

November 13, 2023

## REMINDER

## **Adult Expansion Enrollment Notice**

Dear Provider,

The Department of Health Care Services (DHCS) will give full-scope Medi-Cal benefits to all adults ages 26 through 49 who qualify for Medi-Cal, regardless of citizenship or immigration status, effective January 1, 2024. The DHCS will mail notices to existing beneficiaries in restricted scope aid codes who are expected to be part of the Adult Expansion Enrollment.

## Medi-Cal beneficiaries with a Share of Cost (SOC)

If the Medi-Cal beneficiary has a current SOC and their income has not changed, the member will receive full scope Medi-Cal benefits through Fee-for-Service (regular) Medi-Cal and their SOC will most likely remain the same.

## Medi-Cal beneficiaries without a Share of Cost (SOC)

If the Medi-Cal beneficiary does not have a SOC, the member will need to enroll in a Medi-Cal Managed Care Plan (MCP). Beneficiaries will receive a packet that explains how to choose an MCP.

Beneficiaries who enroll in a Medi-Cal Managed Care Plan have the right to request up to 12 months of Continuity of Care (CoC) with a provider if a verifiable pre-existing relationship exists with that provider. To request CoC a member, or your office, may contact the Kern Health Systems Member Services Department at 1-800-391-2000.

For questions about Medi-Cal, members can call DHCS Medi-Cal Helpline at 1-800-541-5555 or the DHCS Ombudsman Office at 1-888-452-8609. If members wish to learn more about their health plan and provider choices, they can call Health Care Options at 1-800-430-4263 or go to www.healthcareoptions.dhcs.ca.gov.

If you would like additional information regarding the Adult Expansion, please visit: <a href="https://www.dhcs.ca.gov/services/medi-cal/eligibility/Pages/Adult-Expansion.aspx">https://www.dhcs.ca.gov/services/medi-cal/eligibility/Pages/Adult-Expansion.aspx</a>

Please remember to check eligibility prior to every visit:

- ➢ KFHC Provider Portal
- KFHC DIVA (661) 664-5185
- > AEVS 1-800-456-2387

If above options are unavailable:

KFHC Member Services Dept. 661-632-1590 (Bakersfield), 1-800-391-2000 (outside of Bakersfield), Providers can dial 5, a silent prompt created specifically for providers to bypass other queues.

KHS posts all bulletins on the KHS website, <u>www.kernfamilyhealthcare.com</u>, choose Provider, then Bulletins. For any questions, please contact your Provider Relations Representative at 1-800-391-2000.

Sincerely,

Melissa McGuire Deputy Director of Provider Network Kern Health Systems