MEDI-MEDI ELIGILITY

A member is Medi-Medi eligible if he or she qualifies for both Medicare and Medi-Cal benefits. Medicare's eligibility is determined by the Social Security Administration and is managed by the federal government. Medicare is comprised of three (3) parts.

• Medicare Part A: covers inpatient care in hospitals, critical access hospitals, and skilled nursing facilities, including hospice care.

• Medicare Part B: covers doctors' services, outpatient hospital care and other medical services that Part A does not cover, such as physical and occupational therapists.

• Medicare Part D: covers prescription drugs. Beneficiaries voluntarily enroll in a Part D plan. Medi-Medi beneficiaries can enroll in special plans with no premiums or deductibles, lower co-payments, and the option to change plans monthly. Medi-Cal eligibility is determined through the local Social Services Agency or welfare office and hospitals or provider offices (i.e. emergency Medi-Cal, Gateway program or presumptive eligibility).

To check Medicare/Medi-Cal eligibility click on the link below:

 https://www.medi-cal.ca.gov/eligibility/login.asp

For additional Medicare information go to   www.medicare.org

Useful Sites:

Medi-Cal Choices for People with Disabilities and Seniors In Alameda County:

http://www.opa.ca.gov/healthcare/health-plan/files/Medi-Cal-Alameda_Eng.pdf

http://www.dhcs.ca.gov/services/medi-cal/Pages/MCIndividual.aspx