



What Is Medi-Cal?

Medi-Cal is California’s Medicaid program, which provides publicly funded health coverage for eligible individuals based on income or specific needs. **Approximately one-third of Californians, including 45 percent of children younger than 18 years old, are Medi-Cal members.** In Los Angeles County, 45 percent of residents are Medi-Cal members. Enrollees are generally assigned to a managed care plan, which coordinates their care through contracts with the California Department of Health Care Services (DHCS).

Are children and youth in foster care eligible for Medi-Cal?

All children and youth in foster care who receive federal Social Security Act Title IV-E payments are eligible for Medi-Cal, regardless of their household income level.

What is the difference between managed care and fee-for-service Medi-Cal?

Medi-Cal services are provided either through a managed care or fee-for-service (FFS) structure. Each have their pros and cons, however, the main difference is the level of support members receive to manage their care and the scope of services they can receive (if eligible).

Managed Care:

Health insurance plans, called managed care plans or “MCs”, contract with doctors, hospitals, and other healthcare providers to provide care. Members of managed care plans have access to a network of providers that meet geographic area, quality, and access standards. DHCS monitors these managed care plans’ provider networks annually to ensure compliance with state requirements for provider-to-member ratios, access times, and alternative access options, such as telehealth if appropriate. Members of Managed Care Plans also have access to comprehensive services such as care coordination and other social services to help address social determinants of health.

Fee-for-Service:

This is a traditional health insurance model wherein the state directly reimburses providers for each service. Enrollees (or caregivers) are responsible for identifying providers who accept Medi-Cal and navigating their own healthcare journey.

What are the Medi-Cal options in Los Angeles County?

More than 95 percent of Medi-Cal members statewide are in managed care. In some counties, children in custodial care are required to enroll in managed care; however, in other counties, including Los Angeles County, children in child welfare custody have the option of enrolling in managed care or fee-for-service plans.

What are access and care coordination considerations for child welfare members?

Both managed care and fee-for-service (FFS) offer Medi-Cal benefits, but each system has unique approaches to access and care coordination:

Managed Care:

- Comprehensive provider network
- Comprehensive supportive services
- Enhanced Care Management services (ECM). ECM manages complex needs, coordinating across systems and connecting to social services
- Community support services (CS). CS provides services like housing navigation and asthma remediation.
- Access to a Child Welfare Liaison to support child welfare staff and facilitate care coordination
- Interpretation services

Fee-for-Service:

- Caregivers are required to independently select any provider that accepts Medi-Cal clients
- Caregivers are required to independently locate and schedule services.
- No additional supportive services available to help navigate member care

¹In California, children and youth are enrolled in Medi-Cal via the foster care aid codes, at the time of the court’s custody determination. Source: California Department of Health Care Services. Children and Youth in Foster Care: Background and Current Landscape. August 2020. Available at: <https://www.dhcs.ca.gov/provgovpart/Documents/Children-and-Youth-in-Foster-Care-Landscape-Overview.pdf>.



New Benefits for Child Welfare in Managed Care

The California Advancing and Innovating Medi-Cal (CalAIM) initiative introduces expanded services to managed care, including Enhanced Care Management (ECM) for coordinated case management, referrals, and community resource navigation. CalAIM also provides 14 new Community Supports (CS), such as housing assistance, medically tailored meals, housing modifications, respite care for caregivers, and asthma management. These benefits are designed to address both health and social needs more fully, with a particular emphasis on supporting children in foster care.

Medi-Cal Managed Care Plans in Los Angeles County

In Los Angeles County, children enrolled in Medi-Cal receive care through one of the following managed care plans:

- L.A. Care Health Plan (primary plan)
- Anthem Blue Cross (subcontracted under L.A. Care)
- Blue Shield Promise (subcontracted under L.A. Care)
- Health Net (primary plan)
- Molina Healthcare (subcontracted under Health Net)
- Kaiser Permanente (direct contract with DHCS)

Each plan is required to have a Child Welfare Liaison to support child welfare staff and facilitate care coordination. This role is designed to simplify connections with health plans and ensure timely access to services

With expanded benefits under CalAIM, managed care plans have been redesigned to provide holistic and accessible care comparable to, and more robust than, FFS. The following table highlights some differences about the coverage available to children and youth involved in the child welfare system.

Table of Abbreviations

See the table on the following page for common misconceptions about Medi-Cal Coverage

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|---------------|--|
| CalAIM | California Advancing and Innovating Medi-Cal |
| CS | Community Supports |
| DHCS | Department of Health Care Services |
| DMH | Department of Mental Health |
| ECM | Enhanced Care Management |
| FFS | Fee-for-Service |
| MCP | Managed Care Plan |
| SAPC | Substance Abuse Prevention and Control |

²Reflects the current community supports available. Transitional Rent Community Support is an additional CS that will become mandatory for all MCPs to implement on January 1, 2026.

Managed Care or FFS? What Child Welfare Workers Need to Know

| BENEFITS | MANAGED CARE | FEE-FOR-SERVICE |
|--|---|---|
| <p>Full-scope Medi-Cal benefits</p> | <p>Children enrolled in managed care have access to the full scope of benefits, as well as specific programs for youth involved in the child welfare system. For instance, children in managed care plans are eligible for exclusive supportive and care coordination services and benefits, such as:</p> <ul style="list-style-type: none"> • Care Coordination: MCPs assign members to a Primary Care Provider (PCP) who coordinates medical, behavioral, and social services, ensuring organized and accessible care. • Enhanced Services: Children in child welfare are eligible for Enhanced Care Management (ECM) and Community Supports (CS) through CalAIM. ECM manages complex needs, coordinating across systems and connecting to social services. CS provides services like housing navigation and asthma remediation. • Child Welfare Liaison: Required for MCPs, this role serves as the primary point of contact for child welfare agencies. The liaison supports child welfare staff by helping navigate the healthcare system, addressing concerns, and facilitating care coordination for children in the welfare system. This role is designed to simplify connections with health plans and ensure timely access to services. | <p>Children enrolled in FFS Medi-Cal have access to full-scope benefits, but they are ineligible for the additional benefits and supports exclusively available through managed care plans, such as care coordination, and other supportive services.</p> <p>FFS offers transportation but requires caregiver to independently coordinate services.</p> <p>FFS requires caregivers to independently locate and schedule services. Without an assigned PCP or structured care coordination support, care can be fragmented.</p> <p>FFS does not offer additional supportive services like ECM or CS, requiring caregivers to independently seek out necessary services, which may lead to gaps in care.</p> |
| <p>Access to networks of providers</p> | <p>MCPs must meet network adequacy standards, ensuring access to a range of providers. Managed care networks are designed to be broad, with DHCS verifying compliance to ensure members can access necessary services without barriers. In addition, each MCP has a point of contact to address any roadblocks that may arise for members when it comes to accessing a provider.</p> | <p>The availability of providers and specialists who accept Medi-Cal FFS varies. FFS does not have network adequacy requirements; such standards apply only to MCPs, not individual providers.</p> |
| <p>Care Coordination Services</p> | <p>Managed care plans provide care coordination and supportive services for children in child welfare. This includes assigning a Primary Care Provider (PCP) to coordinate medical, behavioral, and social services, offering Enhanced Care Management (ECM) for members with complex needs, and providing access to a Child Welfare Liaison to support child welfare staff and facilitate care coordination.</p> | <p>FFS does not offer care management or coordination benefits, and there is no assigned PCP or Child Welfare Liaison to support service coordination.</p> |
| <p>Medi-Cal services for child welfare population</p> | <p>Managed care offers care coordination services such as ECM and access to a Child Welfare Liaison to support child welfare staff and facilitate care coordination unlike FFS.</p> | <p>All children in county custody, including those in Family Maintenance, are eligible for Medi-Cal. Children in the custody of Los Angeles County may opt for managed care or FFS coverage.</p> |

Managed Care or FFS? What Child Welfare Workers Need to Know

| BENEFITS | MANAGED CARE | FEE-FOR-SERVICE |
|---|--|--|
| <p>Specialty medical providers</p> | <p>Managed care plans must provide access to specialty care, including out-of-network options, if needed, to meet medical necessity standards.</p> | <p>FFS does not have continuity of care requirements when children move between counties or switch from managed care to FFS. Caregivers are responsible for identifying and coordinating with providers who accept Medi-Cal FFS.</p> |
| <p>Specialty mental health services through the Department of Mental Health (DMH) or LA County Substance Abuse Prevention and Control (SAPC)</p> | <p>All Medi-Cal enrollees, including individuals with managed care coverage, may access county mental health services, including DMH and SAPC.</p> | |
| <p>LA County Department of Health Services Medical Hubs</p> | <p>All children in the child welfare system have access to Medical Hub services for the initial assessment process (i.e., Initial Medical Examination), regardless of insurance type.</p> | |
| <p>Medi-Cal services for undocumented children</p> | <p>All children in California are entitled to the full scope of Medi-Cal coverage, regardless of immigration status.</p> | |
| <p>Coordination of services for children moving across counties or from FFS</p> | <p>MCPs coordinate transitions for children moving between counties or from FFS, ensuring these individuals can continue to receive care from their current providers in certain situations and maintain uninterrupted access to necessary services during the move.</p> | |