

HEALTHCARE COVERAGE & INSURANCE

CALIFORNIA



Medicare
Medi-Cal
Private Health Insurance
My Health LA
Covered California



BASIC HEALTH INSURANCE TERMS

- **PREMIUM:** The fixed amount that you pay your insurance company annually (or monthly) regardless of whether you seek medical care or not.
- **DEDUCTIBLE:** The amount (annually) that you must pay out-of-pocket for health services before your insurance plan begins to fund your medical bills.
- **COPAY:** The fixed amount that you pay during every medical visit; This amount depends on the type of services you are seeking.
- **COINSURANCE:** The percentage of your medical expenses that you are responsible for paying once you have reached your deductible.
- **OUT-OF-POCKET MAXIMUM:** The maximum amount that you will pay out-of-pocket for your medical services annually. Your insurance will pay for any additional medical expenses once you reach this maximum.
- **HMO (Health Maintenance Organization):** A type of healthcare plan with a small network of physicians that you are able to visit; Requires referral from your primary care physician to see specialist. HMOs generally have lower premiums and low deductibles.
- **PPO (Preferred Provider Organization):** A type of healthcare plan with a larger network of physicians that you are able to visit; You do not need a referral to visit a specialist. PPOs generally have higher monthly premiums.

◆ All health insurance plans cover preventative care services with no additional deductible or copayment.

For adults, preventative care services include:

- Annual Complete Physical Exam
- Flu Shots (once annually)
- Vaccinations (including boosters)
- Cancer Prevention:
 - Colorectal cancer: Screening colonoscopy once every 10 years for ages 50-75
 - Breast Cancer: Screening mammograms every 1-2 years for women over 40





MEDICARE

Medicare is a federal health insurance program primarily for the elderly population. The Medicare program is comprised of 4 parts: Parts A, B, C, and D.



PART A: Covers inpatient hospital stays, nursing facility care, hospice care, home health care

PART B: Covers doctors' visits, outpatient care, medical supplies, preventative care services

PART C (Medicare Advantage Plans): An alternative to Original Medicare that is offered by Medicare-approved private companies. These plans often include Parts A, B, and D, in addition to dental and hearing care.

PART D: Prescription Drug Coverage, Recommended Vaccines/Shots

ELIGIBILITIES

- Must be a U.S. citizen OR a legal permanent resident for at least 5 years AND
- One of the following applies to you:
 - 65 or older and eligible for Social Security
 - under 65 and permanently disabled
 - have End-Stage Renal Disease
 - have Amyotrophic lateral sclerosis (ALS)

COST

- **Part A:** No monthly premium if you have paid Medicare taxes for some time while working or if you already receive retirement benefits from Social Security. If you do not qualify for the above, there is a monthly premium of ~\$200-500.
- **Part B:** Monthly premium (~\$150) will be deducted from your benefit payment.
- **Part C/Medicare Advantage:** Premiums vary by plan and depend on the physician you visit.
- **Part D:** Premiums vary by income.

ENROLLMENT PERIOD

- **Open Enrollment Period** : October 15 - December 7 for the following year's coverage. Coverage begins January 1 of next year.
- **Special Enrollment Period** available to those who qualify, further details can be found on Medicare website

HOW TO ENROLL

- Some people are automatically enrolled
- Parts A and B: Sign up through Social Security
- Part C/Medicare Advantage and Part D: Use "Medicare's Plan Finder" on the Medicare website

RENEWAL: In most cases, you do not need to renew your Medicare coverage annually once you are enrolled.

WEBSITE: Medicare.gov



MEDI-CAL



Medi-Cal is California's state health insurance program for low-income adults and children to gain health care access, medical services, and other programs.

HEALTHCARE BENEFITS

- Outpatient services and Emergency services
- Hospitalization
- Mental and Behavioral Health and Substance Use Disorder Services
- Prescription Drugs
- Physical and Occupational therapy
- Laboratory Services
- Preventative care and services
- Chronic disease management
- Oral and Vision care
- Others



ELIGIBILITIES

- U.S. citizen or permanent legal U.S. resident in California AND
- Income level must be no more than 138% of the federal poverty level (varies depending on your household size) AND
- One of the following applies to you:
 - Over 65, blind or disabled, pregnant, in a nursing care home, under 21, or a refugee living in the U.S. temporarily
- *Undocumented immigrants may get access to restricted Medi-Cal coverage

COST: Free

ENROLLMENT PERIOD: You can apply at any time of the year.

HOW TO ENROLL

- Apply on Covered California website at <https://www.coveredca.com/>

RENEWAL

Must renew coverage each year by filling out a form that is mailed to members in the Medi-Cal program.

MEDI-CAL WEBSITE:

<https://www.coveredca.com/health/medi-cal/>

PRIVATE HEALTH INSURANCE



Other private health insurance companies also offer various health care coverage plans that can be purchased from insurance companies directly or on the Covered California website.

HEALTHCARE BENEFITS

- All plans on Covered California cover the 10 essential benefits:
 - Outpatient care
 - Emergency Services
 - Hospitalization
 - Pregnancy, maternity, newborn care
 - Mental health and substance use disorder services
 - Prescription drugs
 - Rehabilitation services
 - Laboratory services
 - Preventative services and chronic-disease management
 - Pediatric services, including oral and vision care (for children only)
- Many adult plans on Covered California do NOT cover dental and vision care, but these can be purchased separately



ELIGIBILITIES

- Lawful U.S. citizens or permanent residents (green card holders)
- *Undocumented immigrants may purchase private health insurance coverage from insurance companies directly, but do not qualify to do so on Covered California

COST: Varies with each plan

ENROLLMENT PERIOD: On Covered California,

- Open Enrollment Period takes place each fall, for coverage for the following year.
- Special Enrollment Period available to those who qualify, further details can be found on Covered California website

HOW TO ENROLL

- Health insurance plans can be purchased on Covered California website or directly from a private insurance company

COVERED CALIFORNIA WEBSITE:
<https://www.coveredca.com/>





MY HEALTH L.A. (MHLA)



My Health LA is a no-cost health care program for low-income individuals who reside in LA County and are unable to get health insurance. There is a broad network of clinics that have partnered with MHLA to provide services for members in this program. This is a good option for undocumented immigrants or those who are ineligible for health insurance.

*Note: MHLA is NOT considered health insurance and you can only receive medical care at the MHLA clinic you are enrolled at. You may switch clinics when you re-enroll.

HEALTHCARE BENEFITS



- Hospital services
- Prescription medications
- Mental health services
- Specialty Care
- Medical equipment and supplies for diabetes
- Substance Abuse Services
- Medical Care at the MHLA clinic that you enrolled at

ELIGIBILITIES

- Resident of Los Angeles County AND
- Age 26 and older AND
- Meet income requirement (No more than 138% of federal poverty level) AND
- Lack or are ineligible for health insurance

COST: Free

ENROLLMENT PERIOD: You can apply at any time during the year

HOW TO ENROLL

- Call MHLA Member Services at 1(844)744-6452 M-F from 8am-5pm
- Visit dhs.lacounty.gov/MHLA to find a MHLA clinics near you and bring in:
 - Personal identification
 - Proof of residency in LA County
 - Proof of income

RENEWAL

To renew your membership in the program each year, make an appointment at an MHLA clinic of your choice before expiration (you will receive a mailed letter reminder 90 days prior to expiration)

MHLA WEBSITE:

<https://dhs.lacounty.gov/my-health-la/my-health-la2/>

COVERED CALIFORNIA



Covered California is California's Health Insurance Marketplace, a website that allows you to compare and purchase health insurance plans that meet health care law requirements for individuals, families, and small businesses.

UNDERSTANDING COVERED CALIFORNIA METAL TIERS

All health insurance plans on Covered California are categorized under one of the 4 levels of coverage, represented by the Metal Tiers: Bronze, Silver, Gold, and Platinum.

BRONZE - Lowest premiums and highest out-of-pocket costs

- Best for people who do not have pre-existing medical conditions.
- Average Medical Costs
 - Insurance Company pays: 60%
 - You pay: 40%

SILVER - Lower premiums and moderate out-of-pocket costs

- Best for people who want an affordable plan with reasonable copays for common services and generic drugs.
- Average Medical Costs
 - Insurance Company pays: 70%
 - You pay: 30%

GOLD - Higher premiums and lower out-of-pocket costs

- Best for people who frequently use medical services.
- Average Medical Costs
 - Insurance Company pays: 80%
 - You pay: 20%

PLATINUM - Highest premiums, lowest out-of-pocket costs, and no deductible.

- Best for people who frequently use medical services.
- Average Medical Costs
 - Insurance Company pays: 90%
 - You pay: 10%

