contributes, which plan is selected and $\pm 10\%$ of the insurance company's index rate. There might be a waiting period for certain types of care.

How Businesses Qualify:

- Your company must have 2–50 employees.
- You must have at least 2 employees who work for at least 6 months out of the year.
- Employees must work at least 30 hours a week.

To Learn More:

- Agents and brokers specialize in helping individuals with small businesses walk through the group health coverage enrollment process.
- To be connected with one of our volunteer brokers, contact the California Association of Health Underwriters (CAHU) at 800-322-5934 or email fhceinfo@coverageforall.org.

WHO TO CONTACT:

California Association of Health Underwriters (CAHU): 800-322-5934 or www.cahu.org

Individuals Recently Covered by an Employer Health Plan

COBRA & HIPAA & HIPP

If you recently lost your job, and you were included in your former employer's health plan, you can continue coverage for you and your family through COBRA or Cal-COBRA, and then HIPAA. You may also be eligible for premium assistance for COBRA/Cal-COBRA under the Health Insurance Premium Payment (HIPP) program, if you have a high-cost medical condition and qualify for Medi-Cal.

Health Services Available:

- COBRA/Cal-COBRA: You get the same benefits you had with your employer.
- HIPAA: Benefits are based on program selected with no expiration of coverage.

Length of Coverage:

- COBRA: 18-36 months depending on qualifying event
- Cal-COBRA: 36 months depending on qualifying event
- COBRA Subsidy: 15 months of partially-subsidized coverage

How to Qualify:

- You must live in California.
- COBRA: Available for employees who worked for businesses with 20 or more employees.
- Cal-COBRA: Available for employees who work for businesses with less than 20 employees.
- HIPAA: Must have had 18 months of continuous coverage and completely exhausted your COBRA/Cal-COBRA benefits. Must not have lost previous

coverage due to fraud or non-payment of premiums.

- COBRA/Cal-COBRA: Must enroll prior to 60 days after your group coverage ends.
- HIPAA: Must enroll prior to 63 days after your previous coverage ends.

How to Qualify for HIPP:

- You are Medi-Cal eligible (page 6).
- You are a member of an HMO.
- You have a high-cost medical condition (e.g. pregnancy, HIV/AIDS, or organ transplant).

What Services Cost:

- COBRA/Cal-COBRA: Premiums range from 102-150% of group health rates. For example: If you were paying \$100 a month for your share, and your employer was paying \$100, you will pay \$200 plus 2%, which is \$204 per month.
- COBRA Subsidy: Covers 65% of premiums for 15 months.
- HIPP: \$0 or minimal share-of-cost.
- HIPAA: Premiums will depend on the plan chosen.

WHO TO CONTACT:

For COBRA/Cal-COBRA: Talk to your employer's HR Department

For HIPP: Contact the Department of Health Care Services -www.dhcs.ca.gov

For HIPAA: Email fhceinfo@coverageforall.org for the contact information of a local volunteer broker in your area who can walk you through the available HIPAA plans.

PRIVATE HEALTH INSURANCE

Individuals & Families

Individual Health Plans

In California, private health insurance is available only to individuals without pre-existing health conditions due to underwriting. Because of Health Care Reform (PPACA), all children are eligible for private coverage without the fear of being turned down due to a pre-existing health condition.

Health Services Available:

→ You can choose a plan that covers all your health needs

OR

→ You can choose a plan that will only cover you if you get a serious illness. These types of plans usually have a high “deductible,” which is the amount you will have to pay if you need medical care.

→ If you have had serious health problems in the past, you may not qualify for private individual health insurance programs. If you have an ongoing medical problem and cannot qualify for a private individual health plan, see page 12.

What Services Cost:

→ The cost depends on your age, where you live, and the type of plan you select. Individual and family health plans can be very affordable.

- For more information about private health insurance, please email fhceinfo@coverageforall.org and ask to be referred to an agent in your area.
- Search plans anonymously online at www.eHealthInsurance.com.



WHO TO CONTACT:

California Association of Health Underwriters (CAHU):

800-322-5934 or www.cahu.org

www.eHealthInsurance.com

Program Contact Information

Publicly-Sponsored Programs

AIM (Access for Infants & Mothers)

800-433-2611 (toll-free)
www.aim.ca.gov (see page 10)

Baby Cal Help Line

800-BABY-999
800-222-9999

Breast & Cervical Cancer Treatment Program

800-824-0088 (toll-free)
www.dhs.ca.gov (Search: BCCTP)

CaliforniaKids

CaliforniaKids Healthcare Foundation
818-755-9700
www.californiakids.org (see page 8)

California Children's Services (CCS)

Local County Social Services Agency (see page 18)
www.dhcs.ca.gov/services/ccs

Children Health & Disability Prevention (CHDP)

Contact Your Local County Office
www.dhs.ca.gov/pcfh/cms/chdp

County Medical Services Program (CMSP)

www.cmspcounties.org
(see page 11)
Or Contact Your Local County Social Services Agency (see page 18)

COBRA (Consolidated Omnibus Budget Reconciliation Act)

Employee Benefits Security Administration
866-444-3272 (toll-free)
www.dol.gov/ebsa (see page 14)

Family PACT

California Office of Family Planning Information & Referral Service
800-942-1054 (toll-free)
916-650-0414
www.familypact.org (see page 9)

Group Health Plans

Employee Benefits Security Administration
866-444-3272 (toll-free)
www.dol.gov/dol/topic/health-plans
(see page 13)

Genetically Handicapped Persons Program (GHPP)

800-639-0597
916-327-0470
www.dhcs.ca.gov/services/ghpp

Healthy Families

800-880-5305 (toll-free)
888-747-1222
www.healthyfamilies.ca.gov (see page 7)



Program Contact Information

Healthy Kids

(County-Based Program)
www.champ-net.org/programs/hkLA.cfm

HIPAA (Health Insurance Portability and Accountability Act)

Employee Benefits Security Administration
866-444-3272 (toll-free)
www.dol.gov (see page 14)

HIPP (Health Insurance Premium Payment Plan)

866-298-8443 (toll-free)
www.dhcs.ca.gov (Search: HIPP)
(see page 14)

Indian Health Services

916-930-3927
www.ihs.gov

Individual Health Plans

Find a broker by visiting www.nahu.org/consumer/findagent.cfm

Kaiser Permanente Child Health Plan

800-464-4000 (toll-free)
www.kaiserpermanente.org
(see page 8)

Medi-Cal

800-952-5253 (toll-free)
888-747-1222
www.medi-cal.ca.gov (see page 5–6)
or Contact Your Local Social Services Agency (see page 18)

Medical Therapy Plan (MTP)

Contact Local County Social Services
(see page 18)
www.dhcs.ca.gov/services/ccs

Medicare

800-MEDICARE (800-633-4227)
www.medicare.gov

MRMIP (Major Risk Medical Insurance Plan)

800-289-6574 (toll-free)
www.mrmib.ca.gov
(see page 12)

Pre-Existing Condition Insurance Plan (PCIP)

866-717-5826
www.PCIP.ca.gov

Veteran Affairs Medical Benefits

877-222-8387 (toll-free)
www.va.gov

Restricted Medi-Cal

800-952-5253 (toll-free)
www.medi-cal.ca.gov
(see page 5–6)
or Contact Your Local Social Services Agency (see page 18)

WISEWOMAN

800-511-2300 (toll-free)
www.cdph.ca.gov/programs/WISEWOMAN

Women-Infant-Children (WIC)

888-WICWORKS (888-942-9675)
www.wicworks.ca.gov

County Social Services Agencies

For complete Medi-Cal eligibility information or other health-related services, please contact your nearest County Social Services Agency at the phone number listed here.

Alameda County

(510) 639-1090

Alpine County

(530) 694-2235, ext. 241

Amador County

(209) 223-6550

Butte County

Oroville: (530) 538-7711, (800) 538-7711
Chico: (530) 879-3479

Calaveras County

(209) 754-6448

Colusa County

(530) 458-0250

Contra Costa County

(800) 709-8348

Del Norte County

(707) 464-3191

El Dorado County

(530) 642-7300

Fresno County

Fresno: (559) 453-4262
Coalinga: (559) 935-6300
Selma: (559) 898-5100

Glenn County

(530) 934-6514
(530) 934-6510

Humboldt County

(707) 476-4700

Imperial County

(760) 337-6800

Inyo County

Bishop (760) 872-1394

Kern County

(661) 631-6807

Kings County

(559) 582-3241

Lake County

(707) 995-4200
(800) 628-5288

Lassen County

(530) 251-8152

Los Angeles County

(626) 569-4000
(213) 639-6300 (Limited Service Area)

Madera County

(559) 675-7841

Marin County

(415) 473-3400

Mariposa County

(800) 266-3609
(209) 966-3609

Mendocino County

Fort Bragg: (707) 962-1000
Ukiah: (707) 463-7700

Merced County

(209) 385-3000

Modoc County

(530) 233-6501

Mono County

Bridgeport: (760) 932-5600
Mammoth: (760) 924-1770

Monterey County

Salinas: (831) 755-8500
Seaside: (831) 755-4650
King City: (831) 385-7400

Napa County

(707) 253-4511

Nevada County

(530) 265-1340
(888) 809-1340 (toll-free)

Orange County

Anaheim: (714) 575-2400
Santa Ana: (714) 435-5800
Aliso Viejo: (949) 389-8200
Garden Grove (714) 741-7100

County Social Services Agencies

Placer County

Auburn: (530) 889-7610
Rocklin: (916) 784-6000
North Lake Tahoe: (530) 546-1900

Plumas County

(530) 283-6350

Riverside County

(951) 358-3400

Sacramento County

(916) 874-2072, (916) 874-2215,
TDD/TTY (916) 874-2599

San Benito County

(831) 636-4180

San Bernardino County

(909) 388-0245

San Diego County

(866) 262-9881

San Francisco County & City

(415) 863-9892

San Joaquin County

(209) 468-1000

San Luis Obispo County

San Luis Obispo: (805) 781-1600
Atascadero: (805) 461-6000
Paso Robles: (805) 237-3110
Morro Bay: (805) 772-6340

San Mateo County

(650) 802-5018

Santa Barbara County

(805) 681-4401

Santa Clara County

San Jose: (408) 817-6000, 877-962-3633
Mountain View: (650) 988-6100
Gilroy: (408) 846-3900

Santa Cruz County

Santa Cruz: (831) 454-4165
Watsonville: (831) 763-8500

Shasta County

(530) 245-6680

Sierra County

Loyalton: (530) 993-6700
Downieville: (530) 763-8500

Siskiyou County

Yreka (530) 841-2700

Solano County

Fairfield: (707) 784-8050
Vacaville: (707) 469-4500
Vallejo: (707) 553-5000

Sonoma County

877-699-6868

Stanislaus County

(209) 558-2777

Sutter County

(530) 822-7230

Tehama County

Red Bluff: (530) 527-1911
Corning: (530) 824-9182

Trinity County

(530) 623-1265

Tulare County

Lindsay (559) 562-7400
Visalia (559) 624-8100

Tuolumne County

(209) 533-5711

Ventura County

Oxnard: (805) 385-9363
Ventura: (805) 658-4100
Santa Clara Valley: (805) 933-8300

Yolo County

Woodland: (530) 661-2750
West Sacramento: (916) 375-6200

Yuba County

(530) 749-6311

Other Sources of Health Information

There are health care programs for almost every type of person — and you may be eligible. To find out more, contact the organizations listed below.

FINANCIAL AID & FREE OR LOW-COST BENEFITS

Department of Health Care Services

916-445-4171
(English & Spanish)

www.dhcs.ca.gov

(Recorded information about Medi-Cal, Medicare, SSI, Food Stamps, Cash Assistance, CMSP, MISP, Healthy Families Program, CCS, MTP and more)

California Department of Public Health

www.cdph.ca.gov
(916) 558-1784

Government Benefits Finder

800-333-4636
www.benefits.gov

Catalog of Federal Domestic Assistance

www.cfda.gov
(Search tool for grants)

Partnership For Prescription Assistance

888-477-2669
www.pparx.org

FINDING LOCAL HEALTH CARE OPTIONS

Health Resources & Services Administration

888-275-4772
findahealthcenter.hrsa.gov
(Find a Health Center by Zip Code)

Self-Help Clearing House

www.mentalhelp.net/selfhelp

Health Coverage Tax Credit

866-628-HCTC (866-628-4282)
www.irs.gov (key word HCTC)

Department of Health & Human Services

www.hhs.gov
(Many different health care search tools)
www.healthfinder.gov
(User-friendly search tool in English and Spanish)

Health Consumer Alliance

www.healthconsumer.org
(13 different languages; user-friendly information about programs and legal rights by county)

IMPACT

800-409-8252 (toll-free)
www.california-impact.org

LAWS & REGULATIONS

California Department of Insurance

800-927-4357
www.insurance.ca.gov
(English and Spanish; general information on all types of insurance)

Employee Benefits Security Administration

www.dol.gov/ebsa
(Official information and rules from the U.S. Department of Labor)

California Department of Managed Health Care

888-466-2219
www.hmohelp.ca.gov
(English & Spanish; general information on all types of insurance)

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Education and the California Association of Health Underwriters have generously funded this publication to ensure that all Californians have access to affordable quality health care coverage. Every effort has been made to include the most accurate information available at the time of printing. Program and plan availability, eligibility requirements, costs, and coverage are subject to change. You are encouraged to call or visit the websites listed for each program to ensure that you have the most up-to-date information available.



The California Association of Health Underwriters is a statewide association working on behalf of health insurance brokers and other health care professionals. Their mission is to educate the public and legislators on key health care issues affecting California consumers and to uphold fair and ethical insurance practices.



The Foundation for Health Coverage Education® is a non-profit organization with a mission to simplify public and private health insurance information so that more people can access coverage. FHCE offers printed and online pamphlets and services to help any individual with questions about health coverage options.

For a personalized list of health coverage options, use our interactive Health Coverage Eligibility Quiz found on our website at www.CoverageForAll.org.

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