



Community Resource Guide

Navigating **Healthy Aging** for Seniors and Their Families



Kheir Clinic
이웃케어클리닉
Kheir Community Clinic
Clínica Kheir

Community Resource Guide: Navigating **Healthy Aging** for Seniors and Their Families

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Kheir Clinic

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****Please be advised that agencies and programs discussed in the Guide may change their requirements, allowances, and procedures at any time. To see the most current information, please visit the respective agency's or program's website.***

A Message from Kheir

We are pleased to bring you our latest **Community Resource Guide - Navigating Healthy Aging for Seniors and Their Families**. While California has been on the forefront in increasing the public's access to affordable healthcare with the nation's largest Medicaid program, healthcare continues to be inaccessible or underutilized by many families.

As a significant percentage of the Latino community is maturing, we have identified a pressing need to inform and facilitate planning for families with older adults. Kheir has compiled information to direct active healthy aging and also assist your family navigate the complexities of healthcare and available benefits and services for the older adults. These tools will empower you to make informed choices ranging from the two programs most utilized by the elderly, Senior Medi-Cal and Medicare, to affordable housing, food assistance, palliative care, end-of-life planning, and more.

Kheir Clinic was founded in 1986 by a decorated World War II hero Colonel Young Oak Kim, in response to a United Way study to bridge the gap between the available resources and the Korean immigrant community's access. We began as a one-room social service referral agency. Since, Kheir has evolved into a multi-service Federally Qualified Health Center (FQHC) and a medical home for over 19,000 patients, served at seven sites.

Kheir Clinic remains steadfast in our mission to increasing the community's access to linguistically and culturally-sensitive quality primary healthcare and human services support. We hope you will find the Community Resource Guide useful, regardless of your age. Kheir extends our sincere gratitude to Cedars-Sinai for their support in funding this vital project.

Erin Pak
CEO, Kheir Clinic
May 2023



May 2023

Dear Kheir Clinic Community,

In 2022, Kheir Clinic launched their first Community Resource Guide in both English and Korean, which was supported by a grant from Cedars-Sinai focused on health equity. Due to an overwhelming response from the community, we are proud to support the launch of the second iteration of the Community Resource Guide, now available in English and Spanish.

Navigating local healthcare and social service systems can pose many challenges for older adults, their children, extended family, caregivers and friends. As a trusted leader in the community, Kheir Clinic created this guidebook to be used as a valuable resource in addressing barriers to access and equip individuals with the resources to navigate complicated care systems more easily.

Kheir Clinic has compiled information into a central location for all of us to access, which includes resources such as assisted living, in-home supportive services, food and nutrition programs, insurance coverage and more.

Cedars-Sinai is grateful to have had the opportunity to support Kheir Clinic's efforts in developing an updated version of the guidebook. We look forward to learning how this guidebook leads to smoother navigation and connection to resources for the community over the coming years.

Kheir Clinic, thank you for your leadership in this space, and thank you to the Kheir Clinic community for your guidance and collaboration in these efforts.

Sincerely,
Cedars-Sinai
Community Benefit Giving Office



May 2023

Dear Kheir Clinic Community,

This year I am proud to partner with Kheir Clinic as they launch their second iteration of the Community Resource Guide.

Equity matters, and it is my job as a public servant to ensure that we are providing resources and services to those who need it most. As a long-time advocate of equity and equality I know how important it is to have access to affordable healthcare, educational information and resources, and support from your local government.

For over 35 years, Kheir Clinic has provided linguistic & culturally sensitive quality primary healthcare and human services to the underserved and uninsured residents of Southern California. Kheir Clinic has served as a bridge between the low-income, recently-immigrated, non-English speaking communities and local health and social service providers in LA.

As a trusted leader in the community, Kheir Clinic guide book will be a valuable resource in addressing barriers to access and equip individuals with the resources to more easily navigate complicated care systems.

I am proud to partner with Kheir Clinic for this initiative to continue fighting for equity in our healthcare system. I look forward to learning how this guide book leads to smoother navigation and connection to resources for the community over the coming years. Equity is our north star - and we will only get there, if we do so together.

With hope,

HEATHER HUTT
Councilwoman, 10th District

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About Kheir

Kheir Clinic's mission is to increase and provide access to linguistically- and culturally-sensitive, quality primary healthcare and human services to the underserved and uninsured residents of Southern California.

Kheir was established in 1986 to serve as a bridge between recently immigrated Koreans and local social service providers in the culturally dynamic Koreatown district of Los Angeles. Kheir was co-founded by Colonel Young Oak Kim, a decorated U.S. Army officer who served in World War II and the subsequent Korean War. He became a leading figure in philanthropy and left behind a legacy that is still a part of the fabric of Los Angeles today.

Kheir has since evolved into a broad-based agency, rendering comprehensive healthcare and human services to a diverse population through its clinics, Adult Day Health Care (ADHC) centers, and enabling services department. As the only Federally Qualified Health Center (FQHC) in the nation that offers a full suite of services in English, Spanish, Korean, Bengali and Thai, Kheir is uniquely positioned to serve the area's vulnerable populations with unparalleled linguistic and cultural competence.

Kheir Clinic is responsible for more than 19,000 patients and is poised to provide more than 80,000 visits this year. Kheir provides a variety of comprehensive, in-language medical services, including primary care, dentistry, optometry, mental healthcare, substance abuse services, prenatal care, pediatrics, podiatry, physical therapy, healthcare program enrollment assistance, and transportation to clinics.

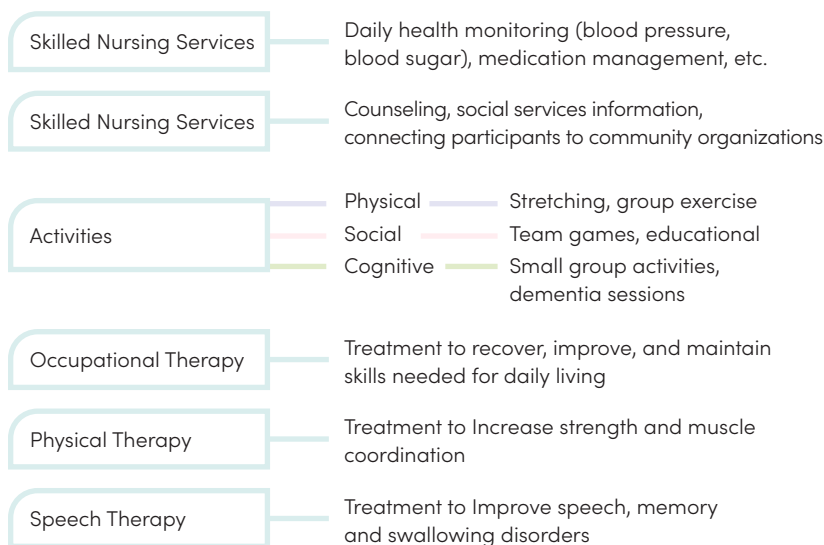
Kheir offers innovative, culturally-appropriate programs to address health disparities in the immigrant community, such as diabetes support groups and family workshops. Kheir's Patient Resources Department also assists more than 6,000 patients annually with applications for free and low-cost health coverage programs such as Medi-Cal, Medicare, My Health LA, and Covered California and serves as a bridge to critical social services that improve the social determinants of health.

Based in the Los Angeles neighborhood Koreatown, Kheir is uniquely experienced to serve those who have historically faced obstacles to accessing healthcare. Everyone is welcomed!



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Adult Day Health Care (ADHC)



The term Adult Day Health Care (ADHC) has been changed to Community-Based Adult Services (CBAS) in California, but because the name change is recent, “Adult Day Health Care” center is still commonly used. Eligible older adults and/or adults with disabilities can enroll in the CBAS program and receive care at ADHC centers during the day, maintaining or restoring their health to continue living safely in their homes.

CBAS programs require a primary care provider’s referral. The goals of ADHC/CBAS programs are to prevent inappropriate institutionalization and to promote independent living. Eligible adults can have CBAS and In-Home Supportive Services (IHSS) concurrently.

Nurses at the center can monitor seniors’ health conditions, including weight, body temperature, blood pressure, and certain conditions. ADHCs also provide professional nursing services and occupational, physical, and speech therapies. Occupational therapy helps to restore functions necessary for daily life, such as eating, bathing, and grooming.

Physical therapy emphasizes lower body exercises. Speech therapy helps with basic voice and language rehabilitation.

Furthermore, basic care services, health education, psychological counseling, dementia prevention and counseling are available. Each patient receives an individualized care plan.

Staff at ADHC/CBAS centers can advise seniors on benefits, connect them to services, and provide mental health support. Group activities at ADHCs enable the elderly to find and participate in programs that are right for them. ADHC/CBASs use a nutritionist to ensure that breakfasts and lunches suitable for a variety of diets are provided. Transportation from home to the center is also one of ADHC's services.

Most ADHC/CBAS centers are covered by Medi-Cal, but those who don't have Medi-Cal can pay out-of-pocket or use long-term care insurance.



Adult Family Homes

Adult family homes are single-family residences that provide nursing home services to seniors or individuals with disabilities. Typically, one to two caregivers provide care to four patients, but can accommodate up to six patients. Although this type of service is less expensive than memory care or nursing homes, it cannot offer extensive personal care 24 hours a day due to limited staff. It is not covered by Medi-Cal.

Advance Medical Directive

An advance medical directive is a document that stipulates whether an individual wish to be resuscitated or placed on life support with the aid of life-sustaining devices such as ventilators. If you are terminally ill and unable to make healthcare decisions on your own, you can designate someone to make medical decisions for you. Patients should fill out the advance directive form, review it with healthcare providers, and provide copies to their family members entrusted with making decision about medical treatment.

It is recommended that persons designated with the authority to make medical decisions be at least 18 years of age and knowledgeable about health history of the individual making the advance directive. By law, the decision-maker cannot be your doctor or someone who works for a hospital.

The medical decision-maker will decide whether to continue or stop life-sustaining treatments such as cardiopulmonary resuscitation (CPR), ventilator, dialysis, feeding tube, blood transfusion, or surgery. Advance directives may be amended at any time.

Advance directives can easily be found on the Internet, such as the websites like:

Prepare for Your Care (prepareforyourcare.org, info@prepareforyourcare.org) and AARP (www.aarp.org/caregiving/financial-legal/free-printable-advance-directives, 888-687-2277). Kheir can provide an official form of Advance Medical Directive from the State of California.

Affordable Low-Income Housing

As home prices in California continue to soar, there is a growing interest and need in low-income apartments. Affordable housing for seniors typically requires a waiting period of two to three years, but applicants may wait up to five years, which means that elders in need of low-income housing should place themselves on the wait list well in advance. Eligibility for low-income housing is determined as follows:

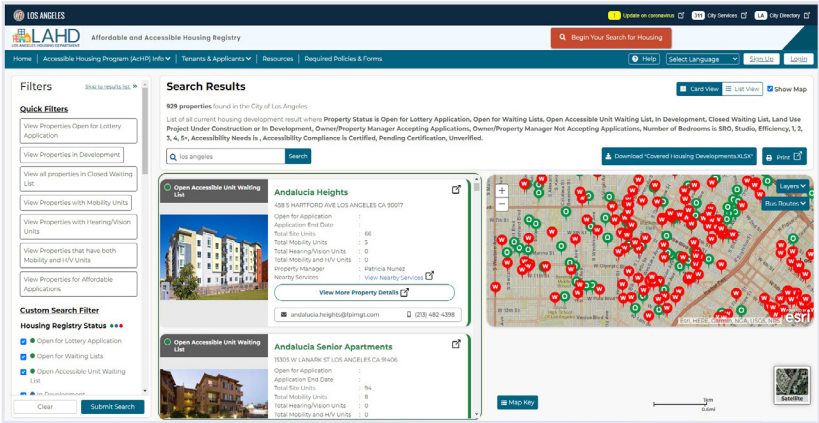
- Most applicants must be at least 62 years old; some low-income apartments are available to adults age 55 years and older.
- Rent is determined by the applicant's income.
- Applicant's monthly income includes allowances from SSI or their adult children.
- If your assets exceed the allowable limit, your application may be rejected. Individuals are allowed up to \$2,000 in savings and checking accounts, and couples are allowed up to \$3,000.
- Income standards vary by apartment and area, so you should contact the apartment management office.

If you are eligible, you may apply for affordable rental housing which is available for occupancy or has an open wait list. Documents required for the application include an identification card, proof of lawful immigration status, Social Security card, income records such as tax returns, and property documents such as bank records. Only one application per household can be submitted. Since application forms are different for each housing complex, you should contact the landlord or managing office to begin the application process.

Finding a Low-Income Apartment

Information on low-income housing can be found online. You may begin your search with the Los Angeles Housing Department (LAHD) website at lahousing.lacity.org.

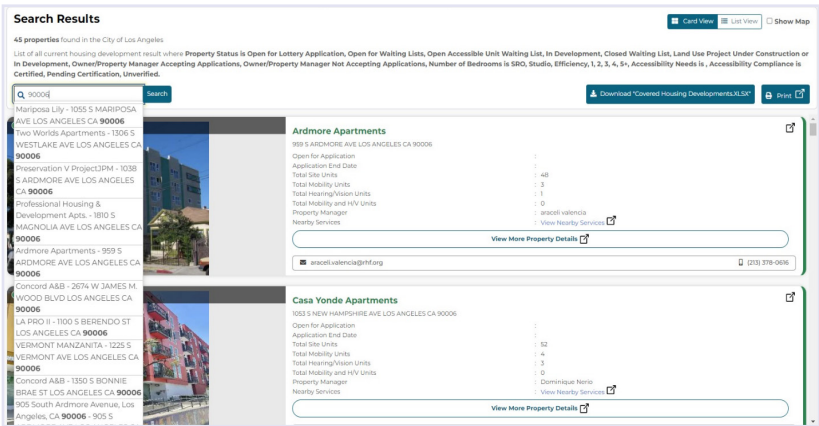
Enter your zip code to find low-income apartments in and near your area. Search results will indicate which properties are open for a wait list, making the search process easier.



<Source: City of Los Angeles Housing Department (LAHD) website>

As shown in the map, each apartment listing contains detailed information, marking the property as available for rent, open for wait list, under development, or closed. The properties are color-coded: red indicates closed wait lists, green indicates open wait lists, and blue indicates those currently under development or recently completed.

By entering a specific zip code, you may review low-income housing apartments nearby at a glance as shown in the map.

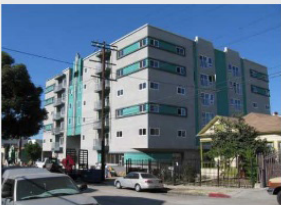


If you create an account on the LAHD website using your name, email, and phone number, you will receive an email with information about apartments that have a wait list.

List of Low-Income Apartments in Pico-Union/Koreatown

Below is a list of low-income apartments located in Pico-Union / Koreatown neighborhood. Information on apartments in other areas is also available on the LAHD website.

[Open Accessible Unit Waiting List](#)



Ardmore Apartments

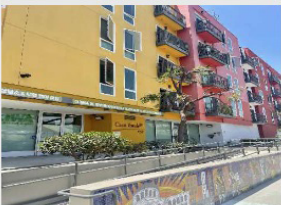
959 S ARDMORE AVE LOS ANGELES CA 90006

Open for Application	:	
Application End Date	:	
Total Site Units	:	48
Total Mobility Units	:	3
Total Hearing/Vision Units	:	1
Total Mobility and H/V Units	:	0
Property Manager	:	araceli.valencia
Nearby Services	:	View Nearby Services

[View More Property Details](#)

araceli.valencia@rhf.org (213) 378-0616

[Open Accessible Unit Waiting List](#)



Casa Yonde Apartments


1053 S NEW HAMPSHIRE AVE LOS ANGELES CA 90006

Open for Application	:	
Application End Date	:	
Total Site Units	:	52
Total Mobility Units	:	4
Total Hearing/Vision Units	:	3
Total Mobility and H/V Units	:	0
Property Manager	:	Dominique Nerio
Nearby Services	:	View Nearby Services

[View More Property Details](#)

casayonde@levinegroups.com (213) 252-7283

[Open Accessible Unit Waiting List](#)



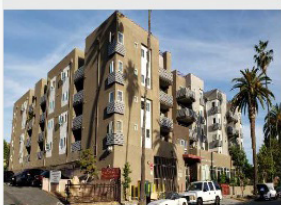
Harvard Heights Partnership LP

950 S HARVARD BLVD LOS ANGELES CA 90006

Open for Application	:	
Application End Date	:	
Total Site Units	:	47
Total Mobility Units	:	3
Total Hearing/Vision Units	:	1
Total Mobility and H/V Units	:	0
Property Manager	:	-
Nearby Services	:	View Nearby Services

[View More Property Details](#)

[Open Accessible Unit Waiting List](#)




Menlo Family Housing

1230 MENLO AVE LOS ANGELES CA 90006

Open for Application	:	
Application End Date	:	
Total Site Units	:	60
Total Mobility Units	:	6
Total Hearing/Vision Units	:	0
Total Mobility and H/V Units	:	0
Property Manager	:	-
Nearby Services	:	View Nearby Services

[View More Property Details](#)

Closed Waiting List



Casa Carmen Senior Apartments


1800 W 11TH ST LOS ANGELES CA 90006

Open for Application	:	
Application End Date	:	
Total Site Units	:	25
Total Mobility Units	:	11
Total Hearing/Vision Units	:	2
Total Mobility and H/V Units	:	0
Property Manager	:	Rosa Sosa
Nearby Services	:	View Nearby Services

View More Property Details

casacarmen@barkermgt.com
(323) 231-4174 Ext : 300

Closed Waiting List



Casa Shalom

1308 S NEW HAMPSHIRE AVE LOS ANGELES CA 90006

Open for Application	:	
Application End Date	:	
Total Site Units	:	30
Total Mobility Units	:	0
Total Hearing/Vision Units	:	0
Total Mobility and H/V Units	:	0
Property Manager	:	Richard Flores
Nearby Services	:	View Nearby Services

View More Property Details

rflores@1010dev.org
(213) 745-4387

Additionally, you can search for low-income housing apartments on the Los Angeles County Housing Resource Center website (housing.lacounty.gov) as the following.

Housing.LACounty.gov


LOS ANGELES COUNTY HOUSING RESOURCE CENTER

English | Español | Select Language

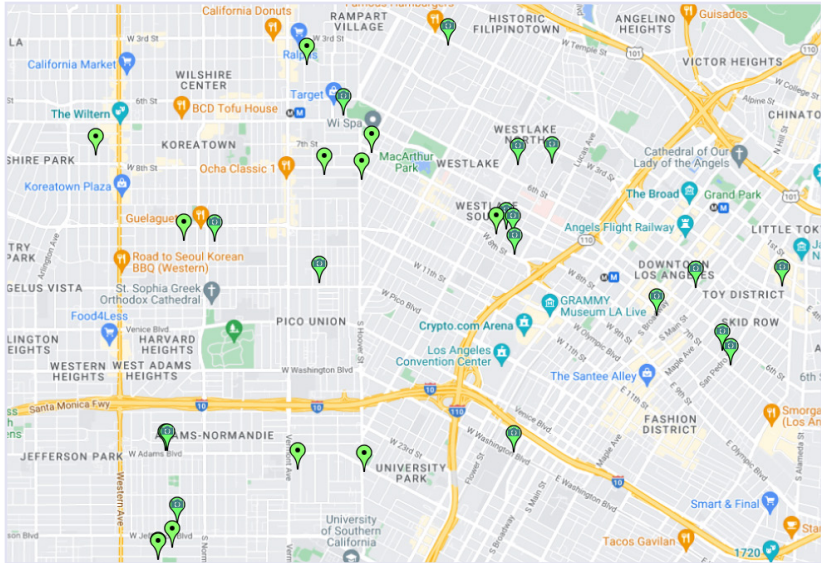
FIND RENTALS FOR SALE ADD LISTINGS LOGIN

Find your new home

Search Rentals by City, County, or ZIP Code



You can search for apartments by city, county, or zip code in the box "Find your new home" in the middle of the page. A map shows low-income housing apartments based on a search in Pico-Union and Koreatown, Los Angeles.



Green marks indicate that the wait list is still open. Although not shown on this map, red marks indicate that the waiting list is already full. If you find an apartment that has an open wait list, it is a good idea to put your name on the list and then call the apartment at least once every six months to confirm that your name is still on the list.

If you move, you must update your current address so that you will not be removed from the waiting list. Property managers may send you a letter asking if you still want to move into this apartment. If you do not respond, you may be removed from the wait list.

You should read the letter delivered to your current address carefully and follow instructions promptly. After moving in, tenants are required to regularly submit tax returns or other proof of income to prove their income eligibility for affordable housing.

Assisted Living Facilities

Assisted living facilities provide one room for one person or one room for two people. The facilities provide basic services such as dressing, bathing, toilet assistance, medication

management, and other services. Depending on the facility, benefits such as meal preparation and medication administration may be provided depending on the individual's health condition.

However, specific nursing duties such as those found in skilled nursing facilities are not available.

Patients who wish to enter an assisted living facility are usually referred by the hospital where they were admitted or must submit a statement detailing their health condition. If you have Medi-Cal/Medicare or long-term care insurance, the cost of a nursing facility is covered. If you have Medicare only, the length of stay and costs are not covered 100%. If you don't have health insurance, you'll have to pay out of pocket, but it is important to know the price in advance; the cost can range from \$2,000 to \$15,000 per month per person depending on the patient's condition and the facility. The 2022 median cost of assisted living facility in California is \$5,250 per month according to National Senior Living Cost Index.

The following is information about senior facilities located near Pico-Union/Koreatown neighborhoods, serving traditional Hispanic food. The information below is current as of spring 2023, but may change in the future. Kheir Clinic is not affiliated with any of these facilities.

Facility Name	Address Phone Number	Spanish- Bilingual Staff
Kingsley Manor	1055 N. Kingsley Dr. Los Angeles, CA 90029 323-661-1128	Nurse Support staff
Lakewood Manor North	831 S. Lake St. Los Angeles, CA 90057 213-927-1165	Nurse Support staff
Rosewood Assisted Living Facility	433 N. Kenmore Ave. Los Angeles, CA 90004 323-863-6563	Nurse Support staff
Sunny Hills Assisted Living	8717 W. Olympic Blvd. Los Angeles, CA 90035 310-659-4301	Nurse Support staff

If you are planning to apply for assisted living services, a prior visit is important. It is a good idea to plan visits at different times (once during the day, and at another time in the evening) to get a better sense of the environment and living conditions. Understanding the facility's schedule is also important. For example, if the patient remains in the facility to take a bath late in the evening, it may be considered an overnight stay, which will require an additional fee.

Useful Website for Seniors

When selecting facilities or assisted living programs for seniors, you may consult the following websites, which offer useful information.

- www.eldercare.acl.gov: This website connects seniors and their caregivers to public resources and government institutions such as the Department of Aging. You may research resources for the elderly in your area by entering your home zip code or city.
- www.medicare.gov: The official Medicare website allows you to locate and compare quality of care for nursing homes, hospitals, hospice facilities, and doctor offices. Just enter your zip code or city and choose what types of facilities you want to compare and research. You can also find hospitals or doctors with specific specialties.

Becoming a Caregiver

As our community ages, more and more people choose to become caregivers for their loved ones or neighbors. The following information includes additional details on IHSS and becoming a caregiver.

The requirements for becoming a caregiver are:

- Permanent resident, U.S. citizen, or an applicant for permanent residence who holds a work permit
- No criminal record
- Valid email address

If you want to become a caregiver, you must complete an orientation, application form, and background check (Live Scan). First, call the Los Angeles County IHSS office at **888-822-9622** and follow the instructions to dial the number and speak to an agent. The agent will ask for your personal information and your email address. An email address is essential, as all training instructions and information will be sent via email.

The orientation covers the basic requirements of being a caregiver, filling out a time sheet, and calculating regular and overtime pay. After completing your orientation, you must fill out the SOC 426 and SOC 846 documents. You are certifying that you have completed orientation and have applied to become a caregiver, and that you agree to the terms and conditions. Completed documents must be sent to the IHSS office that has jurisdiction over your address, along with copies of your ID and a copy of your Social Security card. After submitting the documents, you will receive a Live Scan request form in the mail.

Upon completion of the form, you must go to a provider to complete a background check. The fee ranges from \$30 to \$75. The background check provider information is detailed in the caregiver guidance email. The background check step takes 1-2 months.

After passing the background check, you will receive an official letter in the mail stating that you are permitted to work as a caregiver. From then on, the applicant will be able to work as a caregiver and receive retroactive pay for time worked for up to 3 months prior to receiving the official letter.

You must complete and return both Form W-4 and Form DE-4 to receive hourly benefits for IHSS services. Form W-4 is for the federal government and Form DE-4 is for the State of California. The government will not introduce caregivers to patients in need; caregivers must identify potential patients on their own.

Q. What is the hourly wage of a caregiver? How many hours can you work?

A. The current minimum wage for a caregiver is \$15.50 per hour as of 2023 in California. Working hours are limited to a maximum of 66 hours per week and 264 hours per month, except in special cases. If you work more than that, you will receive a warning from the IHSS office. If you receive 3 warnings in a year, you will be barred from working as a caregiver for one year. After one year, you will have to complete the application process from the beginning once again. The same is true if more than a year has passed since you last worked as a caregiver.

Q. I want to get caregiver health insurance. How do I apply for it?

A. To be eligible to apply for caregiver insurance, you must work at least 74 hours per month for two consecutive months. You can apply by calling the IHSS Insurance Plan at **855-727-2756** and have information sent to you. Caregiver insurance is similar to benefits through Medi-Cal. Premiums are as low as \$1 per month with a \$5 copay. All Los Angeles County caregiver insurance companies are through L.A. Care Health Plan. However, for caregiver insurance the primary care physician is usually a doctor who belongs to a university hospital (LAC-USC) affiliated with Los Angeles County.

CalFresh/Food Stamps

CalFresh, also known as Food Stamps, is California's Supplemental Nutrition Assistance Program (SNAP), which provides financial assistance for low-income families to purchase food. When you sign up for **CalFresh**, you receive a card which works like a debit card to buy food at a grocery store.

The table below summarizes the qualifications for *CalFresh*.

Requirement	Eligibility and Benefits	Immigration Requirements
Age	No restrictions	
Immigration status	Permanent resident, U.S. citizen, T (victim of human trafficking) or U Visa (victim of criminal activity)	Allowed benefits
	Deferred Action for Childhood Arrivals (DACA), undocumented immigrants, student visa holders, work visa holders	Not Allowed benefits
Income	Below 130% of the federal poverty line* (see FPL Table on the next page)	
Assets	Less than \$4,250 if there is an elderly (age 60 or older) or disabled person in the family; \$2,750 or less for those without elderly or disabled family members living in the home	
Items available for purchase with <i>CalFresh</i>	Groceries such as rice, bread, cereal, meat, and seeds to be grown for food	
Items not available for purchase	Hot food (food that has already been prepared and put in food warmers), nutritional supplements, toothpaste, soap, alcohol, tobacco, pet food	
Miscellaneous	Children living with their parents are recognized as a family member until the age of 22; even if they do not receive benefits, other family members can receive them	

Immigration Status

CalFresh is available only to permanent residents, U.S. citizens, or those holding a valid immigrant visa. Non-residents and non-citizens may apply if they have a T or U Visa. However, student visas (F-1), work visas (H-1B), Deferred Action for Childhood Arrivals (DACA), and undocumented immigrants cannot apply. If there are undocumented members of the family, only lawful residents may receive **CalFresh** benefits. If three people in a family of four have legal immigration status, but one does not, only three people can receive **CalFresh**.

Income

As **CalFresh** is a benefit for low-income families, the applicant's income must meet specific criteria. When calculating family income, you must also include the income of the undocumented family member. Low-income is defined below 130% of the Federal Poverty Level (FPL), however, most **CalFresh** households are subject to a gross income determination test. Gross Income is all non-excludable income from any source including all earned income and all unearned income. The maximum gross allowed is 200% of FPL, and the specific amount is as follows.

Household Size	Net Income (100%)	Net Income (130%)	Max. Income (200%)
1	\$1,215	\$1,580	\$2,430
2	\$1,643	\$2,136	\$3,287
3	\$2,072	\$2,693	\$4,143
4	\$2,500	\$3,250	\$5,000

**As of January 2023.*

<Source: Los Angeles County Department of Public Social Services (DPSS)>

As shown in the table, the monthly income standard varies depending on the number of families. Monthly income must be calculated before taxes (gross). For single-person households, if your monthly income is \$1,473 or less, you are eligible to apply for **CalFresh** because you meet the low-income criteria.

Below is a list of expenses that can be deducted from your income. This is an acknowledgment of unavoidable living expenses, and the remaining net income after deducting these expenses from your total income affects your **CalFresh** eligibility. Below is a list of exclusions from income.

- 20% of earned gross income
- Standard Deduction: family of 1-4 = \$193, family of 5 = \$225, family of 6 and more - \$258
- Excess Shelter (rent) up to \$597
- Standard Utility Allowance (SUA) up to \$487
- Child Support Payments and/or Dependent Care
- Medical Deduction: expenses exceeding \$35 per month for elderly or disabled members

Assets

If you are 60 years of age or older, owned property also affects **CalFresh** eligibility. The assets total, excluding one home and one vehicle, means your household's total net worth, which must be less than \$2,750. If any family member is an elderly or disabled person, the total resource limit is up to \$4,250. Things considered assets include bank accounts (checking and savings), stocks, trusts, and mortgages.

Contents of Benefit

If you apply for **CalFresh** and are approved, the amount of benefits you receive will vary depending on your income and family size. The benefit amount was previously provided in the form of a coupon, but now it is issued in the form of a debit card (Electronic Benefit Transfer or EBT card) with the benefit amount preloaded on the card. Beneficiaries can use the card to buy groceries at local grocery stores including Ralphs, Vans, etc., and the benefit amount is automatically credited to the card each month.



*Sample EBT card
<Source: LA County
Department of Public
Social Services (DPSS)>*

If your EBT card is lost or stolen, you can report it by calling **877-328-9677**. If you report a lost card, your account will be temporarily suspended and a new card will be issued.

Application Procedures

Required documents require a permanent resident card or proof of citizenship, identification (ID), Social Security card, utility bill, proof of income (pay stubs, tax returns), and proof of property (bank statements). You can apply by phone, mail, or online.

- **Phone:** If you live in Los Angeles County, call the Department of Public Social Services at **877-847-3663**.
- **Mail:** Contact the Department of Public Social Services to have your **CalFresh** application sent to your home. Fill out the application and send it back to DPSS. Below are the phone numbers for the Los Angeles County Department of Public Social Services.
- **Online:** Apply online on the **CalFresh** website: (www.get.calfresh.org) or BenefitsCal (www.benefitscal.com) or on the county social services website.

Places that assist with CalFresh applications

- LA County Department of Public Social Services (DPSS): 2415 W. 6th Street, Los Angeles, CA 90057 | **310-258-7400**
- Bresee Foundation: 184 Bimini Place, Los Angeles, CA 90004 | **213-387-2822**
- Central City Neighborhood Partners (CCNP): 501 S. Bixel Street, Los Angeles, CA 90017 | **213-482-8618**
- CALIF: 634 S. Spring Street, Los Angeles, CA | **213-627-0477**

After Applying for CalFresh

After the application is submitted, an official will schedule a phone interview. The exact date and time of the interview will be sent to you by mail, and you must prepare the necessary documents ahead of your interview.

CalFresh approval must be decided within 30 days of receipt of the application. In case of emergency, they can decide whether or not to approve your benefits within 3 days. You may qualify for emergency **CalFresh** benefits if:

- Your household makes less than \$150 in monthly income and has less than \$100 on hand at the moment
- Your household's combined monthly income and cash on hand are less than your household's combined monthly rent and utilities
- You are a seasonal farm worker and have less than \$100 on hand right now.

In California, people 65 years of age or older or people with disabilities who receive Federal Supplemental Security Income (SSI) are also eligible for **CalFresh** benefits. Being a **CalFresh** recipient will not impact your SSI amount. If one of your family members already receives **CalFresh**, the SSI recipient does not need to submit a new application. Your household needs to register an additional family member to receive **CalFresh** benefits. However, if another adult pays for 50% of expenses in household and lives above FPL, senior isn't eligible.

Through the Restaurant Meals Program, you can use your EBT card to buy food at participating restaurants. Eligible persons are the homeless, people age 60 years of age or older, and the disabled. You can find participating restaurants from California Department of Social Services (www.cdss.ca.gov/rmp) & Los Angeles County Department of Public Social Services (dpss.lacounty.gov/en/food/meals.html). If you see this sign displayed at the restaurant, you may use your EBT card to eat there.



Frequently Asked Questions

Q. How long do CalFresh benefits last?

A. You must continue to renew your **CalFresh** benefits to remain eligible. Renewal documents must be submitted online or by mail every six months to one year (please see the following form, SAR7).

SAR 7 Eligibility Status Report Form

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY				CALIFORNIA DEPARTMENT OF SOCIAL SERVICES CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES	
SAR 7 ELIGIBILITY STATUS REPORT			REPORT MONTH _____		
TO KEEP YOUR BENEFITS COMING ON TIME, PLEASE SIGN THE FORM AFTER _____ 1st AND RETURN IT BY _____ 5th					
SUBMIT MONTH		SUBMIT MONTH			
CASE NUMBER HERE _____			NEED HELP? (County Specific instructions w/county url)		
			[DIST. ID HERE]		
			Worker Name: _____		
			Worker Phone: _____		
			County: _____		
			Street address: _____		
			City, State, Zip Code _____		
			BAR CODE: _____		
Check the box if you would like to STOP getting any of the following: <input type="checkbox"/> STOP my CalWORKs <input type="checkbox"/> STOP my CalFresh <input type="checkbox"/> STOP my Medi-Cal					
1. Has anyone moved into or out of your home (including newborns) or did you move in with someone else since you last reported? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, complete the section below)					
Date of Move (mm/dd/yyyy)		Name (First, Middle, Last)		Date Of Birth	Relationship To You
Regularly Purchase And Prepare Food Together?					
<input type="checkbox"/> In <input type="checkbox"/> Out / /		/ /		/ /	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> In <input type="checkbox"/> Out / /		/ /		/ /	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> In <input type="checkbox"/> Out / /		/ /		/ /	<input type="checkbox"/> YES <input type="checkbox"/> NO
2. Have there been any changes to your address since you last reported? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, complete the section below)					
New Address: _____ Date Moved: _____					
Mailing Address (if different than above) _____					
3. If you have moved since you last reported please fill out the section below:					
Your rent or mortgage per month now?			If paid separately, your property taxes and home insurance per month now?		
\$ _____			\$ _____		
Do you have utility costs that are not included in your rent or mortgage payment? If so, check which ones:					
<input type="checkbox"/> Phone <input type="checkbox"/> Trash <input type="checkbox"/> Water <input type="checkbox"/> Electric/Gas <input type="checkbox"/> Other heating or cooling costs					
4. CalWORKs only: Is anyone in your home:					
A. Running from an outstanding warrant?					
B. Found by a court to be in violation of probation or parole?					
<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, complete the section below)					
Name of person		A or B from above	In what state was the warrant issued, or did violation happen?		Date of warrant or violation
5. Medical Costs: If anyone who gets CalFresh and is 60 years old or older, or disabled, had an increase in medical costs please complete the section below and attach proof:					
Who had the change?			Amount of increase:		
\$ _____			\$ _____		
6. Child Support: Did anyone who gets CalFresh have a change in the amount of child support they have to pay since they last reported? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, complete the section below and attach proof.					
What was the amount paid in the Report Month? \$ _____					
Who paid support? _____					
7. Dependent Care: If anyone who gets CalFresh and either works, is looking for work, or is going to school, had an increase in out-of-pocket dependent care costs since they last reported, please complete the section below and attach proof:					
What was the amount paid out-of-pocket in the Report Month? \$ _____					
Who paid: _____ List dependent(s): _____					
8. Did anyone: Get, buy, sell, trade or give away any property, land, homes, cars, bank accounts, money, payments (such as lottery/casino winnings, back benefits from social security), or other property items since last reported?					
<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, complete the section below and attach proof. If you need more space, attach a separate piece of paper).					
Who?	Type of Property?	When?	Amount/Value?	<input type="checkbox"/> Bought <input type="checkbox"/> Sold <input type="checkbox"/> Gave Away <input type="checkbox"/> Spent	
				<input type="checkbox"/> Got as a gift <input type="checkbox"/> Traded <input type="checkbox"/> Won <input type="checkbox"/> Other	
SAR 7 (12/14) ELIGIBILITY STATUS REPORT - FOR CASH AID AND CALFRESH - REQUIRED FORM - SUBSTITUTES PERMITTED					
PAGE 1 OF 2					

Q. I applied for CalFresh, but was rejected. Why?





A. After you apply, you will receive a letter notifying whether or not your application has been approved. If it has been rejected, the reasons will be outlined in the letter. Usually **CalFresh** applications are rejected if an applicant exceeds the income requirements. If you have any questions about your **CalFresh** eligibility determination, you may contact your caseworker at the Department of Public Social Services office where your application was filed.







Q. I am not a citizen, but my children are. Can my children apply for CalFresh benefits?

A. Yes. Even if you cannot apply because you do not have citizenship or permanent resident immigration status, your children can apply if they are citizens or legal permanent residents.

Q. I'm trying to buy groceries online. Can I pay with my EBT card?

A. This option is offered by some online retailers that accept EBT. The designated places include Amazon, ALDI, Walmart, and Instacart. After purchasing groceries, there is no additional charge for in-store pickup, but delivery charges may apply if you request delivery to your home. Delivery charges cannot be paid with an EBT card.

Stores That Accept EBT	Online	In-Store
	X	X
	X	
		X
		X

Stores That Accept EBT	Online	In-Store
	X	X
		X
	X	X
		X
	X	X
	X	X

<Source: Supplemental Nutrition Assistance Program (SNAP)>

Cancer Screening Program for California (CDP)

California provides state residents with free or low-cost cancer screening programs, called Cancer Detection Program (CDP) for both men and women. This is available to all eligible California residents regardless of immigration status including undocumented individuals.

Low-income men who are without insurance and who do not qualify for Medicare or Medi-Cal may use the Prostate Cancer Treatment Program (IMPACT) to screen for prostate cancer. Low-income women may take advantage of the Breast and Cervical Cancer Treatment Program (BCCTP).

Women may be entitled to low-cost screenings for gynecologic cancers. Every Woman Counts (EWC) offers free cancer screenings for women. To read more details on EWC, please read Page 32.

For more information on California CDPs, please visit www.dhcs.ca.gov/services/cancer/Pages/default.aspx.

Cash Assistance Program for Immigrants (CAPI)

The Cash Assistance Program for Immigrants (CAPI) is a cash aid program administered by the State of California for permanent residents who are unable to receive Social Security retirement benefits or federal SSI benefits because of their immigration status. To be eligible for CAPI, you must meet all of the following eligibility requirements:

- California resident
- Age 65 or older, physically handicapped, or visually impaired
- Your monthly income must be less than your CAPI benefits
- Assets must be less than \$2,000 for an individual and less than \$3,000 for a couple
- You applied for Federal Supplemental Security Income (SSI) but were denied (you must provide proof)
- Those with a felony record, state officials, or out-of-state residents are not eligible to apply

Q. How much cash assistance will I receive if I apply for CAPI?

A. The amount varies from person to person, and deciding factors include income and family size. You receive benefits after a deduction from your income.

Q. How do I apply for CAPI? How long do benefits last?

A. You can apply for CAPI through your county social services department. In Los Angeles County, you may apply by calling 866-613-3777. CAPI is valid for 12 months once approved. However, you will need to submit your renewal documents once a year to keep your benefits. If your immigration status, income, marital status, etc. change, you must report it to the office immediately.

Q. Can I apply for CAPI while receiving SSI?

A. One of the conditions for applying for CAPI is that you must be ineligible to receive SSI. If you are eligible for SSI, you may not apply for CAPI.

Q. If I get CAPI, will it be a problem for me to obtain permanent residency or citizenship?

A. If you are not currently a permanent resident, but receive CAPI as a lawful resident, your application for permanent residence may be denied if you depend entirely on government benefits for your livelihood. However, if you receive CAPI as a permanent resident, you may apply for citizenship.

Community-Based Adult Services (CBAS)

Community-Based Adult Services (CBAS) replaced Adult Day Health Care (ADHC) services in 2012, however the latter term is still often used. CBAS is a Medi-Cal Managed Care benefit available to eligible Medi-Cal beneficiaries. For more information, please see Adult Day Health Care on Page 10.

Continuing Care Retirement Communities

Continuing care retirement communities are best suited to seniors who can lead a somewhat independent life. Nurses and social workers are always available on-site, and couples can stay together during different phases of the aging process. It is not covered by Medi-Cal, and initial costs vary on average from \$320,000 to \$1 million.

Emergency Medi-Cal

Anyone living in the State of California, regardless of immigration status, is eligible to apply for Emergency Medi-Cal. Unlike general (Regular) Medi-Cal, Emergency Medi-Cal can be used only in emergencies, and most of the cost of calling 911 to go to the hospital and testing in the emergency room is covered free of charge. Emergency Medi-Cal does not cover general care, dentistry, or vision.

End of Life Planning

Because we think of death as something looming in the distant future, we often panic when faced with a diagnosis of a terminal illness and do not know how to deal with the prospect of imminent passing. Terminal illness presents new challenges and responsibilities both for an individual diagnosed with an end-stage disease and family members entrusted with caring for a dying person. Hence it is important to prepare and educate oneself about end-of-life care. The first step is to gather all important legal and financial documents in order. These include:

Asset-related documents

- Bank accounts and balances
- Retirement pension documents (type of plan, account number)
- Tax returns
- Stocks (brokerage handling stocks, type of shares owned, number of shares)
- Vehicle registration
- Property title or deed

Health documents

- Advance medical directive (see below)
- Medical record
- Insurance card (Medi-Cal, Medicare, private insurance)
- Long-term care insurance terms and conditions

Miscellaneous

- Website account information such as email and social media (websites, user names, passwords)
- Birth certificate
- Driver's license, identification card, Social Security card
- Passport
- Power of attorney

Every Woman Counts (EWC)

If you sign up for Every Woman Counts (EWC), a Cancer Detection Program (CDP), you can receive free breast and cervical cancer screening and diagnostic services. When breast and cervical cancer is detected early, it is easier to

treat, so regular check-ups are essential. Undocumented women are eligible, as legal immigration status is not a requirement. EWC eligibility criteria includes:

- California residents
- Age 40 and older for breast cancer screening**
- Age 21 and older for cervical cancer screening
- Those without Medi-Cal or health insurance
- People with incomes below 200% of the Federal Poverty Level

Household Size	Monthly Income Before Tax
1	\$2,430
2	\$3,287
3	\$4,143
4	\$5,000

**As of January 2023.*

**If you have symptoms of breast cancer at any age, you may qualify for breast diagnostic services. Some warning signs and symptoms of breast cancer include a lump on the breast, mass or swelling in the breast or underarm, changes in the size or shape of breast, a change in skin texture and color (dimpling, puckering, redness, scaly skin, or thickening) of the breast or nipple, and/or nipple discharge and breast pain.



Kheir Clinic helps enroll My Health LA patients into cancer screening programs. After signing up, you may also receive free examinations and screenings at Kheir Clinic.

Funeral Accommodations

As the population ages, concerns about life and expenses after retirement is increasing. In a 2021 survey of 238 Koreatown area residents conducted by Kheir Clinic, 27% of respondents indicated that they would like to learn more about funeral procedures and costs. This reflects a trend of increasing concern about end of life care, and related services such as will preparation, funerals, and cemetery plots.

This section will guide you through these important decisions and issues.

Although it may seem far away, it is also a good idea for you and your family to pre-arrange a funeral and/or burial. The sudden death of a family member is not only psychologically traumatizing, but also causes concerns about whether the decedent should be buried or cremated. The cost may also be a challenge for families. If the funeral isn't planned in advance, the day before the funeral, your survivors must pay all funeral expenses and fill out a lot of paperwork, which adds stress to the family. Funeral planning and cemetery arrangements in advance will be of great help to you and your loved ones.

Procedures in Case of Death

- **Death at home:** If a loved one passes at home, call 911. The reporting officer will examine the individual who has died. If the cause of death is determined to be from natural causes, the family can contact the funeral director designated in advance to make final arrangements. If the cause of death is accidental or homicide is suspected, the body is transferred to the coroner's office for an autopsy, then transferred to the funeral home.
- **Death in a hospital or nursing home:** After a patient dies, the family will be contacted. If the family cannot be reached, the funeral director designated in advance when the patient is admitted to the hospital will be contacted. Families must obtain a death certificate from a doctor and a permit to bury the body in order to proceed with a funeral. The funeral home usually provides these administrative services.
- **Death in another state or abroad:** In case of death in another state, the body can be transported to the burial site, but you must first consult with the funeral director. Transporting the remains may incur additional costs. In case of death in a foreign country, cremation in the local area is advised, and the ashes can be inurned and returned to the family.

Funeral Method

Funeral methods can be broadly divided into burial and cremation. In the case of burial, coffin design is part of the process, as the coffin's outer construction materials and inner lining must be decided. The price of the burial varies greatly depending on the materials of the coffin, as well as the costs for a gravestone, burial, and embalming also vary depending on the final resting place, so it is recommended to compare prices among cemeteries carefully before choosing.

For cremation, the cost also varies by provider. You must rent a coffin to transport the body to the crematorium. A funeral director can hand over the cremated remains to the bereaved family without a funeral, or, like a burial, you may hold a funeral before the body is cremated.

Funeral Expenses and Insurance

According to the National Funeral Directors Association (NFDA), the 2022 average cost of a funeral with a burial in California is \$7,225. To prepare for end of life care in anticipation of costs, discuss or make arrangements with your family about funeral expenses in advance.

In funeral proceedings, most expenses are from the cemetery and the funeral home. The cost varies greatly depending on the funeral and method, and the cost can be paid in a lump sum or spread over 3 to 5 years. When you buy funeral insurance, you pay a fixed monthly premium for as long as you live, just like regular insurance. When a policyholder dies, insurance benefits are paid to the family and, in some cases, to the funeral director to make funeral arrangements. Funeral insurance can be purchased by anyone under 90 years of age or is terminally ill. The premiums vary according to age. Also, because benefits vary by insurance plan, it is recommended to compare and choose.

General (Regular) Medi-Cal

Eligibility Requirements

- Must be a permanent resident of California or citizen with a Social Security number
- Must have an income 138% or below the Federal Poverty Level

However, there are exceptions, and even undocumented persons under the age of 25 or DACA recipients and over the age of 50 may apply for Medi-Cal. *Beginning in January 2024, all Californians with low incomes between the ages of 26 and 49 regardless of their immigration status, will be able to apply for Medi-Cal.

Income

In order to apply for Medi-Cal, your income must meet the eligible low-income criteria, but as of 2023, it depends on your age. Adults ages 19–64 must have an income of 138% or below of the Federal Poverty Level, and children under the age of 18 must have parents with an income less than or equal to 266% of the Federal Poverty Level.

When determining whether your income is in the eligible low-income bracket, you must include your gross income. Let's take a closer look at the calculation method to determine if you qualify as low-income.

Here are a few examples. Assuming that Ms. Garcia, who lives alone, earns \$1,400 per month before taxes, she is low-income and is eligible for Medi-Cal benefits. Ms. Lopez, who lives with her husband without children, lives in a two-person household. Assuming that her monthly income is \$1,000 and her husband's monthly income is \$1,500, the combined monthly income of the husband and wife is \$2,500, which exceeds the low-income threshold.

As a final example, if you are a couple with a 10-year-old son, or a family of three, your income must not exceed 266% of the Federal Poverty Level if you want your son to be enrolled in Medi-Cal.

Q. What if my monthly income fluctuates?

A. You can submit a recent tax return as proof of income.

Q. What if I work part-time and my income is not constant?

A. If there is a fluctuation in income, add up the income for up to 3 months and then average the amount. Calculate your monthly income.

Q. How do I prove my income if I get paid in cash without a paystub?

A. You should get a letter from your employer. This employer letter should include your employer's name, address, phone number, your work schedule (how many hours per day, how many days per week), how much you are paid per month, and your employer's signature.

Q. What if I have no income?

A. If you have no income when you apply for Medi-Cal, you must submit a letter detailing when you stopped receiving income and how you are currently paying for your living expenses. The letter must include your name, date, and signature.

Immigration Status

Permanent residents of California or U.S. citizens with a Social Security number may apply for Medi-Cal. Victims of certain crimes such as human trafficking, domestic violence, and/or sexual violence with T or U visas are eligible to apply if qualified.

Undocumented immigrants age 0-25 and over 50 can also apply for Medi-Cal (Beginning of January 2024, Undocumented immigrants with low-income will be able to apply for Medi-Cal regardless their age). However, People on student visas (F) or expatriate visas (L or E) or expired visas cannot apply for Medi-Cal.

Q. I have applied for permanent residency, but I have not yet been interviewed. Can I apply for Medi-Cal?

A. It is possible. However, you must have a confirmation (I-797) issued by the USCIS that the application for permanent residence has been received.

Hospice Care

Hospice care is provided for individuals with a terminal illness when the doctor's diagnosis determines that the patient has less than six months to live. Medical staff, social workers, and religious leaders (if applicable) provide personalized

care and assist patients in the final stages of their lives. If the patients wish to receive services in their own home, hospice staff can move medical equipment to the patient's residence and provide transportation services to medical facilities when needed. At this stage, both Medi-Cal and Medicare expenses are fully covered.

In-Home Supportive Service (IHSS)

In-Home Supportive Service (IHSS) is a program that helps pay for services provided so that you can remain safely in your home. Seniors and patients who need the help of a caregiver may have difficulty walking or moving on their own. This could be that they have a history of heart disease, or may struggle with movement due to neuralgia or arthritis.

A caregiver comes to your home and helps you with daily tasks, such as meal preparation, cleaning, bathing, dressing, using the restroom, grocery shopping, and accompanying patients to medical appointments. Services not provided by the caregivers include paying utility bills, pet care, gardening, and transporting or accompanying the patient to social gatherings.

The IHSS program has more than 500,000 service providers or caregivers in California alone. However, the number of individuals needed for nursing care is expected to increase in the future as our population ages.

IHSS is designed to help people live and/or get treatment at home. It is recommended to use specialized nursing facilities for people with mid- or late-stage dementia rather than basic nursing services. People ineligible for IHSS include patients in hospitals, patients in assisted living facilities or nursing facilities, and individuals in prison.

Requirements for receiving home care assistance services

- Medi-Cal beneficiary
- California resident
- 65 years or older
- Must live in their own home, not in a nursing home

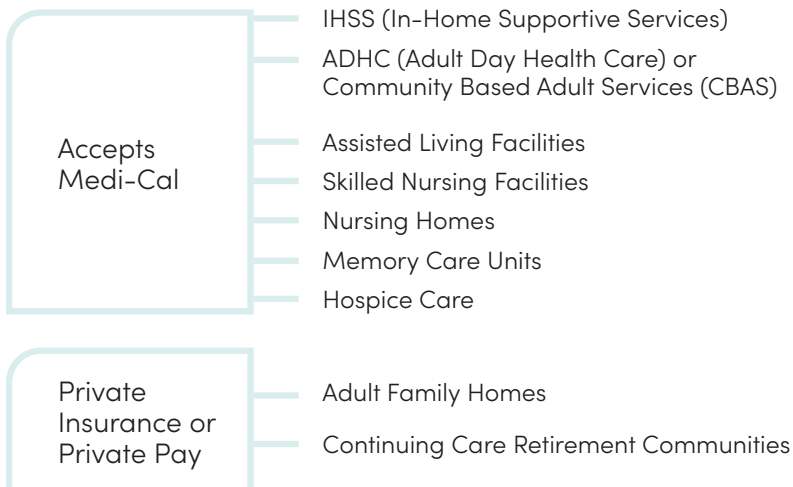
- Under the age of 65 only if low-income with a physical disability or serious illness (such as conditions that require dialysis, cancer, ALS)

Because IHSS is covered under Medi-Cal, members can receive services free of charge.

Apply for IHSS

Call the Los Angeles County Department of Public Social Services In-Home Supportive Services (IHSS) office at **888-944-4477**, and ask for a social worker to register. When registering, you may be asked for personal information such as name, address, phone number, and date of birth. After enrollment, an IHSS program medical certificate will be sent to the applicant's home. A medical certificate must be filled out by a doctor. The document will outline why the applicant needs a caregiver and explain difficulties performing daily activities. The medical certificate completed by the doctor can then be sent back to an official or caseworker at IHSS office for review.

Thereafter, the staff at the IHSS office who oversees the applicant's case will visit the applicant's home within a few weeks for an interview. They will examine the physical and mental condition of the applicant, assess how difficult it is for them to perform basic functions and review current medications. After the visit, the official considers all factors and determines how much caregiver service is needed per month.



Long-Term Care Facilities

Long-term care services are covered by Medi-Cal only when the patient has severe physical or cognitive impairments requiring daily medical care. Seniors in poor health receive extensive personal care from the medical staff who are available 24 hours a day. Since the wait list for nursing homes tends to be long, you may have to wait at least two years to enter. For this reason, the prospective resident's family should monitor the patient's condition and join the nursing home's wait list as early as possible.

My Health LA (MHLA)

My Health LA is a healthcare program for undocumented individuals (excluding permanent residents and citizens) living in Los Angeles County. By enrolling in My Health LA, you can receive free or low-cost general medical care, prescription medications, and vaccinations, including basic blood tests, at over 200 community clinics in Los Angeles County, including Kheir Clinic. You can also obtain specialty care, alcohol and substance abuse treatment, and more through the Los Angeles County Department of Health Services (DHS).

You can receive emergency treatment, surgery, and inpatient services at hospitals affiliated with Los Angeles County (LAC-USC, UCLA, etc.). You can apply for My Health LA throughout the year without a specific enrollment period.

Membership requirements are as follows:

- Los Angeles County resident
- Undocumented immigration status
- Age 26–49 (low-income individuals under the age of 26 and over the age of 50 are eligible for Medi-Cal. The age of 26–49 group will be able to apply for Medi-Cal effective January 2024)
- Low-income groups (138% below the Federal Poverty Level)

Individuals living with family members must meet specified income criteria. The Federal Poverty Level that applies to My Health LA is as follows:

Household Size	Monthly Income Before Tax
1	\$1,677
2	\$2,268
3	\$2,859
4	\$3,450

**As of January 2023.*

Proof of income must be provided:

- Pay stubs received within the last 45 days
- If paid in cash, a letter from your employer
- If self-employed, your tax return (including Schedule C)

If you receive your paycheck in cash, your employer's letter should detail your work schedule (how many hours a day, how many days a week), and how much you get paid. The letter should also be dated and include the employer's signature. If it is difficult to obtain a letter from your employer, you can submit a detailed description of the work you do, how many hours a day you work, and how much you are paid.

Q. I'm undocumented and I get financial support from my children. How do I prove my income in this case?

A. If you receive living expenses, rent, groceries, etc. from children or others, you can fill out and submit a separate In-Kind affidavit form. However, this form must be completed by the person providing financial assistance. Just write down how you help, how long you plan to support, and other relevant details. Only proof of income is required; the program does not track or monitor who wrote and signed it. The following form can be obtained from Kheir Clinic.

My Health LA Affidavit Form



IN-KIND INCOME AFFIDAVIT

Please complete if you are providing support to an applicant for My Health LA (MHLA) program

Patient Name: _____
Member ID: _____

Dear _____

Your name has been given to us as a provider of in-kind income for the above-mentioned person(s)

Please complete the brief questionnaire and return it to my attention as soon as possible using the enclosed, self-addressed envelope.

Thank you in advance for your cooperation.
Very truly yours,

California Enrollment Counselor

Date

Please complete: Person Providing Support:

Last Name:		First Name:		Phone: ()	
Street Address:			City:	State:	Zip:
I am providing: (Check all that apply)	Utilities <input type="checkbox"/>	Food <input type="checkbox"/>	Housing <input type="checkbox"/>	Cash Amount <input type="checkbox"/>	Please specify amount and frequency: _____
I expect to provide items (for how long?)			Please choose one: Earned <input type="checkbox"/> Free <input type="checkbox"/>		
Is applicant residing with provider? Yes <input type="checkbox"/> No <input type="checkbox"/>					
I declare the answers given are true and correct to the best of my knowledge. I understand the information provided will be used to screen the applicant for eligibility to various Federal, State, and County Programs. I understand that I will not be held responsible for any fees for medical services received by the applicant.					
Signature of person providing support _____			Date _____		

Applicant Receiving Support:

I declare the answers given are true and correct to the best of my knowledge. The information provided will be used to screen for eligibility to various Federal, State, and County Programs. I understand that if the information is found to be false, I will be held responsible for the full amount of fees for medical services received.	
Signature of Applicant _____	Date _____

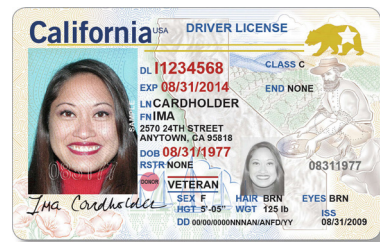
My Health LA requires that you provide proof of address, identification, and proof of income as a low-income earner to qualify. Acceptable forms of proof of identity include:

- Driver's license
- California's State ID for non-citizen (undocumented) immigrants (AB 60 ID) *
- Passport (an expired passport is also valid)
- Consulate ID
- Other photo identification

* California's State ID (AB 60 ID), which can be used to drive and to identify for undocumented immigrants, looks same as the regular driver's license. It should be marked with two green lines on the card (refer to the photo bottom left). There is another type of driver's license called Real ID (refer to the photo bottom right), which is limited to citizens and green card holders, per federal requirements.



CA DL/State ID (AB 60 ID)



Federal Real ID

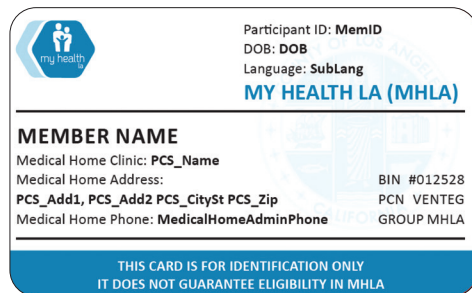
<Source: California Department of Motor Vehicles (DMV)>

My Health LA application requires that you have a driver's license with the green lines. Those with a valid visa, work permit or Real ID are not eligible for My Health LA.



If the address on your California driver's license is your current address, you need to provide proof of identification (ID) and income only. However, if you move or change your address, you must submit a utility bill received within 60 days, along with your ID.

After signing up, you will receive a paper membership card that looks like the sample. My Health LA needs to be renewed every year, and once you receive your card, you should keep it, as you will not receive a new card at renewal.



Sample My Health LA Membership Card
< Source: Los Angeles County Department of Health Services (DHS)>

Q. How do I renew?

A. When it is time to renew, you will receive a postcard via mail, which will detail the expiration date and what documents you need to submit. Bring your ID, address, and proof of income before the membership expires. You may use the renewal notice postcard as proof of address.

Q. Can I change the primary care physician or clinic I designated when signing up for My Health LA?

A. You may change your primary care physician or clinic under certain conditions:

- When the designated clinic is closed
- Within the first 30 days of joining My Health LA
- When renewing after 1 year
- When you have a major problem with your health or personal life

To change doctors and clinics, call the My Health LA Member Line at **833-714-6500**.

Q. Is My Health LA health insurance?

A. No. It is a healthcare program, not insurance.

Q. Can I go to the emergency room or have surgery with My Health LA alone?

A. You receive only basic general care with My Health LA. You can use the emergency room with separate Emergency Medi-Cal enrollment. Emergency Medi-Cal is also a limited Medi-Cal service that low-income undocumented people can join. You can apply for Emergency Medi-Cal through the Los Angeles County Department of Public Social Services at **866-613-3777**. Below is a list of urgent care and emergency rooms that can accept Emergency Medi-Cal.

Visit dhs.lacounty.gov/our-locations.

Name	Address Phone Number	Treatment Hours
Edward R. Roybal Comprehensive Health Center	245 S. Fetterly Ave. East LA, CA 90022 323-362-1010	Mon-Fri 8:00AM – 4:30PM Sat 8:30AM – 5:00PM Sun closed
H. Claude Hudson Comprehensive Health Center	2829 S. Grand Ave. Los Angeles, CA 90007 213-699-7000	Mon-Fri 7:30AM – 12:00AM Sat-Sun 8:00AM – 12:00AM
Hubert H. Humphrey Comprehensive Health Center	5850 S. Main St. Los Angeles, CA 90003 323-897-6000	General care: Mon-Fri 8:00AM – 4:30PM Urgent care: 8:00AM – 10:00PM
LAC USC Medical Center	1100 N. State St. Bldg. A 2nd Fl, Rm A2B Los Angeles, CA 90033 323-409-3753	Mon-Sat 8:00AM – 6:00PM Sun closed
LAC USC Medical Center	1983 Marengo St. Los Angeles, CA 90033 323-409-6681	24/7
Martin Luther King, Jr. Outpatient Center	1670 E. 120th St. Los Angeles, CA 90059 424-338-1449	General care: Mon-Fri 8:00AM – 4:30PM Urgent care: 7:30AM – 11:00PM

Harbor-UCLA Medical Center	1000 W. Carson St. Torrance, CA 90502 310-222-3528	24/7
Olive View-UCLA Medical Center	14445 Olive View Dr. Sylmar, CA 91342 747-210-3000	24/7

< Source: Los Angeles County Department of Health Services (DHS)>

Q. It has been over a year since I signed up for My Health LA, and I haven't renewed yet. My benefits have now been suspended. Can I apply again?

A. Yes, it is possible. Similar to when you first signed up, you will need to bring your ID and proof of address and income to a clinic or social services office that can help you apply.

Q. What services are not available through My Health LA?

A. Medical services not covered by My Health LA include dental and vision, allergy testing, hearing tests and hearing aids, organ transplants, pregnancy and birth preparation, fertility clinics, transportation services, and long-term care.

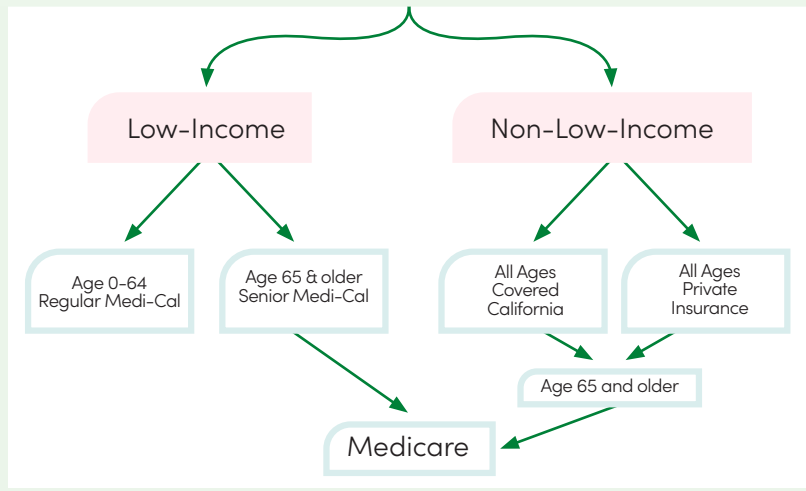
Medi-Cal/Medicaid

What Is Medi-Cal?

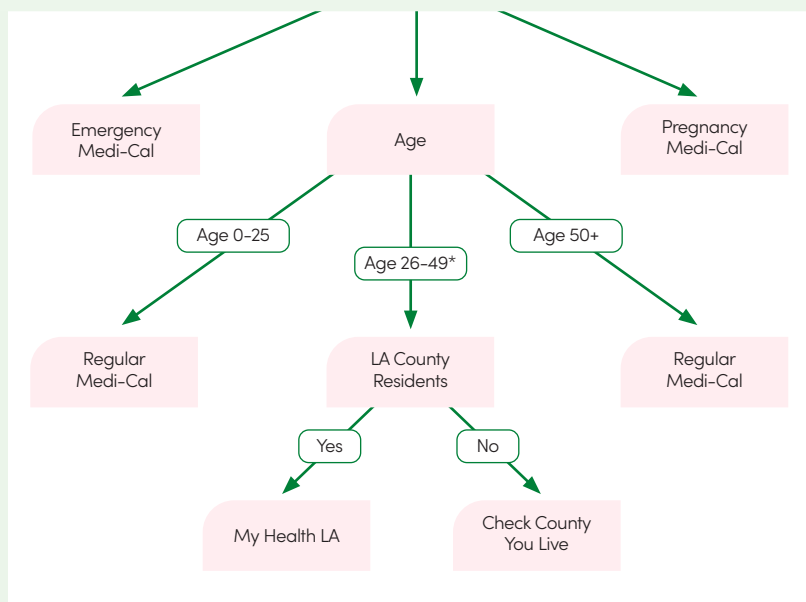
Medi-Cal is a health insurance program provided by the State of California to low-income residents.

All 50 states have a similar program, but most others refer to it as Medicaid; in California, the names are combined as **Medicaid + California** to make the name Medi-Cal. Medi-Cal can be divided into general (Regular) Medi-Cal, Children's Medi-Cal, Senior Medi-Cal, Emergency Medi-Cal, and Pregnancy Medi-Cal. The table below is a brief summary of the eligibility requirements for Medi-Cal classifications.

Permanent Residents & US Citizens



Low-Income Undocumented Immigrants



* Effective January 2024, individuals age 26-49 will be eligible to apply for Medi-Cal.

How to Apply for Medi-Cal

If you meet all of the necessary Medi-Cal qualifications and are eligible for benefits, you can proceed to the application stage. Basic documents required for the Medi-Cal application are:

- Photo identification
- Social Security card
- Documents proving residence status (passport, valid permanent resident card, certificate of citizenship, birth certificate)
- Proof of income (tax return, paystub, etc.)

In the case of undocumented applicants for Emergency or Pregnancy Medi-Cal, identification issued by the applicant's nation's consulate, called a consular ID, can be substituted if identification or documents confirming residence status cannot be provided. To apply for Medi-Cal, call the Los Angeles Department of Public Social Services (DPSS) at **866-613-3777** or visit BenefitsCal, a website that aggregates public benefits applications, at benefitscal.com. Kheir Clinic can assist you in applying for Medi-Cal and assign you a primary care provider at no cost if you are a Los Angeles County resident.



In some cases, Medi-Cal is automatically granted even if you do not apply. If you receive Federal Supplemental Security Income (SSI), Medi-Cal is provided automatically. You are eligible for SSI if you are 65 years of age or older, or physically or visually impaired. More information about SSI can be found on pages 76-80.

Process After Applying for Medi-Cal

Medi-Cal will review your application and make a decision on whether or not to approve it, usually within 45 days of receipt. After you apply for Medi-Cal, various notices and guides will be mailed to your home over the course of a month.

The first letter you will receive is a notice informing you if you have been approved for Medi-Cal. In the upper-right corner, you will see the name of the caseworker overseeing your

Medi-Cal case. If you have an issue with Medi-Cal, have a change of address, or want to discontinue Medi-Cal, you should contact your assigned caseworker. Please provide your case number and PIN.

These two unique numbers are on the first letter you receive after applying for Medi-Cal. Keep this letter in a secure place so that you can access it at a later time. After the approval process is complete, you will receive a Medi-Cal Card (Benefit Identification Card, or BIC).



Sample Medi-Cal Card <Source: Medi-Cal Member Handbook>

If your Medi-Cal benefits are discontinued and you reapply, you will not receive a new card. You may use the card that had been issued to you, or if you need a replacement, you may contact the Medi-Cal office to request a new card. The Medi-Cal card may also be replaced if the issue date has expired. However, the issue date is unrelated to the validity period. Medi-Cal must be renewed once a year, but renewal does not result in a new card.


After receiving the card, you will receive a white booklet. This booklet contains application documents to determine which insurance plan, medical group, and primary care physician will cover your care and prescription medication. If you choose the insurance plan listed on the paperwork, you must use only the hospitals, doctors, and pharmacies that are part of that plan. Once you've chosen the plan that is right for you, and you've decided who will be your primary care provider, write down the PCP or clinic code. To obtain the clinic code, call the doctor of your choice and request it.

For your reference when filling out the Medi-Cal Choice Form, the Doctor/Clinic Code for Kheir Clinic is **926K5MH** and the Internal Use code is 6T9 (please see the following form).


You may also make an appointment with Kheir's Patient Resources Department (PRD) for enrollment assistance and renewals. Call **213-637-1080** or send a text to **213-632-5521**.

Medi-Cal Choice Form

Sign the documents and mail them in the included envelope. There is no need to include a postage stamp.

**Mail form back to:** California Department of Health Care Services
P.O. Box 989009 • W. Sacramento, CA 95798-9850

Medi-Cal Choice Form

Use this form to join or change plans. For help, call 1-800-430-4263.
Please print. Fill in the ovals  to indicate your choice.

1) Head of Household Name (First Name) _____ 2) Last Name _____

3) Home Address (House Number, Street Name, Apartment Number) _____

4) City _____ 5) Zip Code _____ 6) Area Code & Phone Number _____

7) E-mail Address _____

Choose a plan and a plan partner from the list below. See the provider directory for Doctor/Clinic Codes.

8) Applicant's Name (First Name) _____ 9) Last Name _____

10) Sex ☐ Male ☐ Female 11) Due Date (if pregnant) _____ 12) Birth Year _____ 13) Social Security Number _____

14) I wish to JOIN or change my plan to:

<input type="radio"/> 304 L.A. Care Health Plan	<input type="radio"/> 352 Health Net Comm Solutions
<input type="radio"/> BC Anthem Blue Cross Partner	<input type="radio"/> HN Health Net Comm Solutions
<input type="radio"/> BL Blue Shield Promise	<input type="radio"/> MO Molina Healthcare Partner
<input type="radio"/> KA KP Cal, LLC	<input type="radio"/> 000 Regular MediCal (FFS)
<input type="radio"/> LA L.A. Care Health Plan	


15) Doctor/Clinic Code 9 2 6 K 5 M H Internal Use 6 T 9

16) Fill in the oval next to the reason for changing your plan.

<input type="radio"/> I could not choose the doctor I wanted	<input type="radio"/> Moving out of the county
<input type="radio"/> The plan did not meet my needs	<input type="radio"/> Indian Health Program Exemption
<input type="radio"/> My doctor did not meet my needs	<input type="radio"/> Exempt from a plan
<input type="radio"/> Too far to go	<input type="radio"/> Other
<input type="radio"/> I did not choose this plan	

Notice: I have read the plan description. I understand that Kaiser requires the use of binding neutral arbitration to resolve certain disputes. This includes disputes about whether the right medical treatment was provided (called medical malpractice) and other disputes relating to benefits or the delivery of services. If I pick Kaiser, I give up my right to a jury or court trial for those certain disputes. I also agree to use binding neutral arbitration to resolve those certain disputes. I do not give up my right to a State hearing of any issue, which is subject to the State hearing process.

Choice Statement: I/we have made written choice to receive Medi-Cal benefits through the plans as I/we have indicated on this form. I/we have read and understand the conditions of this agreement. I/we understand that in order to change my/our current Medi-Cal plan, I/we must complete this form.



Head of Household or Authorized Representative Signature _____ Date _____

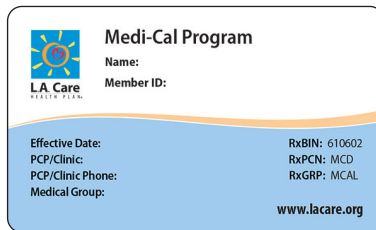
Highly Confidential

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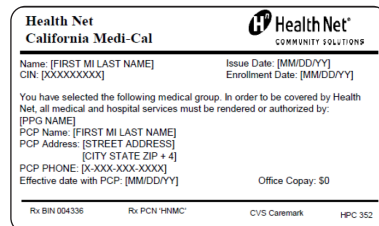
Often, a Medi-Cal Health Care Options (HCO) representative will call you directly to help you with the plan and PCP selection process. At this stage you can register over the phone or by mail.

If you do not send in the application form included in the booklet within 30 days, Medi-Cal will randomly refer you to a plan and to a doctor near your home. It is recommended that you take action early to make a decision that is best for you.

After the application documents are received, the insurance company registers the member and mails the insurance plan card. You will use this card whenever you visit your doctor. Pharmacies that supply prescription drugs covered by the insurance plan require you to present your card. Below is an example of an insurance plan card.



L.A. Care Health Plan Card



Health Net Card

Q. I have sent documents specifying an insurance plan and a primary care provider (PCP), but I have not yet received the membership card from the insurance company. Will I be able to see a doctor before I receive my card?

A. Yes. Even if you do not have a physical card, you can receive medical treatment. However, it is important to note that the coverage plan may not have gone into effect yet, and may not cover specialty care or prescriptions. In other words, even if you get a prescription, the pharmacy may not cover it, and it may be difficult to get a referral for a specialist.

Q. Can I change my health plan?

A. Yes, you can change your plan at any time. You may change your plan through Health Care Options at 800-576-6883. Note that you will need to check to see if there is a current primary care provider in the plan's network. Also, if you change plans while you have already received a referral to a specialist, you will have to request a new referral to a specialist within the updated plan.

Q. Can I change my assigned primary care provider (PCP)?

A. Yes. However, you should first check to see if the PCP you prefer accepts Medi-Cal. If you get Medi-Cal, you can ask your doctor for the clinic code or NPI number, then call your insurance company to change your PCP. If you want to change your primary care provider to Kheir Clinic, you can visit Kheir's 6th Street Clinic (3727 W. 6th St., Suite 230) and our Patient Resources Department (PRD) will assist.

Maintain Medi-Cal Benefits/Redetermination

In order to maintain Medi-Cal, you must fill out and return the renewal form (MC 210 RV), which is mailed to you once a year. Once you turn 65, you may be required to submit a different renewal form and/or additional forms (MC 604 IPS, please see the following form).

The biggest difference between the original renewal forms and the renewal forms you receive beginning at age 65 is the question regarding your properties. If any items listed on the form apply to your properties, you must submit the proof documents along with the renewal form. These forms are also available online through the California Department of Health Care Services website

(www.dhcs.ca.gov/formsandpubs/forms/Pages/MCEDFormsMC200.aspx). You can renew online through website (benefitscal.com).

Medi-Cal Additional Information Form (MC 604 IPS)



State of California Health and Human Services Agency
Department of Health Care Services

ADDITIONAL INCOME AND PROPERTY INFORMATION NEEDED FOR MEDI-CAL

We are still evaluating your Medi-Cal eligibility and need some additional information. Please answer the questions below for everyone who is part of your household. This includes you, your spouse, and children under 21 who live with you or anyone who is temporarily absent from your household, such as attending school or work or is hospitalized.

Case Name: _____

Case Number: _____

Worker's Name: _____

Worker's Phone Number: _____

Date Sent: _____

Return this Form By: _____

Additional Household Information Needed

The following additional information is needed. Answer only if the questions on this page apply to you or a member of your household.

- ☐ Please check here if you, or a member of your household, are legally married but currently living apart from the spouse.

If you checked the box, please list the name of the person in your household who is living apart from his or her spouse.

- ☐ Please check here if you or a member of the household is a step-parent.

If you checked this box, please list:

The name of the Step-parent: _____

This Step-parent's children: _____

- ☐ Please check here if a member of the household is a child who is being cared for by a relative, other than a parent, who also lives in the household.

If you checked this box, please list:

The name of the Caretaker Relative: _____

The children being cared for: _____

Frequently Asked Questions

Q. I am a California resident and have Medi-Cal. If I travel to another state and need medical services, can I use Medi-Cal?

A. Medi-Cal may have limited coverage when receiving out-of-state care. You can get emergency room or urgent care treatment, but you cannot get general care or specialty care.

Q. I do not have insurance but my spouse applied for Medi-Cal five years ago and is receiving benefits. Now I want to receive Medi-Cal benefits too. Can I apply separately to the Department of Public Social Services?

A. A married couple is tied to one Medi-Cal case under one account. For this reason, if one spouse is already a Medi-Cal beneficiary, the other person does not need to apply for a new application, but must request an additional enrollment. Additional enrollment can be requested by calling the caseworker responsible for the existing Medi-Cal plan or by calling the Los Angeles Department of Public Social Services at 866-613-3777.

Q. Medi-Cal says I have a share of cost (SOC) and I must pay it every month. What is this?

A. A co-pay is levied on beneficiaries whose income exceeds the threshold set by Medi-Cal for free access. If you have an SOC, you must pay these costs each month in order for Medi-Cal to cover the rest. For example, if your co-pay is \$200 per month and your medical bills are \$350, you pay \$200 and Medi-Cal pays the remaining \$150.

Q. My child in college has both school insurance and Medi-Cal. Can they get Medi-Cal treatment from a doctor near my home during vacation?

A. No, they cannot use Medi-Cal. If they wish to receive treatment under Medi-Cal, they will need a termination letter stating that they are no longer receiving school insurance. This letter is issued by the insurance company.

Medicare

What is Medicare?

Medicare is the federal health insurance program for seniors 65 and older. If you are under 65, you can still apply for Medicare if you have certain disabilities or permanent medical conditions. Medicare helps pay for healthcare, but it doesn't cover all costs. This is because Medicare is financed by taxpayers to cover medical bills for retirees, who previously paid into Medicare tax. Medicare is made up of four parts, each with different benefits.

Plan Types and Benefits

Name	Benefits
Part A – Hospital Insurance	Covers surgery and hospitalization costs. Covers only part of the cost for skilled nursing facilities or hospice services.
Part B – Health Insurance	Covers primary and specialty care, vaccines and screenings, physical therapy, etc.
Part C – Advantage Plan	Health insurance operated by an insurance company approved by the Center for Medicare & Medicaid Services (CMS). Available only to members with both Medicare Parts A and B. Depending on the plan, coverage for Parts A and B may exclude some services (dental, vision, acupuncture, hearing aids, etc.)
Part D – Prescription Drug Insurance	Assistance with prescription drug costs. There may be some assistance depending on the type of medication.

Medicare Part B provides most of the primary care, regular checkups, wellness exams, and cancer and preventive screenings. Dental insurance must be purchased separately, and when traveling abroad, Medicare typically does not cover medical services except for emergency.

Original Medicare includes Part A and Part B. These two Parts cover 80% of medical expenses, and the remaining 20% must be paid by the patient. However, people with incomes below 138% of the Federal Poverty Level (FPL) are eligible for Medi-Cal and must join the Medicare Savings Program (MSP) to receive premium support benefits.

Alternatively, you can choose Medicare Part C. While Original Medicare allows you to choose between a PPO (a plan in which allows you directly contact any primary and/or specialty care providers your choice in the network without a referral from a primary care provider) and an HMO (a plan in which you must have an assigned primary care provider, PCP and receive referrals to see specialists from your PCP), Part C offers only HMO plans. It is recommended to review carefully about whether this plan is right for you.

Part D, a prescription drug plan, does not have common coverage and varies from state to state, so it is important to learn more about prescription drug coverage and costs to choose the best plan for you. Part D requires you to have either Part A or Part B, but usually Part C also covers your prescription drugs.

Enrollment Period and Qualifications

The table below summarizes the enrollment period and qualification requirements for each Medicare plan type.

Name	Enrollment Period and Qualifications
Part A – Hospital Insurance	<ul style="list-style-type: none">- 3 months before and/or after your 65th birthday (a 7-month period)- You must sign up by one month prior to your birthday to receive benefits beginning the month you turn 65- If you have 40 Social Security or Medicare credits, you do not have to pay insurance premiums. If the score is less than 40, you will have to pay a premium based on your credits

Part B – Health Insurance	<ul style="list-style-type: none"> - The first enrollment period is around 3 months before and/or after the 65th birthday (similar to Part A) - If you missed enrollment, you can join between January 1st and March 31st each year. However, the benefits go into effect beginning July 1 the same year. Note: there is a penalty for late enrollment (insurance premium increases by 10% per year) - Premium is varied per your income of tax return
Part C – Advantage Plan	<ul style="list-style-type: none"> - You can enroll for the first time three months before and/or after your 65th birthday (total 7 months, IED) - If you are already enrolled in Original Medicare, you can change to Part C between October 15 and December 7 (AED) or between January 1 and March 31 (GED) - Premiums vary by plan and coverage
Part D – Prescription Drug Insurance	<ul style="list-style-type: none"> - 3 months before and after your 65th birthday - If you miss this period, you can enroll between November 15th and December 31st each year, but you will have to pay a lifetime penalty (equivalent to 1% of monthly premium, 12% per year) for the number of months delayed from the new enrollment period. - Premiums vary by plan and coverage

Within three months before and after your 65th birthday (total 7 months), you may enroll in Parts A, B, and D. If your birthday is in May, you can enroll from February to August. For Part A, you don't have to pay a premium if you have 40 or more Social Security or Medicare credits. If you don't have enough credits, your monthly premium will be measured based on your credits and other circumstances including income.

If you don't sign up for Part B, you'll have to pay 10% of your premium, and Part D will also require a penalty of 1% of your monthly premium. However, there is an exception if you are enrolled in health insurance or retirement insurance provided by an employer with 20 or more employees. To avoid the penalty, you must enroll in Part B within 8 months of when your work insurance or your benefits end.

Qualifications

The basic condition for enrolling in Medicare is being a U.S. citizen or lawful resident who has been a permanent resident for at least 5 years. The following qualifications are based on people age 65 years or older.

Age	Qualifications
65 years or older	<ul style="list-style-type: none"> - Over 40 Social Security or Medicare credits* - Lived in the United States for at least 5 consecutive years - Social Security Retirement benefits (SSA) beneficiaries (automatically receive Medicare benefits without applying)
Under 65	<ul style="list-style-type: none"> - Disability insurance and pension in the past 24 months - Renal dialysis patients, chronic renal failure patients, Lou Gehrig's disease patients - 62 or older with a spouse 65 or older who has a work credit of 40 or higher**

*Medicare requires 40 credits to qualify. Credits are accumulated when you file your tax returns. You cannot earn more than 4 credits in a year, and you must file your taxes for at least 10 years to reach a minimum of 40. However, if you receive Social Security Retirement benefits (SSA) before age 65, your Medicare card will be mailed to you three months before your 65th birthday, even if you do not apply.

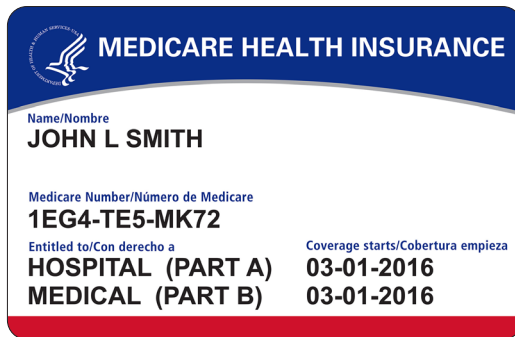
**If you don't have enough credits, you can get Part A for free with your spouse's credit if spouse has 40 credits. But your spouse must be 65 years of age or older.

Application Procedures

Here are the documents you need to apply for Medicare:

- Certificate of citizenship, birth certificate, or permanent resident card
- Social Security card
- ID (driver's license or passport)
- Medi-Cal beneficiaries must have a Medi-Cal card

If you are applying in person, you can visit or call your local Social Security office. You can also apply on the website (www.medicare.gov, www.ssa.gov). Your Medicare card will usually be sent to your home 2–3 weeks after you apply, but if you haven't received your card within a month, you should contact the Social Security office.



Sample Medicare Card

<Source: Centers for Medicare & Medicaid Services (CMS)>

If you need assistance, you can request help from a Medicare-accredited specialist.



If you have both Medi-Cal and Medicare, your status is called Medi-Medi. In this case, 80% of medical expenses are covered by Medicare and the remaining 20% by Medi-Cal. However, insurance premiums are not covered. Low-income individuals are burdened with insurance premiums can apply for Medicare Savings Program (MSP) separately and get premium support.

In California, Medi-Medi members, live in one of these counties: Los Angeles, Orange, Riverside, San Bernardino, San Diego, San Mateo or Santa Clara, can enroll in a program called Medicare Medi-Cal Plan (MMP, a new

version of Cal Medi-Connect). MMP is a type of Medicare Advantage plan (HMO) which combines your Medicare and Medi-Cal benefits and Medicare prescription drug benefits into one plan. You may get extra benefits like dental, hearing, or vision coverage, in addition to what Medi-Cal covers.

You can opt-out of the program if you don't want to join.

Frequently Asked Questions

Q. I have Medi-Cal, but don't have 40 work credits. Hence, I'm only eligible for Medicare Part B and not Part A. Can I apply for Medicare Part A?

A. Yes, it is possible. If you qualify, you can apply for Qualified Medicare Beneficiary (QMB), one of the Medicare Savings Programs (MSP), to get help with Part A applications and premiums. QMB is a subsidy for low-income people. If you apply, you will receive monthly Parts A and B premiums and co-payments (deductibles). To apply for QMB, you must first be enrolled in Medicare Part A and meet the Federal Poverty Level criteria.

In California, low-income people must be at or below 100% of the Federal Poverty Level and have less than \$7,730 in assets, excluding one home and one car, for an individual and \$11,600 for a couple. Assets include bank account balances (checking/savings), stocks, and bonds.

When you receive QMB benefits, you are automatically enrolled in Extra Help for Medicare prescription drug insurance, which helps you save on drug costs. If you do not have QMB, you must pay Medicare premiums even if you have Medi-Cal, so it is recommended to check if you are eligible and apply.

QMB applications are available at each county Department of Public Social Services (DPSS).

Q. I applied for Medicare and got Part A for free, but must pay a premium for Part B. My monthly premium is over \$160. Is there a program that can help me?

A. Yes, you can apply for the Specified Low-Income Medicare Beneficiary (SLMB), one of the Medicare Savings Programs (MSP). SLMB only covers Medicare Part B premiums. To apply for SLMB, as with QMB, you must meet the low-income criteria, and your income must be at 120% of the Federal Poverty Level or below. The property scope is equal to QMB.



In addition to these, there are Qualifying Individuals (QI) and Qualified Disabled and Working Individuals (QDWI) assistance programs. Applicants for both programs must be eligible for Medicare Parts A and B and meet low-income criteria. For QI, your income must be 135% or less of the Federal Poverty Level. However, if you have a dependent child under the age of 18 at home, the income limit is slightly raised. The QI assistance program helps you pay for Part B premiums.

QDWI covers only Part A premiums. To qualify, your income must be 200% or less of the Federal Poverty Level, and your assets must be \$4,000 or less for an individual or \$6,000 for a couple. Also, QDWI is somewhat different from other subsidized programs in terms of qualifications. Its qualifications and conditions consider:

- If you are under the age of 65 and working with a disability
- If you lose Part A because you returned to work
- If you do not receive medical assistance from the State of California

To apply for the program, contact your county DPSS or visit the California Department of Health website at www.dhcs.ca.gov.

Q. I'm curious about the remaining 20% I have to pay under Medicare. I understand that if I sign up for Medicare Part C, I don't have to pay 20%, but must automatically sign up for an HMO plan. I want to see specialty care providers without referrals from a primary care provider (PPO plan). Is there any other way?

A. In this case, you have an option of purchasing Medicare Supplement Plans. This is commonly referred to as Medigap. Medigap is a plan sold by private insurance companies, which allows you to visit any doctor or clinic that accepts

Medicare. There are 10 types of Medigap plans. Each plan has different coverage, so you should read the details carefully and choose the one that is right for you.

When you enroll in Medigap, the plan helps to fill the gaps in Original Medicare and to pay some of the remaining healthcare costs, including co-payments, coinsurance, and deductibles, depending on your plan. However, you are still responsible for a monthly premium for your Medigap policy, as well as your Medicare Part B premium. Please note that Medigap covers only one person. If you and your spouse both want Medigap coverage, you'll each have to buy separate policies.

To be enrolled in Medigap, you must have Original Medicare Parts A and B, and no employer-covered insurance or Medi-Cal. The best time to enroll in Medigap is during your 6-month Medigap Open Enrollment Period. This period automatically starts the first month you have Medicare Part B after you're 65 or older.

Q. My Medicare benefits have ended. Why?

A. It is most likely because you didn't pay your premiums or your Medi-Cal benefits ended. When Medi-Cal beneficiaries do not renew Medi-Cal, then benefits are terminated and Medi-Cal stops paying 20% of the medical costs. If you fail to pay your Medicare premiums or medical bills, may cause Medicare to stop as well. Or, they may deduct your Medicare premium from your monthly Social Security benefits (SSA). Medicare bills are issued for three months at a time.

Medication Safety

The types of medications seniors must take regularly may increase. Keeping track of these medications, including their names, dosage, and when to take them can be difficult and potentially dangerous when doses are missed or too much is taken. It is important to understand your medications in order

to safely take them. It is good to note the following:

- Write down the name of each medicine you currently take, the number of times you take it per day, and the dose, and post the list on the refrigerator.
- Write down the name, phone number, and address of the pharmacy where your medication was filled.
- If you go to a hospital or medical office where you don't regularly receive care, bring the list of medications, the number of times you take them per day, and the dosage. If the list is not available, take the medication bottles with you.
- Be aware of side effects.
- When taking two or more medications simultaneously, make sure that they do not conflict and cause side effects.
- Do not take expired medicines or use expired ointments (it is advised to discard ointments three months after opening to avoid the risk of infection).
- Do not take other people's medications.
- Do not store medications in the refrigerator. Because it is a humid environment, mold may form and affect the medication if exposed to moisture. Eye drops or insulin injections can be stored in the refrigerator.

Information on drug safety can be found on the websites listed or by phone.

Agency	Contact	Website
Center for Food Safety and Applied Nutrition	888-723-3366	www.fda.gov/about-fda/office-foods-and-veterinary-medicine/center-food-safety-and-applied-nutrition-cfsan
Eldercare Locator	800-677-1116 eldercarelocator@n4a.org	eldercare.acl.gov
National Center for Complementary & Integrative Health	888-644-6226 866-464-3615 info@nccih.nih.gov	www.nccih.nih.gov

Memory Care Units

Memory care facilities are designed for dementia patients and seniors with mental disorders. Staff trained in dementia disease management provide close care 24 hours a day in addition to offering physical therapy, speech therapy, and small group activities. You may be covered by Medi-Cal or long-term care insurance, but will have to pay for Medicare expenses yourself.

Personal Emergency Response System/Medical Emergency Response System (PERS/MERS)

Artificial intelligence (AI) in healthcare helps to monitor the elderly living alone or away from their families. Personal Emergency Response Systems (PERS) or Medical Emergency Response Systems (MERS) detect an emergency when there is a fall or there are sudden, significant changes in behavior, blood pressure, or heart rate. It alerts the nearest medical center or 911 dispatch. Some systems feature an attachable GPS for the elderly with dementia. In an emergency, the elderly can call for help by pressing a button, and the monitoring system can provide emergency responders with such information as temperature, humidity, fire and gas leak detection, and door access to family members or medical institutions. Website information related to these emergency relief systems is as follows.

- www.comfortkeepers.com
- www.helpbuttonsusa.com
- www.seniorsafety.com
- medihill.com

You can also find more information by searching the Internet for PERS or MERS.

Pregnancy Medi-Cal

Pregnant women living in California, regardless of immigration status, can apply for Pregnancy Medi-Cal. For pregnant women, Medi-Cal covers everything from regular checkups to birth, and benefits remain in effect 60 days after childbirth. To qualify, you must have lived in California for at least 6 months and are up to 30 weeks pregnant. Your monthly income must be at or below 200% of the Federal Poverty Level.

Senior Meal Services

Elderly people who live alone or who cannot get help from their family often find it difficult to obtain and prepare food for themselves. There are active food banks and free meal services that can help.

To find a food bank location, use the Los Angeles Regional Food Bank website (www.lafoodbank.org).

The following organizations provide free meals and groceries or pick-up services for seniors:

Organization	Services	Phone Number & Address	Hours of Operation
Karsh Center	Food pantry	213-401-4651 3750 W. 6th St. LA, CA 90020	Tue 12PM–2PM Sun 7:30AM–9:30AM
St. Francis Center	Food pantry	213-747-5347	Wed Thu Sat 10AM–11:30AM
St. Vincent Meals on Wheels	Free meal delivery	213-484-7775 2303 Miramar St. LA, CA 90057	Mon, Wed & Fri 9AM– 4PM
East LA Corps	Food pantry	323-263-7577 140 N. Eastman Ave. LA, CA 90063	Mon – Sat 8AM–4PM
Shopping Helpers LA	Free grocery shopping support	323-628-7071 shoppinghelpersla@gmail.com Sign up via email	
Shop 4 Seniors	Free grocery delivery	Maryjerejian2@gmail.com Sign up via email	
County Free Grocery Delivery Service	Deliver prepaid groceries for free	888-863-7411	Mon – Fri 8AM–5PM

Urban Partners LA	Free food pickup & delivery	213-401-1191 urbanpartnersla@gmail.com Sign up via email
Project Angel Food	Weekly free food delivery	323-845-1800 info@angelfood.org Sign up via email

Senior Medi-Cal

Eligible Individuals

- Residents of California
- Permanent residents or citizens 65 years of age or older
- If under the age of 65, physically handicapped, visually impaired, or have certain medical conditions
- Undocumented visa holders over 50 years of age

Additional Requirements

- Must have an income of 138% or below the Federal Poverty Level (FPL)
- Assets must meet criteria defined by Medi-Cal

Income

Senior Medi-Cal income thresholds are below 138% of the Federal Poverty Level, as shown in the chart below.

Household Size	Monthly Income Before Tax
1	\$1,677
2	\$2,268
3	\$2,859
4	\$3,450

**As of January 2023.*

If your income limit is slightly above 138% of the Federal Poverty Level (FPL), you may be eligible for Medi-Cal benefits for a monthly fee through the Share of Cost (SOC) program. If your income and assets do not meet the eligibility criteria for Medi-Cal, contact the Department of Public Social Services to learn more about your options.

Assets

For seniors age 65 and older, Medi-Cal approval also depends on owned assets. Medi-Cal allows for a single home, one car, and a bank account balance of \$130,000 or less for an individual, or \$195,000 or less for a married couple. Below is a list of property exemptions.

Real Estate	Personal Properties (property other than real estate)
<ul style="list-style-type: none"> - Main residence: One house - Other real estate: Up to \$6,000 on non-commercial real estate (excluding the home), mortgages, trusts, deeds, or other promissory notes. In order to qualify for the exemption, the property must produce an income at an annual rate of 6% of its net market value or present face value. - Real estate used for business or trade: Real estate used in a trade or business is exempt, regardless of its equity or whether it produces income. 	<ul style="list-style-type: none"> - One vehicle - Personal property used in a trade or business - Personal effects: clothing, heirlooms, wedding and engagement rings, and other jewelry with a net value under \$100 - Household items - Pension plans related to work, such as an IRA: Exempt if the person enrolled in the plan does not want Medi-Cal. However, if the registered individual wants to enroll in Medi-Cal and receives payments of principal and interest, the balance is considered unavailable and is not counted. - Life Insurance Policy: \$1,500 per person life insurance policy with interest and dividends accrued at the following face value - Irrevocable burial trusts or prepaid burial deposits - Revocable burial fund or revocable prepaid burial deposit: a value of \$1,500 plus accrued interest per person - Burial space items: pre-purchased plots, coffins, gravestones, etc. - Miscellaneous: instruments, computers, collections, etc.

< Source: Los Angeles County Department of Health Services (DHS)>

The asset review also considers how much property the Medi-Cal applicant has donated or transferred over a 30-month period prior to the review in order to determine if the size of the property has been intentionally reduced for an applicant to qualify for Medi-Cal.

Items considered as income (gross amount before taxes):

- Salary (including tips)
- Social Security benefits and disability benefits
- Federal and/or state government subsidies
- Child support and alimony
- Rental income
- Unemployment benefits (EDD)
- Lottery or gambling winnings
- Loans and scholarships
- Cash or gifts (including allowances received from children)

Items considered as assets:

- Homes other than the home you live in, other real estate, and land
- Business vehicles and additional vehicles beyond the allowed one vehicle
- Bank account balance (checking account, savings account)
- Retirement fund
- Life insurance (face value of \$1,500 or less per person), long-term care insurance, burial insurance
- Stocks, dividends, ownership rights to oil
- Mortgages
- Jewelry and valuables

Estate Recovery Program

There is a misconception that if you are granted Medi-Cal benefits, the government will seize all your assets after your death. Because of this, many seniors are hesitant to apply for Medi-Cal despite being eligible.

However, the Estate Recovery Program rules changed in 2017, and due to a narrow scope of property recovery, the government has a limited right to reclaim Medi-Cal beneficiaries' property. Thus, not all Medi-Cal beneficiaries' properties are reclaimed by the government.

- Property recovery actions may take place only if a deceased member age 55 or older has any assets left behind.
- Property recovery may not take place if the deceased member has a spouse, children under the age of 21 and/or children diagnosed with disabilities.
- Individual retirement pension accounts and life insurance with a designated beneficiary are excluded from property recovery.
- If the Medi-Cal beneficiary transfers the property to another person's name prior to death (living trust, joint tenancy, etc.), the property is not subject to restitution.
- The scope of reimbursement coverage has also been narrowed to cases where Medi-Cal covers the cost of prescription drugs and long-term care facilities after age 55. Medi-Cal will not reimburse you for expenses incurred as a result of your usual general or specialty care, or the use of a nursing home health center.

Benefits

A significant benefit of Senior Medi-Cal is that, like general Medi-Cal, you pay no premiums or co-pays (out-of-pocket costs), or you pay a lower cost. Even if you seek medical treatment, it is mostly free. Benefits include primary care and specialty care, prescription drugs, and dental and vision care. Senior Medi-Cal includes services such as caregiver services, nursing home care, and hospice services.



If you were already enrolled in Medi-Cal before age 65, you do not need to apply for Senior Medi-Cal.

Existing Medi-Cal holders will receive a renewal document asking about their assets the year they turn 65, which will allow them to keep their existing Medi-Cal benefits.

Q. My 70-year-old parents recently relocated to California on a family invitation. Can they get Medi-Cal benefits? If my parents receive the benefits, will I have to pay anything?

A. Regardless of the period of residence, you can apply for Medi-Cal as long as you are a permanent resident or an applicant who can provide proof of residence after submitting the application. However, this applies only to California. In some states, you cannot apply for a similar Medicaid program for five years after receiving a Green Card. If you pass the low-income and asset standards, you are eligible for Medi-Cal benefits, and your children will have no financial burden.

If you were already enrolled in Medi-Cal before age 65, you do not need to apply for Senior Medi-Cal. Existing Medi-Cal holders will receive a renewal document asking about their

Senior Services Organizations

Below is a list of non-profit organizations that provide information and counseling, such as senior services, social services, and assistance with public benefits applications.

Organization	Services	Phone Number
Kheir Clinic	Community Clinic – Application assistance for healthcare programs such as Medi-Cal, Medicare, My Health LA, etc.	213-637-1080 213-235-2500
BASTA, Inc	Tenants' rights, preventing homelessness, and eliminating substandard housing	213-736-5050
Bresee Foundation	Empowering youth & families providing intergenerational programs, computer classes, food banks, emergency assistance, local and state benefits, financial education and citizenship classes	213-387-2822
Catholic Charities	Emergency assistance, state benefits, transportation and applications for citizenship	213-251-3400
Central City Neighborhood Partners (CCNP)	Emergency assistance, computer classes, local and state benefits, food banks, and financial classes	213-482-8618
Communities Actively Living Independent & Free (CALIF)	Senior apartments, <i>CalFresh</i> (food stamps), SSA (Social Security) application, and wheelchair rental	213-627-0477
Mexican American Opportunity Foundation (MAOF)	Civil complaints, <i>CalFresh</i> , applications for unemployment benefits (EDD), transportation and food banks	323-890-1555

Following is a list of government agencies where you can receive consultation on medical and social service benefits, including Medi-Cal and In-Home Supportive Services (IHSS).

Name	Phone Number	Website
Medi-Cal	877-597-4777	dpss.lacounty.gov/
Cash Assistance Program for Immigrants (CAPI)	866-613-3777	dpss.lacounty.gov/en/cash/capi.html
In-Home Supportive Service (IHSS)	888-944-4477 213-744-4477	dpss.lacounty.gov/en/senior-and-disabled/ihss.html
Los Angeles County Development Authority	626-262-4511	www.lacda.org/
SSI	800-772-1213	www.socialsecurity.gov/ssi

Following is a list of agencies that issue official documents or identification documents.

Document	Institution Name	Phone Number Website
Birth certificates, death certificates, wedding certificates	LA County Registrar LA County Clerk, Registrar Recorder	800-201-8999 www.lavote.net
Birth certificates, death certificates, wedding certificates	Department of Motor Vehicles (DMV)	800-777-0133 www.dmv.ca.gov
Permanent residency and immigration status; proof of residence	Federal Immigration Service (USCIS) US Citizenship and Immigration Services	800-375-5283 www.uscis.gov
Social Security card	Federal Social Security Administration (SSA) Social Security Administration	800-772-1213 www.ssa.gov
Tax return	Department of Motor Vehicles (DMV)	800-829-1040 www.irs.gov

Following is a list of utility service agencies and discount programs for low-income seniors.

Name	Program	Contact/Website
AT&T	<ul style="list-style-type: none"> - AARP members & Over 50 - Access from AT&T - Affordable Connectivity Program (ACP) - Lifeline 	www.att.com/verification/signaturehub www.att.com/internet/access www.att.com/home-phone/lifeline/california
LA DWP	<ul style="list-style-type: none"> - Lifeline Rate - LIHEAP (Low Income Home Energy Assistance Program) - LIHWAP (Low Income Household Water Assistance Program) 	800-342-5397 www.ladwp.com/ladwp/faces/ladwp/residential/r-financialassistance
SoCal Edison	<ul style="list-style-type: none"> - CARE (CA Alternate Rates for Energy) - FERA (Family Electric Rate Assistance) - LIHEAP - Medical Baseline Allowance 	866-675-6623 www.sce.com/residential/assistance
SoCal Gas	<ul style="list-style-type: none"> - CARE - LIHEAP - Medical Baseline Allowance 	877-238-0092 www.socalgas.com/save-money-and-energy/assistance-programs



Learn how you can prepare and stay better connected in the event of a power outage.



Keep your wireless phone batteries charged at all times.



Install a back-up battery if you use a VoIP home phone.



Have a family communication plan in place.



Confirm your device has enabled Wireless Emergency Alerts.

Aprenda cómo puede prepararse y mantenerse mejor conectado en caso de un corte en el suministro de energía.



Mantenga las baterías de su teléfono inalámbrico cargadas en todo momento.



Instale una batería de respaldo si usa un teléfono residencial de VoIP.



Tenga un plan de comunicación familiar.



Confirme que su dispositivo tiene habilitadas las Alertas de emergencia inalámbricas.



You could save 20%
Podría ahorrar un 20%

The CARE program offers qualifying customers a monthly discount of 20% on their natural gas bill. Apply today at **socalgas.com/CARE**

Usted podría calificar para ahorrar el 20% en su factura mensual de gas natural. Aplique hoy en **socalgas.com/CareParaMi**



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El programa California Alternate Rates for Energy (CARE) está financiado por los clientes de servicios públicos de California y SoCalGas los administra bajo el auspicio de la Comisión de Servicios Públicos de California

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Skilled Nursing Facilities

Skilled nursing facilities, also called nursing homes, are available only for a short period of time, usually up to 100 days. To qualify, you must receive treatment in a hospital or emergency room for 3 consecutive days, and Medi-Cal will cover the full cost of a skilled nursing facility for eligible patients. Kheir is not affiliated with any of the facilities.

Name	Address	Phone Number
Alcott Rehabilitation Hospital	3551 W. Olympic Blvd. Los Angeles, CA 90019	323-362-1010
Alden Terrace Convalescent	1240 S. Hoover St. Los Angeles, CA 90006	213-382-8461
Brier Oak on Sunset	5154 W. Sunset Blvd. Los Angeles, CA 90027	323-663-3951
Burlington Convalescent Hospital	845 S. Burlington Ave. Los Angeles, CA 90057	213-381-5585
Grand Park Convalescent Hospital	2312 W. 8th St. Los Angeles, CA 90057	213-382-7315
Mid-Wilshire Health Care Center	676 S. Bonnie Brae St. Los Angeles, CA 90057	213-483-9921 626-607-6478
Olympia Convalescent Hospital	1100 S. Alvarado St. Los Angeles, CA 90006	213-487-3000
Sun Ray Senior Club	3210 W. Pico Blvd. Los Angeles, CA 90019	323-734-2171

Social Security Retirement Benefit (SSA) & Supplemental Security Income (SSI)

Eligible seniors can apply for Social Security Retirement Benefit (social pension, SSA) & Supplemental Security Income (welfare, SSI).

Social Security Retirement Benefit is one of the programs

administered by the federal Social Security Administration (SSA) and is funded by Social Security taxes. SSA is divided into retirement benefits, survivor benefits, and disability insurance. Commonly called “Social Security” in everyday speech, SSA is a retirement pension. Retirement benefits are paid to you and your family when eligible workers reach retirement age.

Supplemental Security Income is a monthly benefit paid by the state to subsidize living for seniors 65 years of age and older or disabled people with low incomes and no assets.

Below is a table comparing SSA and SSI.

	Social Security (SSA)	Supplemental Security Income (SSI)
Explanation	Retirement pension available to those who have accumulated 40 working credit	Government subsidies available to low-income seniors, or people with disabilities who have no work credit and no income
Qualification	<ul style="list-style-type: none"> - U.S. citizens, permanent residents - Early retirement benefits are available beginning at the age of 62, but doing so may result in a 29.2% reduction in benefits - The standard age to apply is 67 - SSA can be deferred until age 70 	Age, residence, disability <ul style="list-style-type: none"> - Must be at least 65 years old - U.S. citizen or permanent resident - Limited income (monthly income must be less than SSI maximum benefit amount) - Physically or mentally disabled people under the age of 65 (only for those who obtained permanent residency before August 22, 1996) - If the disability lasts one year or longer or may result in death - Must be living in the United States at the time of application

		Assets <ul style="list-style-type: none"> - Bank account balance or cash holdings less than \$2,000 for individuals and \$3,000 for couples - Excludes one home, one vehicle, life insurance with a current market value of \$1,500 or less, and a burial plot
Benefits	Amount received is dependent on your birth year and when you retire	Varies by individual
How to apply	<ul style="list-style-type: none"> - Apply up to four months prior to the start of benefits - Apply online through the Social Security Administration website (www.ssa.gov/benefits/retirement) - Also available by phone at 800-772-1213 - Visit your nearest Social Security office (appointment required) - *If you are 61 and would like your benefits to begin at 62, confirm with the Social Security office as to when you should apply, as birth date specifications vary and affect start dates 	<ul style="list-style-type: none"> - Call the Social Security Administration at 800-772-1213 - Visit the nearest Social Security office for questions and a consultation

	<p>Common documents required for application</p> <ul style="list-style-type: none"> - Identification card, Social Security card - Certificate of citizenship (or birth certificate if you were born in the United States) or permanent resident card - Tax return, a letter stating the amount of Social Security benefits received, and other income certificates - Bank statement, vehicle registration certificate, deeds, mortgages - Rent receipt and utility bill (electricity, gas, telephone, etc.) - Medical records, doctor's note (for disabled people) 	
Misc.	<ul style="list-style-type: none"> - Citizens may receive benefits when living abroad - Benefit amounts increase by 8% every year from the age of 66 to the age of 70 	<ul style="list-style-type: none"> - If you have a house or real estate overseas, it is considered an asset and you are not eligible for benefits. All receipts must be presented if found - If you have a national pension that you receive regularly from overseas, it is considered income - Allowance or living expenses given by children are also considered income



SSI recipients may also apply for **CalFresh** (Food Stamps). If you have SSI benefits and live with a family member already receiving **CalFresh**, you do not need to apply for **CalFresh** separately. **CalFresh** recipients can register an additional family member to receive the benefits.

Frequently Asked Questions

Q. Do unemployment benefits affect my retirement benefit?

A. Unemployment benefits are not considered income and therefore do not affect your pension amount. However, your Social Security income may reduce your unemployment benefits.

Q. After immigrating to the United States, my spouse found a job while I remained unemployed. Can I receive Social Security benefits if I had no work experience in the U.S.?

A. Even if you don't have Social Security work credits, you are still entitled to receive half of your spouse's benefits. However, you must also reach the retirement age of 66 to receive 50% of your spouse's Social Security income. The earlier you retire, the less in benefits you receive. If you have worked and accumulated Social Security work credit, you may be eligible for a higher SSI amount. Calculations used to determine the Social Security benefits amount are available on the Social Security Administration's website at www.ssa.gov.

Q. Can I get SSI if I live with my adult children?

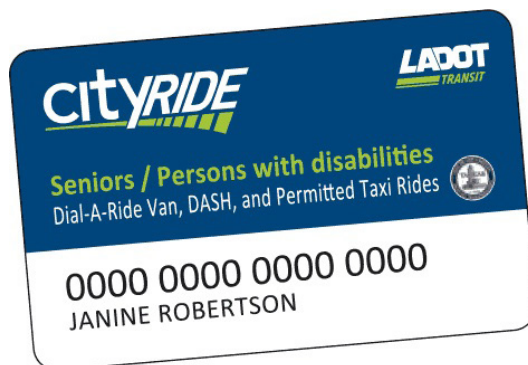
A. If you live with your adult children, your SSI benefit amount may be reduced as food, clothing, and shelter are provided to you to some extent. However, if you live with your children, it is possible that you may not have an amount reduction if you have proof that you are paying for some of your living expenses, including rent and food. You can request proof and a reduced amount consultation through your local Social Security office.

Q. I am a permanent resident and my parent wants to return to their home country permanently. Can my parent still get Social Security if they give up their Green Card?

A. The United States has a Social Security Agreement with select countries. In some cases, they may receive Social Security benefits in their home country. They must report to the Social Security Administration (SSA) before returning to their home country, and once they return, they should continue to work with the American Embassy on SSA benefits. Note that this agreement does not apply to all countries.

Transportation and Interpretation Services

The City of Los Angeles Department of Aging (DOA) and Department of Transportation (DOT) provide transportation card (CityRide) for 65-year-olds and persons with disabilities. CityRide beneficiaries can use a City of Los Angeles licensed taxi service at a reduced rate. Also, beneficiaries may ride the DASH bus for free by showing an ID and CityRide transportation card. You can order \$84 of fare value once per quarter at a cost of \$21 (\$9 for low-income participants).



Sample CityRide Transportation Card
<Source: Los Angeles Department of Transportation (LADOT)>

A 1-10 mile trip costs \$2 - \$4 per person (as of 2023) depending on a single passenger or group trip.

Apply for CityRide online (register.cityride.net), through the smartphone app, or by phone (213-808-7433).

Details on all other programs through the Department of Aging, including CityRide, can be provided by calling (800) 510-2020).



If your first language is not English and you have been referred to a specialist by your primary care provider, you may need an interpreter for an appointment. An interpreter can be requested in advance through the insurance company and provided free of charge. If you are a Medi-Cal patient, you should notify your insurance company of the date and time of the appointment to request an interpreter.

CITYRIDE



Resources for Seniors and Their Families

<Source: Library of Congress (LOC) National Library Service (NLS) website
([www.loc.gov/nls/resources/general-resources-on-disabilities/
resources-senior-citizens-families/](http://www.loc.gov/nls/resources/general-resources-on-disabilities/resources-senior-citizens-families/))>

Federal, State, and County Benefits

BenefitsCheckUp

National Council on Aging

www.benefitscheckup.org

Online form provides seniors information on their eligibility for programs that may help pay for medications, food, utilities, health care, housing, in-home services, transportation, and employment training.

Benefits Finder

www.Benefits.gov

www.benefits.gov/benefit-finder

Interactive questionnaire helps seniors find benefits they are eligible to receive.

Benefits Planner:

Retirement Social Security Administration

www.ssa.gov/planners/retire/stopwork.html

Retirement calculators include variables such as retirement age, stop work age, and survivor's benefits.

Find a Health Center

United States Department of Health and Human Services

<https://findahealthcenter.hrsa.gov>

Allows users to locate HRSA Health Centers, which provide medical care to individuals who have no health insurance. Includes checkups, treatment for illnesses, dental care, and help with prescription drug costs.

Medicare Benefits

Social Security Administration

www.ssa.gov/medicare

Allows users to apply for Medicare online. Provides information on applying for help with prescription costs; examining the benefits of Medicare Parts A, B, C, and D; and replacing a lost, stolen, or damaged Medicare card.

Medicare.gov

Centers for Medicare & Medicaid Services

www.medicare.gov

Directs older adults and their families to information on key Medicare-related topics, including where to sign up for Medicare, how to change plans, the benefits of Medicare drug coverage, and where to find Medicare forms for claims and appeals. Provides a searchable database of medical providers who take Medicare.

Medicare Savings Programs

Centers for Medicare & Medicaid Services

www.medicare.gov/your-medicare-costs/help-paying-costs/medicare-savings-program/medicare-savings-programs.html

Describes the four Medicare savings programs: Qualified Medicare Beneficiary (QMB), Specified Low-Income Medicare Beneficiary (SLMB), Qualifying Individual (QI), and Qualified Disabled and Working Individuals (QDWI).

Retirement

USA.gov

www.usa.gov/retirement

Basics on retirement planning and pension benefits such as how Social Security works, retiring from the civil service, and managing a private pension.

Retirement Benefits

Social Security Administration

www.ssa.gov/retire

Allows users to apply for retirement benefits like Social Security and Medicare, return to a saved application, and check the application status. Provides a Social Security calculator that identifies spousal and retirement benefits.

Seniors & Medicare and Medicaid Enrollees

Medicaid.gov

www.medicaid.gov/medicaid/eligibility/medicaid-enrollees/index.html

Presents charts detailing what Medicaid covers for Medicare enrollees.

Medication Costs

2-1-1

United Way

www.211.org

Offers information on prescription-assistance services and medical transportation options for seniors, either via a searchable online database or a 24-hour hotline that connects callers with service professionals in their area.

The Extra Help/Low-Income Subsidy (LIS) program

Medicare Rights Center

www.medicareinteractive.org/get-answers/programs-for-people-with-limited-income/the-extra-help-program

Provides forms and eligibility requirements for a program that pays the cost of Medicare prescription drug coverage for lower income seniors. Seniors on Medicaid automatically qualify.

Patient Assistance Program

CenterXAssist

www.rxassist.org

Information on patient assistance programs run by pharmaceutical companies to provide free medications to people who cannot afford to buy their medicine. Offers a comprehensive database of these patient assistance programs, as well as tools, news, and articles.

Utilities

Catholic Charities USA

<http://catholiccharitiesusa.org>

Provides searchable list of local Catholic Charities that may provide low-cost food, housing programs, and help with rent and utilities.

State Data Center

Low Income Home Energy Assistance Program

<http://liheap.org>

Lists local Low-Income Home Energy Assistance Programs by state. Describes state eligibility requirements and provides links to applications.

Weatherization Assistance Program
United States Department of Energy (DOE)
www.energy.gov/eere/wap/weatherization-assistance-program

Lists weatherization program grants by state and describes how weatherization can reduce heating bills. Also includes United States Housing and Urban Development Multifamily Property listings eligible for the program.

Caregivers Support

Family Caregiver Alliance
www.caregiver.org

Provides free videos, classes, events, training, state-by-state resources, online caregiver support group, and information on in-home caregiving, caregiving and illness, long-distance caregiving, and death.

National Family Caregiver Support Program
Administration for Community Living
<https://acl.gov/programs/support-caregivers/national-family-caregiver-support-program>

Provides grants to states and territories to fund various supports that help family and informal caregivers care for older adults in their homes for as long as possible. Is a resource for support networks and service providers.

Housing

Age in Place
National Aging in Place Council
www.ageinplace.org

Provides practical advice and service providers on a number of issues related to aging. Local chapters and events. Can search by ZIP code and topic.

Information for Senior Citizens

United States Housing and Urban Development (HUD)

www.hud.gov/topics/information_for_senior_citizens

Broken into three main categories, provides resources on staying in the home, finding an apartment, and protecting yourself from housing discrimination and reverse mortgage frauds. Check for financial assistance resources and talk to a HUD-approved housing counselor if you have questions about your situation.

Meal Delivery

Meals on Wheels America

www.mealsonwheelsamerica.org

Supports 5,000 community-based senior nutrition programs. Delivers nutritious meals, safety checks, and friendly visits that enable seniors to live independently.

Nursing Homes, Memory Care, and Palliative Care

Alzheimers.gov US Department of

Health and Human Services

www.alzheimers.gov

Provides information on treatment options, home health care and residential memory care, and using insurance and Medicare to pay for treatment.

Dementia: Medline Plus

US National Library of Medicine

www.nlm.nih.gov/medlineplus/dementia.html

Offers articles on the symptoms, prevention, treatment, diagnosis, and types of memory disorders. Links to nonprofit and government resources.

Find a Nursing Home: Medicare.gov

Centers for Medicare & Medicaid Service

www.medicare.gov/nursinghomecompare/search.htm

Searchable database allows consumers to compare information on nursing homes.

Hospice Care

National Hospice and Palliative Care Organization

www.nhpco.org/about/hospice-care

Explains end-of-life care in the home, hospice center, nursing home, and other long-term care facilities. Includes resources on the Medicare hospice benefit, choosing a quality hospice, finding a care provider, palliative care, dying, and bereavement.

How Hospice Works US Centers

for Medicare & Medicaid Services

www.medicare.gov/what-medicare-covers/what-part-a-covers/how-hospice-works

Explains Medicare Part A coverage of hospice and palliative services in plain language. Lists national and state hospice organizations and provides contact information for Medicare representatives by state. Provides searchable database of tests, items, and services covered by Medicare.

Planning for Dementia

US Department of Health and Human Services <https://acl.gov/ltc/basic-needs/pathfinder/dementia>

Summarizes key steps in planning for long-term care for Alzheimer's and dementia. Provides legal information on medical power of attorney, guardianship, and advanced care directives. Links to assisted-living facilities specializing in memory care and information on Medicaid and state based programs.

Guardianship, Conservatorship, and Power of Attorney

Wills and Advanced Directives

Download Your State's Advance Directives

National Hospice and Palliative Care Organization

www.caringinfo.org/i4a/pages/index.cfm?pageid=3289

Provides links to advance directives in PDF format by state.

Also includes glossary of terms and information on Health Insurance Portability and Accountability Act (HIPPA).

Getting Your Affairs in Order

National Institute on Aging

www.nia.nih.gov/health/getting-your-affairs-order

Offers guide to getting your papers and affairs in order.

Alzheimer's and Dementia

Alzheimer's Disease and Related Dementias

National Institute on

[Aging www.nia.nih.gov/health/alzheimers](http://www.nia.nih.gov/health/alzheimers)

Offers information on Alzheimer's disease and dementia including diagnosis, treatment, caregiving, and research and clinical trials.

Alzheimer's Disease Fact Sheet

National Institute on Aging

www.nia.nih.gov/alzheimers/publication/alzheimers-disease-fact-sheet

Summarizes how Alzheimer's disease progresses and discusses diagnosis, treatment, clinical trials, and help for caregivers. Formats include HTML, PDF, Spanish language, and video with transcripts.

Alzheimers.gov

US Department of Health and Human Services

www.alzheimers.gov

Identifies treatment options, describes ways to pay for in-home or memory care, and offers advice on caring for someone with Alzheimer's. Videos with transcripts available.

Falling

Falls Prevention

National Council on Aging (NCOA)

www.ncoa.org/healthy-aging/falls-prevention

Provides videos on practical lifestyle adjustments to prevent falls, tips for older adults and their caregivers on reducing the risk of falling, National Falls Prevention Awareness Day (September 22) community events calendar, and fall prevention programs.

Falls Prevention Center of Excellence

<http://stopfalls.org>

Provides a series of large-print booklets on how to prevent falls for people who are older. Offers web pages for service providers, individuals, families, researchers, and educators.

Vision - Cataracts

Cataracts

American Optometric Association

www.aoa.org/patients-and-public/eye-and-vision-problems/glossary-of-eye-and-vision-conditions/cataract

Discusses what cataracts are, who they are diagnosed, as well as treatment options and the importance of nutrition to eye health.

Cataracts FAQ

Wilmer Eye Institute

www.hopkinsmedicine.org/wilmer/conditions/cataracts_faq.html

Discusses the symptoms, prevention, causes, diagnosis, and treatment of cataracts.

Vision – Glaucoma

Care and Treatment
Glaucoma Research Foundation

www.glaucoma.org/treatment

Assembles commonly asked questions on laser peripheral iridotomy, gonioscopy, laser vision correction, and other treatments for glaucoma. Illustrates what happens the day of your surgery. Lists sources of financial assistance, low vision resources, and glaucoma support groups.

Facts about Glaucoma
National Eye Institute

http://nei.nih.gov/health/glaucoma/glaucoma_facts

Discusses forms of glaucoma, available treatments, and questions to ask your eye care professional. Also available as a streaming MP3 audio file.

Transportation and Driving

Accessibility Strategic Plan
Department of Transportation

www.transportation.gov/mission/accessibility/accessibility-strategic-plan

For the first time, the US Department of Transportation will have an accessibility strategic plan focusing on making transportation more accessible to people with disabilities.

Older Drivers
United States Department of Transportation

www.nhtsa.gov/road-safety/older-drivers

Provides guide to road safety for older drivers.

Kheir Clinic Contact & Locations

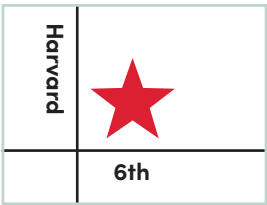
Call 213-235-2500 | Text 213-296-0120

**Kheir – S. Mark Taper Foundation
Community Clinic
(6th Street Clinic)**

3727 W. 6th St. Suite 200
Los Angeles, CA 90020

**Kheir Patient Resources
Department (PRD)**

3727 W. 6th St. Suite 230
Los Angeles, CA 90020
Call 213-637-1080 | Text 213-632-5521



**Kheir Wilshire Clinic 100
+ Optometry**

3255 Wilshire Blvd. Suite 100
Los Angeles, CA 90010

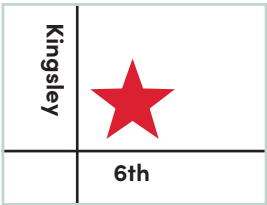
**Kheir Wilshire Clinic 120
+ Dental**

3255 Wilshire Blvd. Suite 120
Los Angeles, CA 90010




Kheir Family & Pediatric (KFP)

3671 W. 6th St. Suite A
Los Angeles, CA 90020




**Kheir Clinic Dental & Optometry
At Karsh Family Social
Services Center**

3755 W 6th St. Suites 113 & 114
Los Angeles, CA 90020

	6th	
Hobart		Harvard
	Wilshire	


**Kheir Vermont Adult Day
Health Care Center**

3033 W. 8th St. Suite 100
Los Angeles, CA 90005
Call 213-389-6565

	8th	
New Hampshire		Vermont

**Kheir Mirae Adult Day
Health Care Center**

717 S. Western Ave. Suite 100
Los Angeles, CA 90005
Call/Text 213-224-8888

	7th	
		Western
	8th	



Kheir Clinic
이웃케어클리닉
Kheir Community Clinic
Clínica Kheir

Community Resource Guide

Navigating **Healthy Aging** for Seniors and Their Families



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