

Healthcare Coverage for Adults in Los Angeles County



Medi-Cal program provides no- or low-cost healthcare coverage to persons who are aged (65 and over), blind, disabled, or pregnant, and children up to age 21. Some parents and other adults may also be eligible for Medi-Cal, e.g., caretaker relatives, refugees, etc. In LA County, you may apply directly at the local Department of Public Social Services (DPSS) office or call toll-free 1-877-597-4777 for more information.

1931 (b)* is a Medi-Cal program for families with children up to age 18 (19 if the child is in school), where one parent is absent, disabled, deceased, or underemployed. It also covers CalWORKS-linked pregnant women. For more information call your local Department of Public Social Services office or call toll-free 1-877-597-4777.

Private/Public Partnership (PPP)* is a partnership between the Los Angeles County Department of Health Services (DHS) and community health providers who are committed to providing quality outpatient health services to low income, uninsured children and adults. For more information, call toll-free 1-800-427-8700.

Ability-To-Pay (ATP)* provides a full range of medically necessary services, including medications, at LA County hospitals or clinics for children and adults who cannot afford to pay for their care and are not eligible for full-scope Medi-Cal. For more information, call toll-free 1-800-378-9919.

Family Planning, Access, Care & Treatment (Family PACT) provides health services to low income women, men and minors without health care coverage for family planning services, may be eligible. For more information, call toll-free 1-800-942-1054.

Access for Infants and Mothers (AIM)* provides healthcare coverage for uninsured pregnant women up to 60 days post-partum. To qualify, women must be no more than 30 weeks pregnant, California residents for at least 6 months, not eligible for no SOC Medi-Cal, uninsured, and have incomes within AIM guidelines. Women with separate maternity deductibles or co-payments over \$500 may also qualify. For more information, call toll-free 1-800-433-2611.

Health Insurance Premium Payment (HIPP) program is a special state Medi-Cal program that can help adults who are eligible for Medi-Cal and are seriously ill with high-cost medical bills and have or had access to private health coverage pay their health insurance premiums. For more information, call toll-free 1-800-952-5294 or contact your local DPSS office.

Outpatient Reduced-Cost Simplified Application (ORSA)* provides outpatient services, including emergency services and medications, to children and adults who use LA County facilities and are not eligible for any health insurance coverage. For more information, call toll-free 1-800-378-9919.

Healthy Way LA provides no-cost medically necessary outpatient primary care and preventive services to low-income adults who are age 19-64 and have one chronic condition, age 63-64, or frequently access care at DHS or PPP sites. Care is provided at participating health centers, clinics and hospitals. For more information, call toll-free 1-877-333-4952.

***Income tables on reverse**

For information on other free and low-cost health services for adults and pregnant women in LA County, call toll-free 1-800-427-8700

Income Levels Effective April 1, 2011 to March 31, 2012

Public / Private Partnership

| Family Size | Monthly Income Limit |
|-------------|----------------------|
| 1 | At or below \$1,207 |
| 2 | At or below \$1,631 |
| 3 | At or below \$2,054 |
| 4 | At or below \$2,478 |
| 5 | At or below \$2,901 |
| 6 | At or below \$3,324 |
| 7 | At or below \$3,748 |
| 8 | At or below \$4,171 |
| 9 | At or below \$4,595 |
| 10 | At or below \$5,019 |

1931 (b) Applicants

| Family Size | Income Limit (monthly) |
|-------------|------------------------|
| 1 | \$908 |
| 2 | \$1,226 |
| 3 | \$1,545 |
| 4 | \$1,863 |
| 5 | \$2,181 |
| 6 | \$2,500 |
| 7 | \$2,818 |
| 8 | \$3,136 |
| 9 | \$3,455 |
| 10 | \$3,774 |

ORSA

| Family Size | Monthly Income Limit* |
|-------------|-----------------------|
| 1 | At or below \$1,207 |
| 2 | At or below \$1,631 |
| 3 | At or below \$2,054 |
| 4 | At or below \$2,478 |
| 5 | At or below \$2,901 |
| 6 | At or below \$3,324 |
| 7 | At or below \$3,748 |
| 8 | At or below \$4,171 |
| 9 | At or below \$4,595 |
| 10 | At or below \$5,019 |

* Net family monthly income means the gross income minus deductions.

Ability-To-Pay (ATP)

*Zero Liability

| Your Family Size | Monthly Income and other Resources for Emergency and Clinic Care | Monthly Income and other Resources For Hospitalizations |
|------------------|--|---|
| 1 | Up to \$ 908 | Up to \$ 616 |
| 2 | Up to \$ 1,226 | Up to \$ 766 |
| 3 | Up to \$ 1,545 | Up to \$ 951 |
| 4 | Up to \$ 1,863 | Up to \$ 1,116 |
| 5 | Up to \$ 2,181 | Up to \$ 1,276 |
| 6 | Up to \$ 2,500 | Up to \$1,431 |

* Income amounts do not change each year.

Access for Infants and Mothers (AIM)

| Household Income (after Income Deductions) | | Total Cost (1.5% of Adjusted Household Income) |
|--|--------------------------|--|
| Family Size | Monthly Household Income | |
| 2* | \$ 2,453 to \$ 3,679 | \$ 442 to \$ 662 |
| 3 | \$ 3,090 to \$ 4,634 | \$ 556 to \$ 834 |
| 4 | \$ 3,726 to \$ 5,589 | \$ 671 to \$1,006 |
| 5 | \$ 4,363 to \$ 6,544 | \$ 786 to \$ 1,178 |
| 6 | \$ 5,000 to \$ 7,499 | \$ 900 to \$ 1,350 |
| 7 | \$ 5,636 to \$ 8,454 | \$ 1,015 to \$ 1,522 |

*Pregnant woman counts as 2.