

## **BUTTE COUNTY MEDI-CAL FACT SHEET**

### ***To Replace a Medi-Cal Card***

- Clients residing in Butte County are to go to a FEMA location site at the former Sears in the Chico Mall:

1982 East 20<sup>th</sup> Street  
Chico, CA 95928

- Client's residing outside of Butte County can provide the following information to Alta California Regional Center. Alta will assist the client in requesting a replacement Medi-Cal card. The information will be sent to the Sacramento County Medi-Cal office, and our liaison, at his earliest availability, will follow-up with the request and issue another card to the client. Please provide the following information to Melissa Basler, Federal Programs Manager:

1. Client's Name
2. Client's DOB
3. Client's SSN
4. Client's Mailing Address

- While waiting for the new Medi-Cal card to arrive, clients who are in need of knowing their Medi-Cal card ID# (BIC#) can contact ACRC's Federal Programs Manager, Melissa Basler, 916-978-6378, with the following information:

1. Client's Name
2. Client's DOB
3. Client's SSN
4. A phone number that Federal Programs staff can contact with updated information

ACRC's Federal Programs Manager, or a designated staff person, will verify the client's BIC# and contact the client with the BIC# that can then be given to any Medi-Cal provider to use to verify current Medi-Cal eligibility.

***Below is the Technical Assistance All Counties Bulletin sent by the California Department of Human Resources:***

***ATTN: All Staff that Administer the Medi-Cal Program***

***As a reminder, below are some talking points to process for assisting individuals affected by the recent disasters.***

***I have just relocated to Sacramento County due to a natural disaster. Can I apply for healthcare coverage?***

- *Yes, there are many ways to apply to see if you qualify. You can apply for healthcare as a new resident of Sacramento.*

***Or***

- *You may request an Inter County Transfer (ICT) of your benefits as you relocate into Sacramento County. Your case can be transferred on a permanent or short-term basis.*

***I am currently staying in Sacramento for an unknown period of time due to a natural disaster. Can I apply for healthcare coverage?***

- *If you are here for an unknown period, you can apply for healthcare or transfer your benefits as a resident of Sacramento. If you plan to be here for two weeks or less, and are already enrolled in a health plan (from where you were displaced) the health plan would still be the point of contact up until an official change of address has occurred. The current plan is able to provide assistance to ensure beneficiaries have access to care and medications.*
- *If additional assistance is needed for services or plan changes, staff must follow the existing processes for changes needed to the Medi-Cal Managed Care Plan coverage.*

*Submit an expedited request using the [on-line fillable form](#) to the Office of the Ombudsman. The online, fillable form should be used when requesting expedited:*

- *Plan Changes;*
- *Plan Enrollments;*
- *Plan Disenrollment's; or*
- *Removal of 59 Holds.*

**Note:** *This form should be utilized for urgent expedited matters only and can only be submitted by staff. This information should not be shared with customers. All standard changes need to be processed through Health Care Options at 1-800-430-4263.*

*The on-line fillable form is located on the DHCS Office of the Ombudsperson website (<http://dhcs.ca.gov/MCOmbudsman>) or you may also contact the Office of the Ombudsman by phone at 1-888-452-8609.*

*Please remember a signed and dated affidavit, under penalty of perjury to verify California residency, income, and property is acceptable from applicants who are unable to provide necessary verifications due to the wildfires.*

***What if I do not have any proof of my income, property, residency, etc.?***

- *If you are unable to provide the necessary verifications due to unusual circumstances such as earthquake, fire, flood or other natural disasters, and the county tries, but cannot get the needed information, a signed and dated affidavit, under penalty of perjury can be used in place of the requested verification documentation for Medi-Cal.*

***What if I do not have a permanent address?***

- *If you do not have a fixed address, you may provide a written statement indicating that you are a resident of the state. This can be on your Medi-Cal application; you do not need to provide a separate written statement.*

***What if I am not a U.S. citizen or lawfully present?***

- *Adults over 19 may qualify for limited-scope Medi-Cal benefits regardless of your immigration or SSN status. You can apply for your child even if you are not eligible for full coverage.*

- *In California, immigration status does not affect Medi-Cal benefits for children under 19. Children are eligible for full scope Medi-Cal benefits, regardless of immigration status.*

***How do I apply for healthcare coverage?***

- *You can apply in person at your Local County Office: <http://dhcs.ca.gov/COL> or I can take an application for you over the phone.*
- *Apply by phone at (800) 300-1506 or (916) 875-3100*
- *Apply online: <http://www.benefitscal.com/> or <https://www.coveredca.com/>*

*Supervisors with questions regarding the specific steps to follow in CalWIN may contact the Medi-Cal CalWIN Program Specialist.*

*Supervisors with questions regarding policy may contact the Medi-Cal Program Specialists at [DHA-MediCal@saccounty.net](mailto:DHA-MediCal@saccounty.net)*

*Alisa Young, HQ5A*

*Acting Medi-Cal Program Specialist*

*Department of Human Assistance*

*1825 Bell St., Suite 200*

*Sacramento, CA 95825*

*(916) 875-3528(ph) (916) 875-3591(fax)*