

THINGS TO KNOW ABOUT SHARE OF COST...

What is a Share of Cost?

A Share of Cost (also referred to as a SOC) is the amount of money an individual is responsible to pay towards their medical related services, supplies, or equipment before Medi-Cal will begin to pay. The Share of Cost amount applies to all immediate household members who do not qualify for a free Medi-Cal program.

Note: Medi-Cal has various zero Share of Cost programs and will consider the best program for an individual before applying a Share of Cost.

Who has a Share of Cost?

Families or persons with income too high to qualify for a free Medi-Cal program may have a Share of Cost.

How can I meet my Share of Cost?

- ◆ A Share of Cost can be met with payment of medical expenses incurred by any member of your immediate family, including members not receiving Medi-Cal (Family members include: mother, father, and minor children, but not grandparents or adult children).
- ◆ In some cases, you may use old **unpaid** medical bills from any member of your immediate family to meet a past, current, or future month Share of Cost. Ask your Medi-Cal Eligibility Worker for more information.

When do I pay my Share of Cost?

You **only** pay your Share of Cost in the month(s) you receive medical related services, supplies or equipment, including prescriptions and In-Home Supportive Services.

How do I pay my Share of Cost?

You can pay or promise to pay your Share of Cost directly to your health care provider. Your doctor, pharmacist, or medical supplier will update the "point of service" system with the amount that you paid or promised to pay towards your Share of Cost.

What is a medical expense?

A medical expense is the cost for medically-related services prescribed by a licensed health care provider. This includes the cost for items such as medical supplies, equipment or prescription drugs.

Is a medical expense the same as an allowable medical deduction?

No. A medical expense can only be used to meet your Share of Cost. An allowable deduction reduces your net countable income.

FAQs (Frequently Asked Questions)

Q. How will my health care provider know how much my Share of Cost is?

A. Health care providers who accept Medi-Cal will swipe your Medi-Cal Benefits Identification Card (BIC) through a “point of service” machine, which tells them your Share of Cost amount.

Q. How can I reduce or eliminate my Share of Cost?

A. The following options could help reduce or potentially eliminate a Share of Cost:

- ◆ Purchasing supplemental health, vision, or dental insurance can help reduce your net countable income.

The chart below shows how the purchase of supplemental health insurance valued at \$105.00 can help lower the net countable income to qualify for the Aged and Disabled (A&D) Program and prevent a Share of Cost. The following is an example of how income is calculated for an individual over age 65 and the deductions that are allowed if applicable.

Income Calculation	Medi-Cal	A&D Program
Gross Unearned Income	\$1,300.00	\$1,300.00
Standard Medi-Cal Deduction	- \$20.00	-\$20.00
Medicare Part B Premium Payment	-\$135.50	-\$135.50
Supplemental Health Insurance Payment	Not purchased	-\$105.00
Net Countable Income	\$1,144.50	\$1,039.50
Medi-Cal Maintenance Need Level	-\$600.00	
A&D Program Income - Limit		\$1,041.00
Share of Cost	\$680.00	- 0 -

After purchasing supplemental health insurance, the net countable income is now within the income limit for the A&D Program. Instead of having a \$680 Share of Cost, the individual now qualifies for free Medi-Cal under the A&D Program.

- ◆ The **250% Working Disabled Program** offers low-cost medical premiums. The program is available to disabled individuals who are employed and currently receiving or previously received Social Security Disability benefits.
- ◆ The **Spousal Impoverishment Program** provides no Share of Cost Medi-Cal. The program is available to married couples or registered domestic partners where one spouse is residing in a Long-Term Care facility while the other lives at home or if both live at home, and one spouse is participating or requesting to participate in the Home and Community Based Services (HCBS) Waiver Programs or the In-Home Supportive Services (IHSS) Program.

For more information about these options, contact your Eligibility Worker.

FAQs (Frequently Asked Questions Continued)

Q. If I paid a medical bill to a health care provider who does not accept Medi-Cal, will this payment count towards meeting my Share of Cost?

A. Yes, but you must provide proof of payment to your Eligibility Worker so the paid amount can be applied towards your Share of Cost. This also applies to medical related services not covered by Medi-Cal. **Note: Personal care services** paid to an independent provider **must be prescribed** by a licensed physician and included in a plan of care to qualify as a personal care expense.

Q. Can I use medical bills that I charged to my credit card?

A. Yes, however, you must provide the credit card statement showing that you charged the bills to that account. The amount charged will be applied towards the Share of Cost month in which the bill was paid. Interest charges cannot be used to meet your Share of Cost.

Q. What if I have a large bill, can I use it to meet my Share of Cost over several months?

A. Yes, if a monthly payment plan is made with the provider. For example, if you have a bill for \$1,000.00 and your Share of Cost is \$100.00, you may request to set up a payment plan with your health care provider to pay \$100.00 per month. Each \$100.00 payment will satisfy your monthly Share of Cost for ten months.

Q. How will my Share of Cost affect my IHSS services?

A. Any Share of Cost balance that exists when your IHSS provider's timesheet is submitted will be deducted from your provider's paycheck and used to meet your Medi-Cal Share of Cost. You are then responsible to pay your provider the amount that was deducted from his/her paycheck. Be aware that you may not use a payment made to your IHSS provider to meet an existing or remaining Medi-Cal Share of Cost balance. **Note:** The above policy **does not** apply to persons receiving IHSS-Residual benefits. Individuals receiving IHSS-Residual benefits must provide the proof of payment to their Medi-Cal Eligibility Worker so it can be applied to meet their Medi-Cal Share of Cost.

Q. I paid my doctor for medical services that are not covered by Medi-Cal; can I use this expense to meet my Share of Cost?

A. Yes, as long as it was a medically necessary expense. For example, a trip to the spa to ease your stress would not qualify as a medically necessary expense. Consult your healthcare provider for more information on what services are covered or not covered by Medi-Cal.

STILL HAVE QUESTIONS?

CONTACT OUR CUSTOMER SERVICE CENTER - OR - ONE OF THE AGENCIES BELOW FOR ASSISTANCE:

Customer Service Center	1-866-613-3777	Health Consumer Center of Los Angeles	1-800-896-3202
	1-626-569-1399	Citrus Valley Health Partners	1-626-851-2748
	1-310-258-7400	Maternal and Child Health Access	1-213-749-4261
	1-818-701-8200		