COUNTY OF SAN DIEGO HEALTH AND HUMAN SERVICES AGENCY SOCIAL SERVICES ADVISORY BOARD (SSAB)

MEETING NOTICE: In Person North Central Live Well Center 5055 Ruffin Road, 2nd Floor Conference Room, San Diego CA 92123 Phone (619) 338-2932

Public Video Viewing/Comment Option:

https://sdcounty-ca-gov.zoom.us/j/82517912210

September 10, 2025 9:30 a.m. to 11:30 a.m.

AGENDA

9:30 - 9:31 1. Call to Order

9:31 - 9:33	 9:31 - 9:33 2. Action Item: Approval of May 14, 2025 Meeting Minutes and acknowledgement of no meeting minutes available for the June 11, 2025 and August 13, 2025 meetings, due to the lack of quorum. 				
PUBLIC COMMENTS					
9:33 - 9:40 3. Guidelines for Public Comment on Items not listed on the agenda:					
Members of the public may request to speak about any issue within the purview of the Board					
Each speaker will be limited to three (3) minutes					
Board members may not discuss or take action on issues raised during public comment unless the issue is listed in this Agenda					
PRESENTATIONS/DISCUSSION ITEMS					
9:40 – 9:50	4.	Discussion Item: SSAB Member Sharing, Comments, and Topics of Interest: All Social Services Advisory Board Members			
9:50 – 10:30	5.	Presentation Item: Overview of the Office of Economic Development and Government Affairs (EDGA) and HR 1: Matthew Parr, Director, Office of Economic Development and Government Affairs			
10:30 – 11:00	6.	Information Item: Review of Forecast of Federal Legislation, Budget, and Proposed Rule Changes: Assmaa Elayyat, Deputy Director, Self-Sufficiency Services, Health and Human Services Agency (HHSA)			
11:00 – 11:25	7.	Information Item: Update on Public Assistance Programs, Waivers, Enrollment, Service Delivery, Data: Claudia Gurrola, Chief, Self-Sufficiency Services, Health and Human Services Agency (HHSA)			

SSAB Agenda September 10, 2025 Page 2

11:25 – 11:30 8. **Action Item:** Cancelation of the October 8, 2025 Social Services Advisory Board Meeting: All Social Services Advisory Board Members

ADJOURNMENT/ NEXT MEETING

Next regular meeting will be held on October 8, 2025 at 5055 Ruffin Road, 2nd Floor Conference Room, San Diego, CA 92123.

ASSISTANCE FOR THE DISABLED:

Agendas and records are available in alternative formats upon request. Contact the Social Services Advisory Board staff contact at 619-338-2932 with questions or to request a disability-related accommodation. To the extent reasonably possible, requests for accommodation or assistance should be submitted at least 24 hours in advance of the meeting so that arrangements may be made. Additional information can be found on the Social Services Advisory board website: https://www.sandiegocounty.gov/content/sdc/hhsa/programs/ssp/social_services_advisory_board.html

COUNTY OF SAN DIEGO HEALTH AND HUMAN SERVICES AGENCY SOCIAL SERVICES ADVISORY BOARD (SSAB)

Held In Person North Central Live Well Center 5055 Ruffin Road, 2nd Floor Conference Room, San Diego CA 92123 Phone (619) 338-2932 * * Fax (619) 338-2972

Public Video Viewing/Comment Option:

https://sdcounty-ca-gov.zoom.us/j/81131077849

SSAB Meeting Minutes May 14, 2025

Members Present

Vino Pajanor
Jan Spencley
Robin Maxson
Lori Brown
Rachel Morineau
Andrea Gonzalez
Daniela Murphy

Members Absent

Phil Thalheimer Greg Anglea Dana Toppel

Staff Present

Alberto Banuelos, HHSA
Assmaa Elayyat, HHSA
Adriana Ramirez, HHSA
Jeannie Hufford, HHSA
Brenda Vargas-Ramirez
Janelle Jones-Phillips, HHSA
Yenissa Salgado, HHSA
Alberto Garcia, HHSA
Claudia Gurrola, HHSA
Eric Rubio, HHSA
Bianca Graciano, HHSA
Ismael Lopez, HHSA
Patty Baker, HHSA
David Sagaz, HHSA
Ricardo Hernandez, HHSA

Guests

Lindsey Wade, Hospital Assoc. of SD & Imperial Counties Jack Dailey, Legal Aid Society of San Diego
Tina Bae, Legal Aid Society of San Diego
Adrian Carstens, 2-1-1 San Diego
Jessica Peter, 2-1-1 San Diego
Anae Evangelista, San Diego Hunger Coalition
Richard Rushton, Vista Hill
Lucas Robinson, SD Union Tribune
Kimberly Smith, HHSA Staff
Hassan Abdirahman, Somali Family Service
Smith Sirisakorn, United Domestic Workers of America
Jenny Doig

- 1. Meeting called to order at 9:33 by Chair, Vino Pajanor
- 2. The March 12, 2025 meeting minutes were approved, with 5 Members present voting yes and 1 abstention.
- 3. Public Comments:
 - No public comment

- 4. **Discussion Item:** SSAB Member Sharing, Comments, and Topics of Interest: All Social Services Advisory Board Members. The Members did not have any comments or discussion at this time.
- 5. **Presentation Item:** 25/26 Proposed Operational Plan Budget Presentation: Maryneeza Moraleja, Assistant Group Finance Director, Financial & Support Services Division, Health and Human Services Agency (HHSA). Ms. Moraleja provided economic updates on the unemployment rate, inflation, and statewide sales tax. She also discussed the State and Federal budgets, noting that the proposed HHSA budget includes over \$1 billion in federal revenue. Ms. Moraleja reported that the County Budget Outlook for FY 2025–2027 will prioritize core services and programs while addressing regional needs amid ongoing uncertainty. She stated that the FY 2025–2026 CAO Recommended Budget will total \$3.5 billion, with a net reduction of 168 full-time equivalent (FTE) positions. Additionally, she shared information on upcoming County budget events.
- 6. Information Item: Review of Forecast of Federal Legislation and Proposed Rule Changes: Assmaa Elayyat, Deputy Director, Self-Sufficiency Services, Health and Human Services Agency (HHSA). Ms. Elayyat shared several signed advocacy letters from Matthew Parr, Director of the Office of Economic Development and Government Affairs; Rick Wanne, Director of Self-Sufficiency Services; and Vino Pajanor, Chair of the Social Services Advisory Board. She also presented a memo outlining key federal actions on Health and Human Services, Immigration, and Housing that impact counties, in connection with a letter Mr. Parr sent to Representative Juan Vargas. The Members voted unanimously to form an Ad Hoc group—comprising Robin Maxson, Jan Spencley, and Rachel Morineau—with County staff assistance, to draft a letter to the Board of Supervisors prior to the June 9th Budget Hearing.

There was a public comment by Smith Sirisakorn, Political Coordinator for the United Domestic Workers of America (UDW). Mr. Sirisakorn expressed that he opposes proposed work requirements and cuts to Self-Sufficiency Services, citing the strain on IHSS providers and recipients. He shared a personal caregiving experience, noted ongoing provider shortages, and emphasized coalition efforts to protect Medicaid. He also expressed the urge for the Board to consider the broader economic impacts and maintain service accessibility.

7. **Information Item:** Update on Medi-Cal Renewals, PHE Lift for Public Assistance Programs, Waivers, Enrollment, Service Delivery, Data: Claudia Gurrola, Chief, Self-Sufficiency Services, Health and Human Services Agency (HHSA). The scheduled presentation was postponed due to time constraints. However, Ms. Gurrola highlighted that May is CalFresh Awareness Month, during which the County and its community partners host various events offering in-person assistance to customers.

ADJOURNMENT/SET NEXT MEETING:

The meeting was adjourned at 11:31 a.m. Next regular meeting will be held on June 11, 2025 at 5055 Ruffin Road, 2nd Floor Conference Room, San Diego, CA 92123.

ITEM #4: SSAB MEMBER SHARING, COMMENTS, AND TOPICS OF INTEREST

All Social Services Advisory Board Members



ITEM #5: OVERVIEW OF THE OFFICE OF ECONOMIC DEVELOPMENT AND GOVERNMENT AFFAIRS (EDGA) AND HR 1

Matthew Parr, Director

Office of Economic Development and Government Affairs



Government Affairs and Legislative Advocacy Update



Matthew Parr, Director

matthew.parr@sdcounty.ca.gov - (619) 372-2126

Overview

- What is EDGA?
- Legislative Program
- Authority to Advocate
- Legislative Update
- H.R. 1
- Next Steps



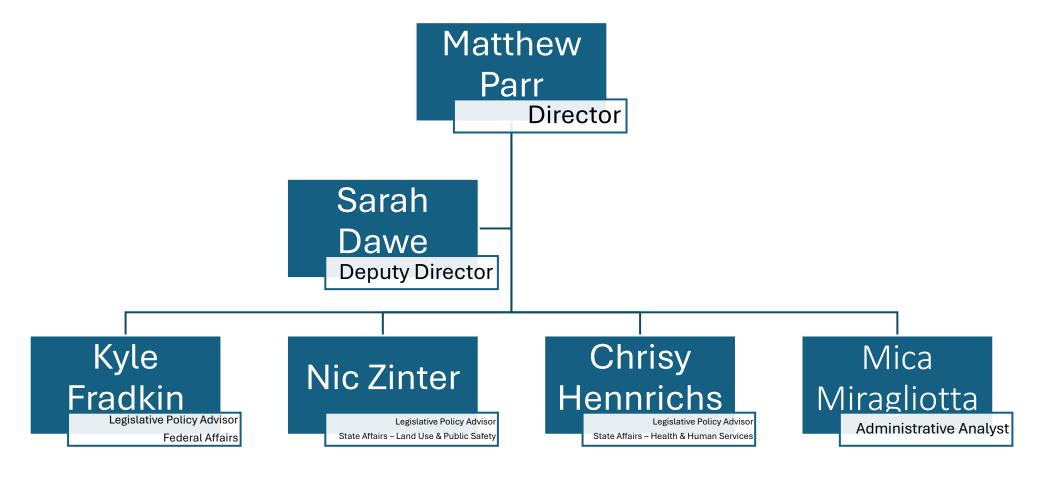


Economic Development and Government Affairs (EDGA)

- Economic Development and Prosperity
 - Small Business Resources & Development
 - Arts, Culture, & Film
- Grants
 - Community Enhancement & Neighborhood Reinvestment Program
- Binational Affairs
- Government Affairs
 - Legislative and Budget Advocacy



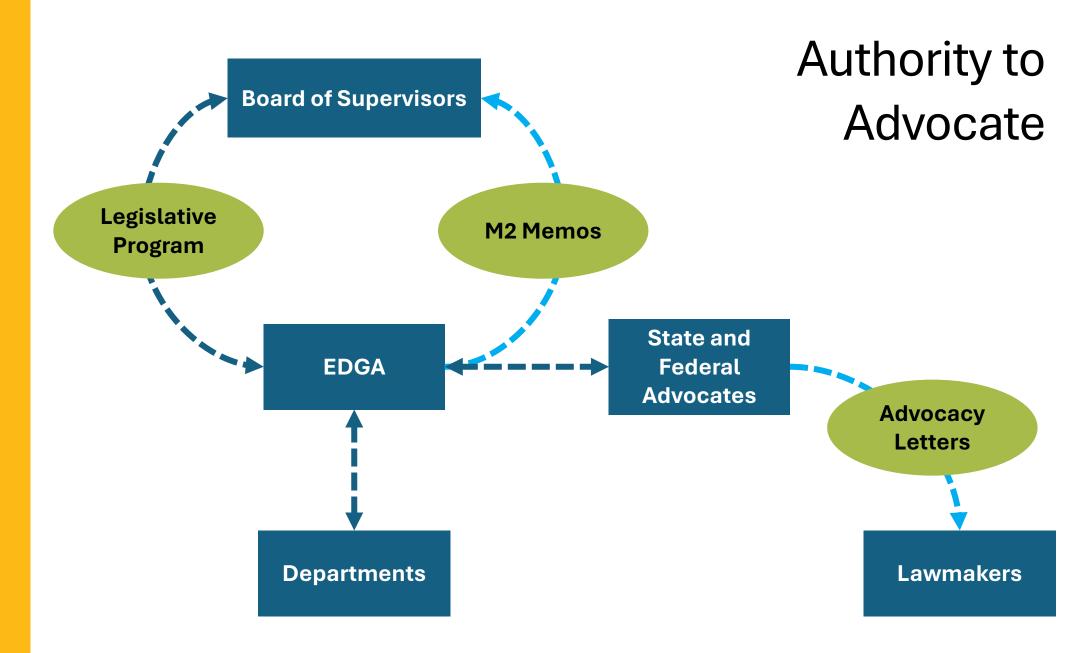
EDGA Government Affairs Organizational Chart





Washington, D.C. Advocacy Team: Van Scoyoc Associates

Sacramento Advocacy Teams: Nielsen Merksamer and JGC Government Relations





Legislative Program Components

Sponsorship

Measures that the County will pursue as a bill sponsor

Priority Issues

Advocacy areas BOS has deemed most important for the year

Policy Guidelines

Statements that provide general standing policy direction



2025 Advocacy

Legislative Actions

- 1000+ bills tracked
- Advocated for 25+ bills
- 45+ letters to elected officials

Top Priority Issues

- Medicaid & SNAP
- Tijuana River Valley Pollution Crisis
- Homelessness
- Affordable Housing



Federal & State Update

FEDERAL

- Annual Appropriations (Federal Budget)
 - Potential cuts to housing, health
- Tariffs, EOs, Federal Funding Reductions
- Reconciliation
- Recissions Package(s)

STATE

- State Budget
 - Control language for DOF to reduce any appropriation
- End of Session





H.R. 1 Impacts

SNAP	MEDICAID
Benefit Cost Shift (10/1/2027)	Work Requirements (1/1/2027)
Administrative Cost Shift (10/1/2026)	Shortened Presumptive Eligibility (1/1/2027)
Work Requirements (Upon Enactment)	New Verification and Redetermination Requirements (1/1/2027)
	Provider Tax Restrictions (10/1/2027)
	Ending Enhanced FMAP Incentive for Late Expansion States (10/1/2026)



H.R. 1 Impacts Cont. (estimated numbers)

CalFresh:

- 96,000 people impacted by changes to work requirements
- 13,000 people impacted by immigration eligibility
- Increase in County's cost sharing responsibility, potentially resulting in service reduction

Medi-Cal:

- 327,000 current recipients would be subject to new work requirements
- 75,000 would lose coverage via immigration eligibility requirements



Next Steps:

- Legislative Program Review
 - August-December each year
 - Public comment and community forum
 - County department feedback
 - Revisions, additions, and sponsorship proposals
- Advocacy Opportunities





Questions?



Matthew Parr matthew.parr@sdcounty.ca.gov



ITEM #6: REVIEW OF FORECAST OF FEDERAL LEGISLATION, BUDGET, AND PROPOSED RULE CHANGES

Assmaa Elayyat, Deputy Director, Self-Sufficiency Services Health and Human Services Agency (HHSA)





DATE: September 4, 2025

SUBJECT: Supplemental Nutrition Assistance Program Provisions of the One Big Beautiful

Bill Act of 2025 – Information Memorandum

TO: All SNAP State Agencies

All Regions

On July 4, 2025, President Donald J. Trump signed Public Law 119-21, the One Big Beautiful Bill Act of 2025 (OBBB). The law contains several provisions that affect the Supplemental Nutrition Assistance Program (SNAP). These include changes to SNAP eligibility, benefits, and program administration.

Attached is an information memorandum describing the SNAP provisions and effective dates for most provisions. FNS will, as appropriate, hold States harmless for Quality Control (QC) purposes for 120 days from the implementation date.

Additional, detailed guidance on implementation of these provisions is generally forthcoming by September 30, unless specified otherwise. Please reach out to your FNS Regional Office with any questions.

Sincerely,

Ronald Ward
Acting Associate Administrator
Supplemental Nutrition Assistance Program
Food and Nutrition Service

SNAP Provisions of the One Big Beautiful Bill Act of 2025

Sec. 10101. Re-Evaluation of Thrifty Food Plan.

Amends Sec. 3(u) of the Food and Nutrition Act (the Act), to revise how the Thrifty Food Plan is updated. It limits future re-evaluations from increasing the cost of the Thrifty Food Plan. It also requires annual adjustment of the cost of the Thrifty Food Plan each October to reflect changes in the Consumer Price Index for All Urban Consumers, published by the Bureau of Labor Statistics of the Department of Labor for the most recent 12-month period ending in June.

The OBBB also amends Sec. 3(u) to establish in statute the household adjustments for maximum allotments. This provision is effective October 1, 2025, and the market baskets of the Thrifty Food Plan may be reevaluated no earlier than October 1, 2027.

Sec. 10102. Modifications to SNAP Work Requirements for Able-Bodied Adults.

This provision modifies Sec. 6(o) of the Act changes which individuals are subject to the time-limited work requirements, the circumstances in which the Secretary may approve a waiver of the time limit in an area and creates new exemptions for Alaska and Hawaii. These requirements are sometimes referred to as the able-bodied adults without dependents (ABAWD) work requirement.

Changes to exceptions from the time limit are listed below.

- 1. Increases the upper age exception to 65 and older.
- 2. Limits the exception based on responsibility to care for a dependent child to those with a child under 14 years of age.
- 3. Removes exceptions for homeless individuals, veterans, and those 24 and younger who aged out of foster care.
- 4. Establishes new exceptions for "an Indian", "Urban Indian" and "California Indian" as defined in the Indian Health Care Improvement Act.

The OBBB also amends Sec. 6(o)(4) to adjust when the Secretary may approve a waiver of the time limit. It removes the criterion that provides for waiver requests when an area does not have a sufficient number of jobs to provide employment for the individuals that reside there from the list of circumstances qualifying an area for a waiver of the time limit. This condition is replaced by an option for areas in Alaska and Hawaii to qualify for an ABAWD waiver if their unemployment rate reaches or exceeds 150% of the national average. States other than Alaska and Hawaii may now only request waivers when the unemployment rate meets or exceeds 10 percent in an area.

These changes were effective upon enactment. State agencies must apply updated exceptions to new and ongoing participants after they are screened, in accordance with 7 CFR 273.24(k). FNS will follow up with State agencies currently operating waivers of the time limit that are no longer eligible under the revised program rules.

The OBBB also establishes new exemptions for individuals residing in Alaska and Hawaii if the State makes a request to the Secretary and is demonstrating a good faith effort to comply with time limit work requirements. Exemptions granted will expire no later than December 31, 2028. Additional guidance for how Alaska and Hawaii may request exemptions under this provision is forthcoming.

Sec. 10103 Availability of Standard Utility Allowances Based on Receipt of Energy Assistance.

Amends how State agencies treat receipt of a payment under the Low-Income Home Energy Assistance Act of 1981 (LIHEAA) or other similar energy assistance programs for the purposes of the Heating and Cooling Standard Utility Allowance (HCSUA). Only households with an elderly or disabled member which receive a payment of more than \$20 under a LIHEAA program (or similar energy assistance programs), annually, in the month of application or immediately preceding 12 months are automatically eligible for the HCSUA to be applied to the household's case when determining eligibility and benefit amount.

Households without an elderly or disabled member are no longer eligible based on a payment of any amount from a LIHEAA program (or similar energy assistance programs). Households without an elderly or disabled member must incur heating or cooling expenses in accordance with section 5(e)(6)(C) to have the HCSUA used in determining their eligibility and benefit amount.

This provision also changes how SNAP treats third-party energy assistance payments provided under a State law depending on whether there is an elderly or disabled SNAP household member. The assistance will no longer count as income if the household includes an elderly or disabled member, and the household will continue to count expenses the assistance covers towards the excess shelter deduction. If the household does not include an elderly or disabled member, the assistance would continue counting as income, however, the household could no longer count the expense covered by the assistance towards the excess shelter deduction.

This provision is effective upon enactment. State agencies must apply this policy at initial certification for new applicants and, at a minimum, apply the changes to ongoing households at recertification.

Sec. 10104. Restrictions on Internet Expenses.

Prohibits inclusion of internet costs in a household's allowable shelter costs for the purposes of the excess shelter deduction. This includes a restriction on including internet costs in calculating standard utility allowances (SUAs).

This provision is effective upon enactment. FNS provided State agencies with additional instructions for calculating their Fiscal Year 2026 SUA values on August 15, 2025.

Sec. 10105. Matching Funds Requirements.

This provision amends Section 4(a) of the Act to establish a SNAP quality control incentive that consists of State matching funds requirements for the cost of SNAP benefit allotments. The matching requirements are determined based on a State's SNAP payment error rate and range from a State share of 0 to 15 percent of program allotments. These requirements generally begin in fiscal year 2028.

Sec. 10106 Administrative Cost Sharing.

This provision amends Section 16(a) of the Act and reduces the amount that USDA may pay a State agency for administrative costs involved in its operation of SNAP to 25 percent, from the current 50 percent, beginning in fiscal year 2027.

Sec. 10107 National Education and Obesity Prevention Grant Program.

This provision amends Section 28(d)(1) of the Act by ending required funding of the SNAP Nutrition Education and Obesity Prevention Grant Program (SNAP-ED) with the fiscal year 2025 grant allocation. Unexpended fiscal year 2025 SNAP-Ed grant funds may be used in FY 2026 to operate SNAP-Ed. Further guidance was released on August 13.

Sec. 10108 Alien SNAP Eligibility.

This provision makes changes to non-citizen eligibility for SNAP. Further guidance is forthcoming.

ITEM #7: UPDATE ON PUBLIC ASSISTANCE PROGRAMS, WAIVERS, ENROLLMENT, SERVICE DELIVERY, DATA

Claudia Gurrola, Chief, Self-Sufficiency Services Health and Human Services Agency (HHSA)



CalFresh Overview

Program Updates

- Update on the Able-Bodied Adults Without Dependents waivers
 - 2-year waiver rescinded and shortened to a 1-year waiver effective February 1, 2025 through January
 31, 2026 (tentatively)
 - H.R. 1 limits ABAWD waivers to areas with an unemployment rate above 10% and removes the lack of sufficient jobs as a qualifying factor





CalFresh Overview

Able Bodied Adults Without Dependents (ABAWD)

- Limits eligibility for CalFresh to three months within a 36-month period for individuals between the ages of 18 through 64 without dependent children under 14
 - Unless the individual satisfy the 30 hours per week work requirement or
 - The individual qualifies for an exemption such as pregnancy, being medically determined physically or mentally unable to work





What Medi-Cal Members Need to Know







For most Medi-Cal members, eligibility and benefits will stay the same

This means you will continue to have access to doctor visits, hospital stays, emergency care, prescription drugs, mental health and substance use disorder treatment, preventive services like screenings and immunizations, and long-term care and transportation, when needed. Coverage also includes dental and vision care, as well as other benefits that support your health and well-being.



Change for Seniors and People with Disabilities Asset Limit

Starting **January 1, 2026**, Medi-Cal will once again consider assets (what you own) when reviewing eligibility for seniors and people with disabilities as part of the application and renewal process.

WHO:

Medi-Cal members and applicants whose eligibility is based on age (65+), disability (physical, mental, or developmental), or long-term care needs.

KEY INFORMATION:

- » The **asset limit** is \$130,000 for one person. Each additional household member adds \$65,000 to the asset limit, up to 10 members per household.
- Assets include bank accounts, cash, and anything over one home and one vehicle.
- Some assets don't count, like the home you live in, one vehicle, household items, and certain savings, like retirement accounts.
- » If you are already a Medi-Cal member, assets will be reviewed at your annual renewal. **Income rules are not changing**.



JANUARY 2026

Change for Certain Adult Immigrants

Medi-Cal Enrollment Freeze for Undocumented Members 19+

Starting January 1, 2026, Medi-Cal will freeze new enrollments for certain adults who are undocumented and do not have a satisfactory immigration status for federal full scope Medi-Cal. This group will no longer be able to newly enroll in full scope Medi-Cal, even if they qualified before under state-funded programs.

WHO:

Californians aged 19 and older, who are not pregnant, who are undocumented, and who qualified for full scope Medi-Cal because of the state-funded Adult Expansions.

KEY INFORMATION:

- » If you are already enrolled in full scope Medi-Cal, you will stay covered no matter your immigration status as long as you **complete your annual renewal**. Make sure to renew and use your benefits!
- » If you are part of this group and lose your coverage, you won't be able to sign **up again**—except for emergency and pregnancy care.
- » If your coverage stops because of a late renewal or missing paperwork, you will have **90 days to fix it** and stay enrolled.
- » Income-eligible children (0-18) and pregnant people can enroll in full scope Medi-Cal, no matter their immigration status. Coverage is for the entire pregnancy and one year after the pregnancy ends.



JULY 2026

Dental Coverage

Starting July 1, 2026, dental benefits will no longer be provided to adult Medi-Cal members who do not have satisfactory immigration status.

WHO:

Californians aged 19 and older who do not have a satisfactory immigration status, including, but not limited to:

- » Green card holders not exempt from the five-year waiting period, who have had their permanent resident status for less than five years.
- » PRUCOL (e.g., with temporary protected status or refugee status).
- » People with no immigration status, but who currently qualify under past Medi-Cal expansions.
- » People enrolled through a trafficking or crime victim assistance program.
- » Lawfully present immigrants who are older than age 20 and not pregnant.

KEY INFORMATION:

- » Emergency dental care (such as treatment for severe pain or infection and tooth extractions) will still be covered for everyone, no matter their immigration status.
- » If you are pregnant and do not have a satisfactory immigration status, you will continue to receive full dental benefits during pregnancy and up to one year after the pregnancy ends. 16



JULY 2027

Monthly Premiums

Starting **July 1, 2027**, certain adult Medi-Cal members who do not have a <u>satisfactory immigration status</u> must pay **\$30 per month** to keep full scope Medi-Cal.

WHO:

Californians aged 19-59, who are not pregnant, and who do not have a <u>satisfactory</u> <u>immigration status</u>, including but not limited to:

- » Green card holders subject to the five-year waiting period, who have had their permanent resident status for less than five years.
- » PRUCOL (e.g., with temporary protected status or refugee status).
- » People without federal immigration status who currently qualify under past Medi-Cal expansions.
- » People enrolled through a trafficking or crime victim assistance program.
- » Lawfully present immigrants older than age 20 who are not pregnant.

KEY INFORMATION:

- » Full scope Medi-Cal coverage for this group includes doctor visits and preventive care, hospital and emergency services, prescription drugs, mental health and substance use disorder treatment, vision care, immunizations, and reproductive health services.
- » If you are part of this group and do not pay your premium, your coverage will be reduced to emergency and pregnancy-related services.



What You Can Do: Stay Covered!

- » **Keep your** <u>contact information updated</u> so you don't miss important notices.
- Watch your mail and respond to renewal packets or letters from your health plan or local county office.
- » Know your renewal date so you can go online or work with your local county Medi-Cal office to renew your Medi-Cal if you do not receive notifications.
- » **Keep going to the doctor** and other medical appointments.
- » Visit our <u>website</u> and follow our social media channels for updates.

Ask questions if you're unsure:

- » Contact your local Medi-Cal office.
- » Call the Medi-Cal Member Help Line at (800) 541-5555.
- » Contact your health care plan.





November 2025

Important changes about Medi-Cal asset limits rules

Dear Medi-Cal Member,

A new California law sets a limit on the total amount of assets (property) a person or family can have to qualify for Medi-Cal. Starting January 1, 2026, California will count assets when determining eligibility for Medi-Cal members and applicants whose eligibility is based on being age 65 or older, having a disability, living in a nursing home, or being part of a family that is over the income for Medi-Cal using federal tax rules.

The new asset limits are:

- \$130,000 for one person.
- Plus \$65,000 for each additional household member (up to 10 people total).
- There may be higher asset limits for some married couples and registered domestic partners (ask your county office about "Spousal Impoverishment" to see if you qualify).

What are assets?

Assets are things you own that have a monetary value. Assets include:

- Bank accounts (checking, savings, CD balances)
- Cash
- **Secondary vehicles and homes** (secondary homes meaning homes you own, but do not live in)
- Stocks, bonds, and investment accounts
- Other financial resources, no matter where those items are located

Assets also include things you own jointly with others.

Some Assets Do Not Count

Some things you own do not count toward the asset limit, such as:

- The home you live in
- One vehicle
- Household items
- Certain retirement accounts

Not all assets count toward the asset limit, but all assets should be reported so the county Medi-Cal office can make an official decision.



If you have too many counted assets, you may reduce your assets to continue to qualify. The MC 007 (https://bit.ly/MC007-ENG) form has more information about what counts as an asset and explains how to reduce your excess assets to qualify for Medi-Cal. Ask your county Medi-Cal office for a copy of the MC 007.

You do not need to do anything right now.

If you already have Medi-Cal, you must report your assets when you renew your coverage or report any changes **on or after January 1, 2026.**

However, if you are over the asset limit, you may want to consider spending some of your money or transferring countable assets out of your name so you can continue receiving coverage. If you do not meet the asset limit at the time of your renewal, you may lose your Medi-Cal coverage.

If you have questions or need help, contact your county Medi-Cal office or visit our website at https://www.dhcs.ca.gov/Get-Medi-Cal/Pages/asset-limits.aspx. Find your county Medi-Cal office information at http://dhcs.ca.gov/COL. For general questions about Medi-Cal, call the free Telephone Service Center (TSC) at 1-800-541-5555

Thank you,

Department of Health Care Services State of California



FREQUENTLY ASKED QUESTIONS

When will asset limits count?

Starting January 1, 2026, California will count assets (property) when determining eligibility for Medi-Cal members and applicants whose eligibility is based on being age 65 and older, having a disability, living in a nursing home, or being part of a family that is over the income limits for Medi-Cal using federal tax rules. This means that, starting in 2026, Medi-Cal will ask for information about the things you own, which may change your eligibility status.

What are assets?

Assets are things you own that have a monetary value. These items include, but are not limited to, bank accounts, cash, second vehicles, second homes, and other financial resources, no matter where those assets are located. Please see below for examples.

Examples of Asset Types

Not Countable	Countable
Primary Home (where you live)	Second Homes
Primary Vehicle	Second Vehicles
Household items (furniture, clothing, etc.)	Cash
Retirement funds (like IRAs), if you are receiving the Required Minimum Monthly Distribution or periodic payments of interest and principal	Bank Accounts

What are asset limits?

Asset limits are the maximum amount of countable assets you can have and still get or stay on Medi-Cal under certain programs. Starting January 1, 2026, the asset limit is \$130,000 for one person only, and the limit increases by \$65,000 for each additional family member (10 people maximum). Not all members of your household may be included when determining eligibility. For example, if you are living with your adult children, they would not be included when determining your family size or your countable assets.

Some married couples and registered domestic partners may have higher asset limits (ask your county Medi-Cal office about "Spousal Impoverishment" to see if you qualify).

Who do the asset limits apply to?

Asset limits will apply to Medi-Cal members and applicants whose eligibility is based on being age 65 or older, having a disability (physical, mental, or developmental), living in a nursing home, or being part of a family that is over the income limits for Medi-Cal using federal tax rules.

Why are asset limits being counted?

California passed a law requiring that asset limits be used in the Medi-Cal eligibility determination for certain Medi-Cal programs that are not based on Modified Adjusted Gross Income federal tax rules, starting January 1, 2026.

What do I need to do now?

You do not need to do anything right now. If you already have Medi-Cal, you must report your assets when you renew your coverage on or after January 1, 2026.

However, if you are over the asset limit, you may want to consider spending some of your money or transferring countable assets out of your name so you can continue receiving coverage. If you do not meet the asset limit at the time of your renewal, you may lose your Medi-Cal coverage.

Will transferring assets out of my name affect my Medi-Cal?

For most individuals, giving away or selling their assets does not impact their Medi-Cal eligibility.

If you are living in a nursing home or may need long-term care Medi-Cal in the future, assets that you give away in 2025 will NOT affect your Medi-Cal benefits.

However, after January 1, 2026, giving away your nonexempt (counted) assets for less than their value could delay the effective date of your coverage for long-term care Medi-Cal.

How can I reduce my countable assets?

Most individuals can give away or sell their countable assets to bring themselves within the asset limit without impacting their Medi-Cal eligibility.

If you are living in a nursing home or may need long-term care Medi-Cal in the future, assets that you give away in 2025 will NOT affect your Medi-Cal benefits. After January 1, 2026, individuals who want to qualify for long-term care Medi-Cal, and are over the asset limit, must spend down their countable assets to qualify. Spending down your assets is buying things you want or need to reduce your countable assets.

Some examples of ways to reduce/spenddown assets include:

- Pay medical bills (non-reimbursable medical bills)
- Buy clothes or items for your home
- Pay rent or your home mortgage

- Pay educational expenses
- Make repairs to your home
- Pay off your auto loan
- Pay off other debts

What happens if I need Medi-Cal long-term care (like a nursing facility or community-based services) and transfer my assets?

If you enter a long-term care facility, you are subject to a "look-back" period, which is when Medi-Cal looks at transfers of nonexempt (counted) assets you may have made within the past 30 months before entering the facility. Depending on the amount of the transfer, you may receive a transfer penalty, which could delay your Medi-Cal for long-term care coverage.

Transfers made on or after January 1, 2026, will be subject to a look-back period. Transfers made on or after January 1, 2024, through December 31, 2025, will NOT be included in the look-back period.

What are the ways a person in long-term care can transfer assets?

Individuals in long-term care can give away and/or sell non-exempt (countable) assets in the following ways without losing Medi-Cal coverage for long-term care services under the following conditions:

- The assets are transferred (given) to the spouse (or to another person who will use them to assist the spouse at home).
- The assets are transferred (given) to a blind or disabled child of the person in the facility.
- The assets are being exchanged for something of equal value.

Contact your county Medi-Cal office for information on acceptable ways to transfer assets to keep your Medi-Cal.

What if I live in a nursing facility and have a spouse or registered domestic partner?

Married individuals who need Medi-Cal-covered nursing facility care either at home or in a facility can split their assets with their spouse/registered domestic partner up to a certain amount. Contact your county Medi-Cal office for more information.

What if I live in a nursing facility and own my own home?

If you live in a nursing facility and own a home you intend to return to, it is exempt as the primary home. The home also continues to be exempt if the Medi-Cal applicant's or member's spouse/registered domestic partner or dependent relative continues to live in it. Additional houses beyond the primary home are counted as an asset.





October 2025

Important news about your Medi-Cal coverage

Dear Medi-Cal Member,

Your Medi-Cal coverage is changing because of a new California law. **Starting July 1, 2026**, your Medi-Cal will no longer cover dental services, except for emergency situations. When dental services are removed, your Medi-Cal will be called full scope Medi-Cal with no Dental. **Full scope Medi-Cal with no Dental will cover all the same services you have now, except for dental services.** Your eligibility will continue without interruption. You will keep full scope Medi-Cal with no Dental as long as you remain eligible for Medi-Cal.

What do I need to know in the coming months?

- You may continue to use your dental services until July 1, 2026.
- If you get a packet in the mail to renew your Medi-Cal, fill it out and return it to keep your Medi-Cal.
- You can keep full scope Medi-Cal with no Dental as long as you don't lose your Medi-Cal for more than three months.

Full scope Medi-Cal with no Dental covers these services and more:

- Medical care
- Medicine your doctor orders
- Specialty care
- Mental health care
- Family planning and maternity care
- Emergency care (includes dental emergencies)
- Tests your doctor orders



- Medical supplies
- Alcohol and drug use treatment
- Transportation to the doctor and to get prescriptions
- In-home care and supports to help avoid nursing home care
- Vision care (eyeglasses)
- Hearing aids
- Foot care

If you are pregnant, your pregnancy and one-year postpartum period will be covered by Medi-Cal. During this time, you will be eligible for full scope Medi-Cal, which will include dental services.

You can learn more about Medi-Cal in the Frequently Asked Questions (FAQ) that came with this letter.

If you would like to get more information or help:

- Call the DHCS Medi-Cal Helpline at **1-800-541-5555**, Monday Friday, 8 a.m. to 5 p.m., except national holidays. The call is free.
- Call the DHCS Ombudsman Office at 1-888-452-8609, Monday Friday, 8 a.m. to 5 p.m., except national holidays. The call is free. The Ombudsman Office can help you with your Medi-Cal health plan.
- Learn more on the DHCS web site at www.DHCS.ca.gov/Medi-cal/Pages/changes.aspx.
- Email ImmigrationPolicy@dhcs.ca.gov.
- Visit www.DHCS.ca.gov/services/medi-cal/Pages/CountyOffices.aspx to find your local county office.

Thank you,

Department of Health Care Services

Frequently Asked Questions (FAQ) About Changes to Medi-Cal for Californians without Satisfactory Immigration Status

1. Am I still covered by Medi-Cal?

Yes. You still have Medi-Cal and can continue to use your benefits.

2. What is changing with Medi-Cal?

Starting **January 1, 2026**, new Medi-Cal applicants who are 19 years of age and older, who are not pregnant, and who do not have an immigration status eligible for full scope Medi-Cal will be eligible for **restricted scope** Medi-Cal. Restricted scope Medi-Cal covers emergency and pregnancy-related services.

Beginning **July 1, 2026**, Medi-Cal will no longer cover dental services, except in emergency situations, for Californians 19 years of age or older who do not have satisfactory immigration status. This coverage is referred to as **full scope Medi-Cal with no Dental**. You may continue to use dental services until this change happens.

New Medi-Cal applicants who are under 19 years of age and apply on or after January 1, 2026, remain eligible for full scope Medi-Cal.

3. What services are covered with full scope Medi-Cal with no Dental?

Full scope Medi-Cal with no Dental covers all medically necessary services except dental services. Full scope with no Dental will cover the following services and more:

- Medical care
- · Medicine your doctor orders
- Specialty care
- Mental health care
- Family planning and maternity care
- Emergency care (includes dental emergencies)
- Tests your doctor orders
- Medical supplies
- · Alcohol and drug use treatment
- Transportation to the doctor to get prescriptions
- In-home care and supports to help avoid nursing home care
- Vision care (eyeglasses)
- Hearing aids
- Foot care

If you are pregnant, your pregnancy and one-year postpartum period will be covered by Medi-Cal. During this time, you will be eligible for full scope Medi-Cal, which will include dental services.

Starting July 1, 2026, dental benefits will no longer be provided to adult members 19 years of age or older, who are not pregnant, and who do not have a satisfactory immigration status. Dental services will remain available in emergency situations and for care related to the emergency.

You can continue to use the Benefits Identification Card (BIC) you already have and keep the doctor(s) you have chosen.

To learn more about Medi-Cal benefits, go to https://bit.ly/medi-cal-ehb-benefits.

4. What services does restricted scope Medi-Cal cover?

Restricted scope Medi-Cal covers emergency related services and pregnancy related services, such as prenatal care, labor, delivery and postpartum care. It also includes long-term care services.

- 5. I already have Medi-Cal. Do I need to take any action right now?
 - No. Your Medi-Cal benefits will continue as long as you remain eligible. If you get a packet in the mail to renew your Medi-Cal, fill it out and return it by the due date. You can call your county Medi-Cal office for help. Respond to all county requests to avoid losing your Medi-Cal benefits.
- 6. I applied in 2025, and my case is still pending. Will I be eligible for Medi-Cal if it is processed after January 1, 2026?

Yes. Because your application was received before January 1, 2026, if you qualify for Medi-Cal, regardless of your immigration status, you will receive full scope Medi-Cal beginning the month we received your application.

7. I applied after January 1, 2026, and am eligible for restricted scope Medi-Cal. How can I become eligible for full scope Medi-Cal?

You can receive full scope Medi-Cal if you provide proof of U.S. citizenship or satisfactory immigration status. If there is a change to your immigration status, report it to your county Medi-Cal office to check if you are eligible for more benefits.

- 8. Will I need to take any action when dental services are eliminated? No. You do not need to take any action.
- 9. I'm pregnant and need healthcare. Will my pregnancy be covered under full scope with no Dental or restricted scope Medi-Cal?

Your pregnancy and one-year postpartum period will be covered by Medi-Cal. During this time, you will be eligible for full scope Medi-Cal, which will include dental services. After your postpartum period ends, you will be re-evaluated and if you

remain eligible for Medi-Cal, you will go back to full scope with no Dental or restricted scope Medi-Cal as you were before the pregnancy.

10. What can I do to make sure I can keep my Medi-Cal?

If you receive a packet in the mail to renew your Medi-Cal, fill it out and return it by the due date to avoid losing your coverage. Respond to all county requests to make sure your Medi-Cal continues without interruption. You can call or visit your county Medi-Cal office to speak to a county eligibility worker. You can visit and create an account on BenefitsCal (www.BenefitsCal.org) to keep track of your Medi-Cal and other county public assistance programs for which you have applied for.

11. If I lose my Medi-Cal coverage and reapply, will I be eligible only for restricted scope Medi-Cal?

If you are discontinued from Medi-Cal, you will have a three-month Grace Period from the last date of eligibility provided on your Notice of Action, to reenroll into full scope Medi-Cal with no Dental.

The Grace Period is the three months following your Medi-Cal discontinuance. If you reach out to your county Medi-Cal office during this time and are eligible for Medi-Cal, you will be reenrolled in full scope Medi-Cal with no Dental. For example, you receive a Notice of Action that says you will no longer have Medi-Cal on August 1, 2026. The Grace Period gives you three months to enroll back into full scope Medi-Cal with no Dental. In this example, you have until the end of October 2026 to enroll back into full scope Medi-Cal with no Dental.

If your Medi-Cal is discontinued, you should contact your county Medi-Cal office as soon as possible. The county eligibility worker will tell you what is needed to reactivate your Medi-Cal. Respond to all county requests to make sure your Medi-Cal is reactivated and continues without interruption. If you do not re-enroll by the end of the Grace Period, you must reapply for Medi-Cal. You will be eligible only for restricted scope Medi-Cal.

12. Do I need to choose a new healthcare provider when Medi-Cal changes to full scope coverage with no Dental?

There will be no changes to your chosen healthcare provider. If you have already chosen a healthcare provider, you do not need to choose a new one. You can continue receiving services with your chosen provider.

If you are discontinued and do not reenroll during the Grace Period, you will be disenrolled from your Medi-Cal health plan.

If you have questions about your health plan and provider choices, call Medi-Cal Health Care Options, Monday – Friday, 8 a.m. to 6 p.m.1-800-430-4263 (TTY users call 1-800-430-7077 or 711). You can also go to the Medi-Cal Health Care Options website at https://www.healthcareoptions.dhcs.ca.gov.

13. What if I need help in a different language?

If you need help in a language other than English, you can call your county Medi-Cal office for assistance. You can also call one of the following numbers for help:

- Dental Services 1-800-322-6384 (TTY 1-800-735-2922)
- Managed Care Services 1-800-452-8609 (TTY 711)
- Mental Health Services 1-800-896-4042 (TTY 1-800-896-2512)
- Substance Use Disorder Services 1-800-879-2772 (TTY 711)
- Long-Term Services and Supports 1-916-552-9105 (TTY (800)430-7077)
- Fee-for-Service or General Beneficiary Questions 1-800-541-5555 (TTY 1-800-430-7077)

14. What if I need materials in a different format?

You can ask to get all written information about your Medi-Cal benefits in a different format. The format can be braille, large print, an audio or data CD, or some other format to help you understand and read letters or fill out your packet. To ask for this, you can:

- Go to https://www.dhcs.ca.gov/Pages/Alternative-Formats.aspx. Follow the instructions to choose a different format.
- Call 1-833-284-0040 (California Relay 711). The call is free.
- Contact your county Medi-Cal office. You can find your local county Medi-Cal office information at dhcs.ca.gov/COL.

15. Where can I learn more or get help?

- Call the DHCS Medi-Cal Helpline at **1-800-541-5555**, Monday Friday, 8 a.m. to 5 p.m., except national holidays. The call is free.
- Call the DHCS Ombudsman Office at **1-888-452-8609**, Monday Friday, 8 a.m. to 5 p.m., except national holidays The call is free. The Ombudsman Office can help you with managed care.
- Call or visit your local county Medi-Cal office. Visit <u>www.DHCS.ca.gov/services/medi-cal/Pages/CountyOffices.aspx</u> to find an office near you.
- Learn more on the DHCS website at www.DHCS.ca.gov/Medi-cal/Pages/changes.aspx.
- Email lmmigrationPolicy@dhcs.ca.gov.

16. Where can I get more information on how my immigration status affects my Medi-Cal?

DHCS and county Medi-Cal offices cannot answer questions related to immigration status or public charge. If you have questions about your immigration status and Medi-Cal benefits, talk to a qualified immigration lawyer.

The California Department of Social Services (CDSS) funds qualified nonprofit organizations to give services to immigrants who live in California. A list of organizations is available at https://bit.ly/immigration-service-contractors.

For immigration information and resources, go to California's Immigrant Guide at https://immigrantguide.ca.gov/.

To learn about public charge, see the California Health and Human Services Agency Public Charge Guide at https://www.chhs.ca.gov/blog/2022/10/19/joint-statement-from-calhhs-leaders-on-new-public-charge-regulation/.

ITEM #8: CANCELATION OF THE OCTOBER 8, 2025 SOCIAL SERVICES ADVISORY BOARD MEETING

All Social Services Advisory Board Members



MONTHLY UPDATES



Legend
Approved/Chaptered
Advocacy Support

Self-Sufficiency Services Legislative Tracking Log

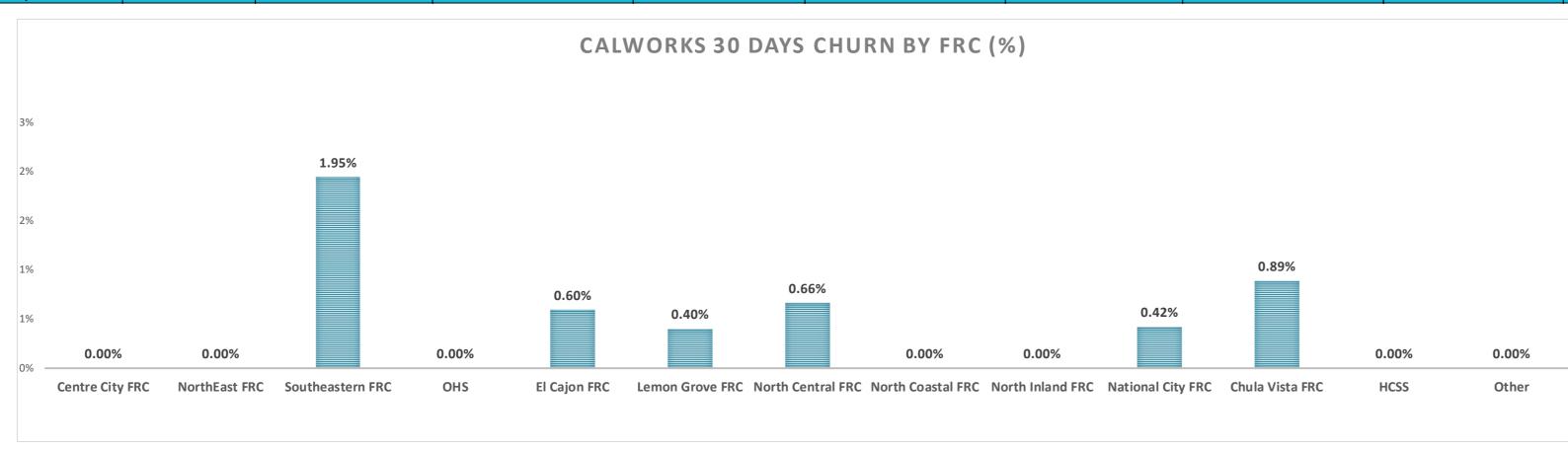
Revised: 09/01/2025

Support, if Amended or Watch		Revised: 09/01/2025			
Bill Number and Name	Date Introduced	Description	Affected Programs	Support/Oppose/Watch/Concer ns	Status
AB 553 CalFresh: Food Access	2/14/2025	The bill would mandate the California Department of Social Services (CDSS) to maximize food options for CalFresh households. Maximizing food options would include allowing all CalFresh recipients the ability to purchase hot foods or hot food products ready for immediate consumption with CalFresh benefits.	CalFresh	Approved/Chaptered	07/14/2025: Inactive Bill - Chaptered. Chaptered by Secretary of State - Chapter 38, Statutes of 2025.
AB 320 Public Social Services: Eligibility Income Exclusions	1/24/2025	Current law allows students who serve on school boards to receive school credit or specified payments for their service. This bill would require that those payments be exempt from property or income consideration in means tested programs, including but not limited to CalWORKs, CalFresh, General Relief, Medi-Cal, and Cash Assistance for Immigrants (CAPI).	All Programs	Support	09/03/2025: Active Bill - In Floor Process. Read second time. Ordered to third reading.
AB 588: CalWORKs Unrelated Adult Male (Now called State Fire Marshal: Lithium Battery Working Group Membership funding)	2/12/2025	The bill is no longer called CalWORKs Unrelated Adult Male. It has been changed to State Fire Marshal: Lithium battery working group: Membership funding. It does not impact CalWORKs program.	None	Support	05/23/2025: Active Bill - In Committee Process. Ir Committee: Held under submission.
AB 607: CalWORKs Home Visit Program	2/13/2025	This bill would extend the time in the Home Visiting Program to at least 24 months, not to exceed the duration of the applicable home visiting program model, and would extend the maximum age of the child at the time of enrollment to less than 36 months of age. This bill would benefit applicants/recipients as eligibility to Home Visiting services would be extended. his bill would introduce changes to existing county policies. Guidance would need to be provided to staff.	CalWORKs	Support	09/02/2025: Active Bill - In Floor Process. Read second time. Ordered to third reading.
AB 1074: CalWORKs Family Reunification - Immunization	2/20/2025	This bill would extend the time frames for families enrolled in Family Reunification services and would allow cash benefits be paid for a longer period of time. In addition it adds language that the cash benefits would be allowed for the child(ren) who have been removed from the home even if other children remain in the home. Both would be extremely beneficial to families who are working towards reunifying their families. The bill would also remove the immunization penalty which would benefit CalWORKs recipients with children under the age of 6 who choose not to immunize their children as they would no longer incur a reduction in their grant amount.	CalWORKs	support	09/02/2025: Active Bill In Floor Process. Read second time. Ordered to third reading.
AB 42 CalWORKs and CalFresh: Eligibility Income and Resource Exclusions	2/3/2025	This bill would exempt any grant, award, scholarship, loan, or fellowship benefit that is provided to any assistance unit member for educational purposes and that is not administered by the United States Department of Education from consideration as income for purposes of determining CalWORKs and CalFresh eligibility or grant amounts, and would also exempt those funds as resources for purposes of determining CalWORKs eligibility or grant amounts. The bill would also require, to the extent permitted by federal law or regulation, the State Department of Social Services to exercise a federal option to exclude, for purposes of calculating a household's income under CalFresh, any type of income that the department excludes when determining eligibility or benefits for CalWORKs.	CalWORKs and CalFresh	Support	09/04/2025: Active Bill - In Floor Process. In Assembly. Concurrence in Senate amendments pending.
AB 1324: CalWORKs	2/21/2025	The bill provisions would help streamline and simplify the process for applicants/recipients, by having less eligibility criteria to evaluate. Customers would benefit from the below provisions of this bill as they all could potentially increase access to CalWORKs benefits: Exempting in-kind gift income or income paid to a noncustodial parent • Not incurring a reduction in grant due to elimination the exclusion of strikers from the assistance unit, and • Eliminating the requirement that a parent work less than 100 hours in the preceding 4 weeks (of application). The bill will benefit the customers by ensuring all Employment Services hours of participation are being accounted for, leading to self-sufficiency. In addition, it would standardize participation hour calculations for customers participating in Expanded Subsidized Employment (ESE) by requiring counties to add to their existing ESE services plan the following: • Prioritize ESE placements with employers who have labor agreements and offer opportunities for participants to obtain skills and experience in their fields of interest; • Prevent ESE placements that supplant work that a public employee would be hired to do; • Prevent placement with employers who have a history of violating safety standards or labor laws. This bill would require counties to report in the CalWORKs Annual Summary the names of all ESE employers and the total amount of subsidized wages provided to each employer.	CalWORKs	Support	09/02/2025: Active Bill. In Floor Process. Read second time. Ordered to third reading.
SB 225: School Nutrition: Guardian Meal Reimbursement	2/27/2025	SB 225 would require the department to distribute information about the federal Summer Electronic Benefits Transfer for Children Program to guardians whose children are eligible for specified summer food programs. This bill would allow for state reimbursement on meals served to guardians of eligible students who receive meals from a summer meal program. The bill would require a guardian of an eligible student to be present at the summer meal program site for the summer meal. program operator to receive state-funded reimbursement for that meal, unless non-congregate rules are in place. The bill would require summer meal program operators receiving state-funded reimbursement to report to the department the number of meals served to guardians by meal site no later than 30 days after the end of summer meal site operations	CalFresh	Support	5/23/2025: Active Bill - In Committee Process. May 23 hearing: Held in committee and under submission.
AB 79: Public social services: higher education	3/4/2025	The bill requires the State Department of Social Services (CDSS) to work with liaisons and basic needs staff from public institutions of higher education to develop a training on self-sufficiency services available to students. The training would focus on topics including student eligibility, local programs that increase employability, Medi-Cal, CalFresh, and CalWORKs policy updates in addition to other information related to the needs of college students. The training would be available to the liaisons and basic needs staff at the institutions of public higher education in addition to eligibility staff. It would also require a quarterly workgroup meeting with education and eligibility staff to share best practices, identify issues, and address any challenges faced by the stakeholders.	CalFresh, Medi-Cal and CalWORKs	Support	09/04/2025: Active Bill - Passed. In Assembly. Ordered to Engrossing and Enrolling.
AB 363: Community Colleges: CalWORKs Recipients Education Program	3/20/2025	The bill would expand participation in the CalWORKs Recipients Education Program at California Community Colleges. Under this program, community college districts are required to provide educational and special services to CalWORKs recipients attending community colleges. The new provision would include students who have exceeded the 60-month time limit on CalWORKs but still have one or more dependents receiving aid under the CalWORKs program. The funding provided will be based on the number of CalWORKs participants who are enrolled in the college and the scope and number of programs that are offered to CalWORKs recipients to assist them in obtaining employment. Additionally, the proposed amendment changes the work study payments to the community colleges to 75% and employers to pay at least 25% of the wages for the work study positions. However, the program may waive the 25% employer contribution provided the employer does not decrease the work study positions.	CalWORKs	Support	05/23/2025: Active Bill In Committee Process. I Committee: Held under submission.
AB 1161: Public Social Services: State of Emergency or Health Emergency	2/20/2025	This bill would provide continuous eligibility for CalWORKs, CalFresh, and MediCal recipients who are victims of a state of emergency or a health emergency. The continuous eligibility would maintain the recipient's current benefits for a least 90 calendar days starting from the proclamation/declaration and extending through at least the conclusion of the emergency proclamation/declaration. The bill also requires: The continuous eligibility to be automated in the programming of the eligibility systems. The immediate restoration of eligibility for any recipient whose program eligibility was discontinued, who has been impacted. A determination of good cause for failing to submit the information needed for SAR 7 or Redetermination.	CalWORKs, CalFresh, Medi- Cal and CAPI	Support	05/23/2025: Active Bill In Committee Process. Ir Committee: Held under submission.
AB 474: Tenancy: Nonprofit Home-Sharing Program: Income Tax Exclusion: Eligibility for Public Social Services (Now called: Housing Discrimination: Nonprofit home-sharing program: Eligibility for Public Social Services)	3/19/2025	This bill would exempt rental income received by a low-income person who rents bedroom(s) in their home or unit through a nonprofit home-sharing program from consideration as income or assets for the purposes of determining eligibility and benefit amounts for public social services. The bill also makes two changes to housing laws which do not impact our programs. The bill would benefit the specified customers as the provisions would allow for less income to be counted against them when determining CalWORKs, CalFresh, Medi-Cal, General Relief, Cash Assistance Program to Immigrants eligibility and grant amounts. As a result, the specified customers who would otherwise be ineligible, receive a lower benefit amount, or less beneficial program, would become and/or remain eligible to the above programs and associated supportive programs (or would not have a reduction in their benefits).	CalFresh, Medi-Cal, CalWORKs, General Relief	Support	09/02/2025: Active Bill In Floor Process. Read second time. Ordered to third reading.
AB 1211: CalFresh Maintenance of Benefit Level	2/21/2025	This bill would require the State Department of Social Services to ensure that the level of CalFresh benefits remain at least at the level that was in effect on January 20, 2025, under the Thrifty Food Plan, which is a food plan designed by the United States Department of Agriculture to determine Supplemental Nutrition Assistance Program (SNAP) benefit amounts. The benefit maintenance requirement would be triggered if the federal government makes reductions to SNAP benefits that would result in the level of CalFresh benefits being lower than the threshold. In addition, the bill would require the department to conduct a feasibility study on increasing the eligibility and benefits of the CalFresh Program.	CalFresh	Support	05/23/2025: Active Bill In Committee Process. I Committee: Held under submission.
SB 739: Disaster CalFresh: County Resources Status	2/21/2025	This bill would create new duties for counties to provide Disaster CalFresh related information to the State Department of Social Services on the ability of each county office in the impacted area to provide timely and adequate service to CalFresh applicants and recipients.	CalFresh	Support	08/18/2025: Active Bill - In Floor Process. Ordered to inactive file on request of Assembly Member Aguiar-Curry.
AB 461 Truancy: CalWORKs School Attendance	3/24/2025	The bill would benefit customers as they would no longer incur a reduction in grant due to school attendance penalty if a child in the assistance unit who is age 16 or older is not attending school or participating in Employment Services. As a result, the specified customers who would otherwise be ineligible or receive a lower benefit amount, would become and/or remain eligible to CalWORKs and associated supportive programs. Current workload regarding CalWORKs school attendance may be reduced, depending on CDSS instructions regarding implementation of this bill. But they may include staff would have to inform families of how to enroll in school and screen for eligibility to Family Stabilization services. More customers would become and/or remain eligible to CalWORKs which could lead to additional caseloads for the county. This bill would introduce changes to existing county policies. Current policies/program material would need to be updated to implement the changes. Guidance/training would need to be provided to staff. The Statewide Automated Welfare System (SAWS) is not designed to evaluate the provisions of the bill. Therefore, automated system updates would be needed to meet these provisions.	CalWORKs	Support	09/02/2025: Active Bill In Floor Process. Read second time. Ordered to third reading.

AB 1357: Guaranteed Income Payments: Consideration as Income or Resources	3/24/2025	This bill, to the extent not in conflict with federal law, would require guaranteed income payments be exempt from income or resource consideration for purposes of determining eligibility for benefits, or the amount of benefits, in means-tested programs, and vice versa. Means-tested programs include, but is not limited to, CalWORKs, CalFresh, General Assistance, Medi-Cal, Kinship Guardianship Assistance Payment Programs (Kin-GAP), Adoption Assistance Program (AAP) and Cash Program for Immigrants (CAPI). he bill would benefit the specified customers as the provisions would allow for less income to be counted against them when determining eligibility and grant amounts for the above programs. As a result, the specified customers who would otherwise be ineligible, receive a lower benefit amount, or less beneficial program, would become and/or remain eligible to the above programs and associated supportive programs, or would not have a reduction in their benefits. Training would be needed for eligibility staff as the bill would require staff to learn and implement the new exemption when processing case evaluations. Current policies/program material would need to be updated to implement changes for previously countable income. More customers would become and/or remain eligible to the above programs which could lead to increased caseloads for the county. The Statewide Automated Welfare System (SAWS) is not designed to evaluate the provisions of the bill. Therefore, automated system updates would be needed to meet these provisions.	CalWORKs, CalFresh, Medi- Cal, General Relief, Kin-GAP, AAP and CAPI	Support	08/29/2025: Active Bill - In Committee Process. In committee: Held under submission.
AB 790: Housing and Homelessness Programs: Single Women with Children	3/28/2025	The bill would require qualifying state housing finance or homelessness programs to dedicate 10% of total available funds to provide housing and services for single women with children who are homeless or at risk of homelessness or who are currently experiencing, have previously experienced, are at substantial risk of experiencing, are fleeing, or are attempting to flee domestic violence, and do not have a safe and stable housing alternative. Current operation impacts are unknown, as they would depend on how the California Department of Social Services establishes the process/policy. However, no changes to current work processes or eligibility determination system anticipated. Current workforce/staffing impacts are unknown. It appears these impacts would be minor, if any.		Support	09/04/2025: Active Bill - Passed. In Assembly. Ordered to Engrossing and Enrolling.
SB 560 CalWORKs: Public Social Services	2/20/2025	Current workload and operation impacts are unknown, as they would depend on how CDSS establishes the process/policy. The bill provisions will add workload activities to the workers to evaluate on whether the overpayment/over issuance is collectable or not; or if the customer has committed fraud. However, once it has been determined that the overpayment/over issuance is not to be collected, it will relieve workers of the time required to pursue overpayments//over issuance; or relieve of the time to charge the customer with civil/criminal penalties. This bill would introduce changes to existing county policies. Guidance would need to be provided to staff.	CalWORKs	Support	05/23/2025: Active Bill - In Committee Process. May 23 hearing: Held in committee and under submission.
SB 761: CalFresh: Student Eligibility	5/23/2025	This bill would eliminate the existing approval process for a campus-based program to be approved by the California Department of Social Services (CDSS) as a state-approved local education program that increases employability (IPIE). Instead, it would require that all campus-based programs of study at a public institutions of higher education be automatically considered a state-approved LPIE. The bill would require CDSS to implement these provisions through All County Letters (ACLs) or similar instructions, and to issue guidance letters to the Chancellor's Office of the California Community Colleges, California State University, and the Office of the President of the University of California to inform them of these changes. This bill would also require: The California Student Aid Commission (CSAC) to update the Cal Grant application by January 1, 2027 to: • Identify students who may be eligible for CalFresh. • Allow students to opt-in to share their contact information with CDSS. The Chancellor of the California Community Colleges and of the California State University and the office of the President of the University of California is requested to submit to CDSS a list of their campus-based programs of study offered and CDSS must approve those programs. Reporting requirements from CDSS to Assembly Committee on Higher Education, Assembly Committee on Human Services: • The number of state-approved local campus-based educational programs that increase employability. • The number of approved applications, pending applications, denied applications (with reasons) distinguished by name and campus. 8 by the 2027-2028 academic year, Counties, the California Community Colleges, California State University and the University of California (if entered into a data-sharing agreement) must proactively contact the opted-in students to assess eligibility and assist in applying for Califersh benefits.	CalFresh	Support	09/03/2025: Active Bill - In Floor Process. Ordered to third reading.
AB 1402: Fresh Start Grants: Personal Income Tax Law: credits	4/23/2025	The bill would require eligibility staff to determine eligibility to the following refundable tax credits for each CalFresh recipient the California Earned Income Tax Credit, the Young Child Tax Credit, and the Foster Youth Tax Credit. If eligible to a refundable tax credit, the eligibility worker would then calculate the value of the credit and issue it in the form of a Fresh Start Grant instead of the recipient receiving the tax credit.	CalFresh	Support, if Amended	04/24/2025: Active Bill - In Committee Process. Re-referred to Committee on Human Services.
AB 1049: California Food Assistance Program: Sponsor Deeming Rules	2/20/2025	Federal deeming rules and exemptions would not apply to customers approved for California Food Assistance Program (CFAP) if AB 1049 is passed. By creating new duties for counties relating to CFAP eligibility, the bill would impose a state-mandated local program.	CalFresh	Support, if Amended	05/23/2025: Active Bill - In Committee Process. In Committee: Hearing postponed by committee.
AB 1012: Medi-Cal: Immigration Status	2/20/2025	This bill would repeal W&I Code Section 14007.8 making an individual who does not meet satisfactory immigration status ineligible for full scope Medi-Cal benefits and only eligible for care and services that are necessary for the treatment of an emergency medical condition and medical care directly related to that emergency, as defined by federal law. The bill would create the Serving Our Seniors Fund and would transfer funds previously used for Medi-Cal benefits for non-citizens without satisfactory immigration status to that fund. The State Department of Health Care Services would oversee the funds and utilize them to restore and maintain payments for Medicare Part B premiums for eligible individuals.	Medi-Cal	Oppose, unless Amended	02/21/2025: Active Bill - Pending referral. From printer. May be heard in committee March 23.

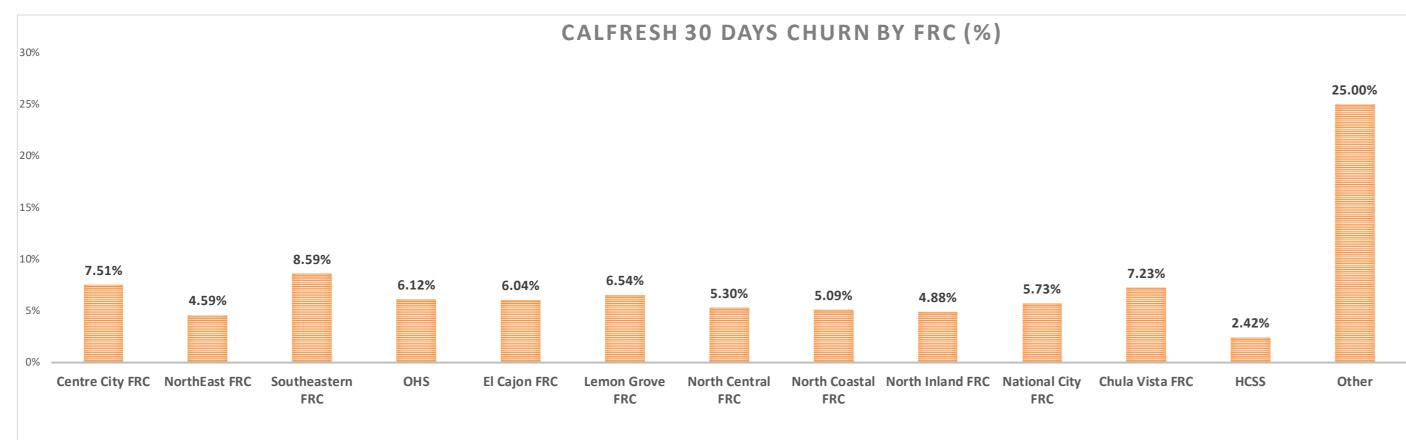


							EALIN AND HUMAN SERVICES AGENCT	SAN DIEGO						
						August 20	025 CalWOR	KS Churn Re	port					
				_		/ tagast z	ozo Garrion	ito ondinito	port					
	Total CW App Received	Total CW App Received(%)	Initial App	Initial App(%)	Application Received benefits-previous 30 days	Application Received benefits-previous 30 days(%)	Application Received benefits-previous 60 days	Application Received benefits-previous 60 days(%)	Application Received benefits-previous 90 days	Application Received benefits-previous 90 days(%)	Application Received benefits-previous 120 days	Application Received benefits-previous 120 days(%)	Application Received benefits-previous over 120 days	Application Received benefits-previous over 120 days(%)
Centre City FRC	4	100.00%	4	100.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
NorthEast FRC	117	100.00%	85	72.65%	0	0.00%	1	0.85%	1	0.85%	1	0.85%	29	24.79%
Southeastern FRC	257	100.00%	168	65.37%	5	1.95%	3	1.17%	2	0.78%	1	0.39%	78	30.35%
OHS	1	100.00%	1	100.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
El Cajon FRC	336	100.00%	258	76.79%	2	0.60%	2	0.60%	1	0.30%	2	0.60%	71	21.13%
Lemon Grove FRC	248	100.00%	190	76.61%	1	0.40%	2	0.81%	1	0.40%	0	0.00%	54	21.77%
North Central FRC	302	100.00%	239	79.14%	2	0.66%	3	0.99%	1	0.33%	2	0.66%	55	18.21%
North Coastal FRC	260	100.00%	214	82.31%	0	0.00%	0	0.00%	0	0.00%	1	0.38%	45	17.31%
North Inland FRC	304	100.00%	233	76.64%	0	0.00%	1	0.33%	1	0.33%	1	0.33%	68	22.37%
National City FRC	237	100.00%	174	73.42%	1	0.42%	0	0.00%	4	1.69%	1	0.42%	57	24.05%
Chula Vista FRC	338	100.00%	253	74.85%	3	0.89%	2	0.59%	0	0.00%	1	0.30%	79	23.37%
HCSS	9	100.00%	8	88.89%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	11.11%
Other	1	100.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	100.00%
SD County	2,414	100.00%	1,827	75.68%	14	0.58%	14	0.58%	11	0.46%	10	0.41%	538	22.29%

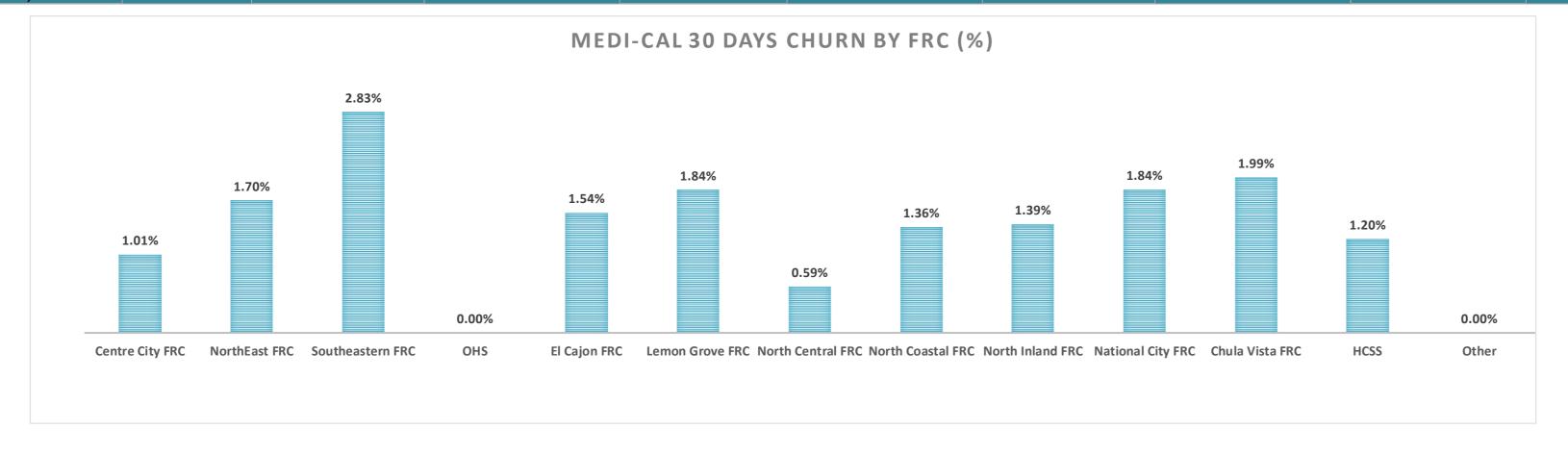


	August 2025 CalFresh Churn Report													
	Total CF App Received	Total CF App Received(%)	Initial App	Initial App(%)	Application Received benefits- previous 30 days	Application Received benefits-previous 30 days(%)	Application Received benefits- previous 60 days	Application Received benefits-previous 60 days(%)	Application Received benefits- previous 90 days	Application Received benefits-previous 90 days(%)	Application Received benefits- previous 120 days	Application Received benefits-previous 120 days(%)	Application Received benefits-previous over 120 days	Application Received benefits-previous over 120 days(%)
Centre City FRC	1,704	100.00%	888	52.11%	128	7.51%	74	4.34%	56	3.29%	41	2.41%	517	30.34%
NorthEast FRC	1,416	100.00%	925	65.32%	65	4.59%	45	3.18%	30	2.12%	26	1.84%	325	22.95%
Southeastern FRC	1,327	100.00%	584	44.01%	114	8.59%	70	5.28%	45	3.39%	46	3.47%	468	35.27%
OHS	49	100.00%	23	46.94%	3	6.12%	3	6.12%	2	4.08%	1	2.04%	17	34.69%
El Cajon FRC	1,805	100.00%	898	49.75%	109	6.04%	61	3.38%	58	3.21%	53	2.94%	626	34.68%
Lemon Grove FRC	1,101	100.00%	502	45.59%	72	6.54%	52	4.72%	40	3.63%	32	2.91%	403	36.60%
North Central FRC	2,055	100.00%	1,303	63.41%	109	5.30%	53	2.58%	40	1.95%	52	2.53%	498	24.23%
North Coastal FRC	1,709	100.00%	937	54.83%	87	5.09%	52	3.04%	47	2.75%	44	2.57%	542	31.71%
North Inland FRC	2,009	100.00%	1,091	54.31%	98	4.88%	63	3.14%	50	2.49%	51	2.54%	656	32.65%
National City FRC	855	100.00%	421	49.24%	49	5.73%	43	5.03%	22	2.57%	31	3.63%	289	33.80%
Chula Vista FRC	2,074	100.00%	1,015	48.94%	150	7.23%	67	3.23%	65	3.13%	63	3.04%	714	34.43%
HCSS	330	100.00%	219	66.36%	8	2.42%	5	1.52%	5	1.52%	3	0.91%	90	27.27%
Other	4	100.00%	2	50.00%	1	25.00%	0	0.00%	1	25.00%	0	0.00%	0	0.00%
SD County	16,438	100.00%	8,808	53.58%	993	6.04%	588	3.58%	461	2.80%	443	2.69%	5,145	31.30%

Month	Total CF Case	Cases Received Benefits -previous 3		
Worth	Restored	Days		
Aug-25	1,959	1,742		



	August 2025 Medi-Cal Churn Report													
	Total MC App Received	Total MC App Received(%)	Initial App	Initial App(%)	Application Received benefits- previous 30 days	Application Received benefits-previous 30 days(%)	Application Received benefits- previous 60 days	Application Received benefits-previous 60 days(%)	Application Received benefits- previous 90 days	Application Received benefits-previous 90 days(%)	Application Received benefits- previous 120 days		Application Received benefits-previous over 120 days	Application Received benefits-previous ove 120 days(%)
Centre City FRC	892	100.00%	684	76.68%	9	1.01%	19	2.13%	9	1.01%	7	0.78%	164	18.39%
NorthEast FRC	824	100.00%	588	71.36%	14	1.70%	16	1.94%	12	1.46%	8	0.97%	186	22.57%
Southeastern FRC	882	100.00%	582	65.99%	25	2.83%	24	2.72%	17	1.93%	25	2.83%	209	23.70%
OHS	24	100.00%	17	70.83%	0	0.00%	1	4.17%	0	0.00%	1	4.17%	5	20.83%
El Cajon FRC	1,427	100.00%	1,009	70.71%	22	1.54%	29	2.03%	21	1.47%	21	1.47%	325	22.78%
Lemon Grove FRC	817	100.00%	554	67.81%	15	1.84%	12	1.47%	16	1.96%	17	2.08%	203	24.85%
North Central FRC	1,692	100.00%	1,349	79.73%	10	0.59%	15	0.89%	17	1.00%	21	1.24%	280	16.55%
North Coastal FRC	1,693	100.00%	1,268	74.90%	23	1.36%	27	1.59%	21	1.24%	25	1.48%	329	19.43%
North Inland FRC	2,081	100.00%	1,531	73.57%	29	1.39%	17	0.82%	22	1.06%	33	1.59%	449	21.58%
National City FRC	708	100.00%	509	71.89%	13	1.84%	11	1.55%	11	1.55%	6	0.85%	158	22.32%
Chula Vista FRC	1,505	100.00%	1,071	71.16%	30	1.99%	22	1.46%	35	2.33%	24	1.59%	323	21.46%
HCSS	914	100.00%	715	78.23%	11	1.20%	10	1.09%	12	1.31%	9	0.98%	157	17.18%
Other	57	100.00%	53	92.98%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	4	7.02%
SD County	13,516	100.00%	9,930	73.47%	201	1.49%	203	1.50%	193	1.43%	197	1.46%	2.792	20.66%







ELIGIBILITY SERVICES BY THE NUMBERS...

September 2025 (Data Month: August 2025)

PARTICIPANTS

- CalFresh: 396,793 recipients, down 1.30% from last year.
 - o 126,056 child recipients (0-18), down 4.49% from last year.
 - o 99,934 senior recipients (60+), up 2.63% from last year.
- CalWORKs: 52,635 recipients, up 2.02% from last year.
 - o 38,635 child recipients (0-18), up 2.83% from last year.
 - o Welfare-to-Work: 13,114 participants, down 2.32% from last year.
- CMS: 7 CMS recipients, down 22.22% from last year.
- **General Relief:** 5,594 recipients, down 4.03% from last year.
- Medi-Cal: 876,069 recipients, down 7.61% from last year.
 - o 294,536 child recipients (0-18), down 6.95% from last year.
 - o 20,360 Medi-Cal Expansion Over 50 Years.

			% Change in	n Recipients	
Program	Cases	Recipients	Previous Month	Previous Year	Unduplicated Number of Recipients (August 2024 – August 2025)
CalFresh	238,709	396,793	-0.90%	-1.30%	546,943
CalWORKs	18,621	52,635	-0.32%	2.02%	72,591
CMS	7	7	-22.22%	-22.22%	34
General Relief	5,576	5,594	-2.08%	-4.03%	16,832
Medi-Cal	513,755	876,069	-0.76%	-7.61%	1,095,087
Total	776,668	1,331,098	-0.79%	-5.44%	1,205,074**

^{*}Recipients include 347,299 under ACA Medicaid Coverage Expansion (MCE).

^{*}The number of *unduplicated* recipients for *all* programs.

PROCESSING

Applications Registered						
Program	August 2025	FYTD				
CalFresh	16,742	32,796				
CalWORKs	2,757	5,429				
CMS	31	59				
General Relief	4,442	8,970				
Medi-Cal	15,368	31,093				
Total	39,340	78,347				

Renewals Generated						
Program	August 2025	FYTD				
CalFresh	13,795	27,265				
CalWORKs	1,590	3,212				
CMS	5	7				
General Relief	142	318				
Medi-Cal	41,540	83,447				
Total	57,072	114,249				

Periodic Reports Generated						
Program August 2025 FYTD						
CalFresh	14,709	29,187				
CalWORKs	1,479	2,908				
General Relief	0	0				
Medi-Cal	31	46				
Total	16,219	32,141				

Documents Imaged					
August 2025	FYTD				
481,715	954,312				

Tasks Created					
August 2025 FYTD					
356,409	704,165				

ACCESS CUSTOMER SERVICE CENTER

Customer Service							
Month August 2024 August 2025 Change FYTD							
Total Calls	196,672	176,404	-20,268	350,485			
Abandoned	2,239	1,252	-987	2,272			
Average Wait Time	0:33	0:22	-0:11	0:20			

Community Based Organization (CBO)							
Month August 2024 August 2025 Change FYTD							
Total Calls	7,002	7,329	327	14,596			
Abandoned	106	56	-50	101			
Average Wait Time	1:31	0:33	-0:58	0:33			

Emails Received				
August 2025	FYTD			
2,399	4,924			

FAMILY RESOURCE CENTER VISITS

Month	August 2024	August 2025	Change	FYTD
Total Tickets Issued	51,090	48,503	-5%	95,700
Average Wait Time (min.)	(*-)	(*-)	N/A	

^{*} Due to COVID-19 Waivers, Avg time is not available for August 2025

FYTD=Fiscal Year To Date

Processing Timeliness Applications, Periodic Reports, and Renewals

CalFresh

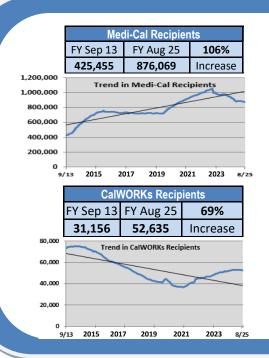
- Regular Applications: State required days to disposition = 30 Days
 - o San Diego = 16 Days
- Expedited Applications: State required days to disposition = 3 Days
 - San Diego = 2 Days
- Semi-Annual Reporting Timeliness = 96%
- Annual Renewal Timeliness = 93%

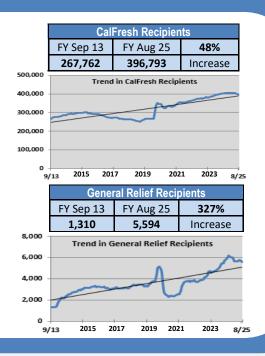
CalWORKs

- Regular Applications: State required days to disposition = 45 Days
 - San Diego = 15 Days
- Immediate Need: State required days to disposition = 1 Day
 - San Diego = 1 Day
- Semi-Annual Reporting Timeliness = 98%
- Annual Renewal Timeliness = 92%

Medi-Cal

- Regular Applications: State required days to disposition = 45 Days
 - San Diego = 19 Days
- Annual Renewal Timeliness = 91%



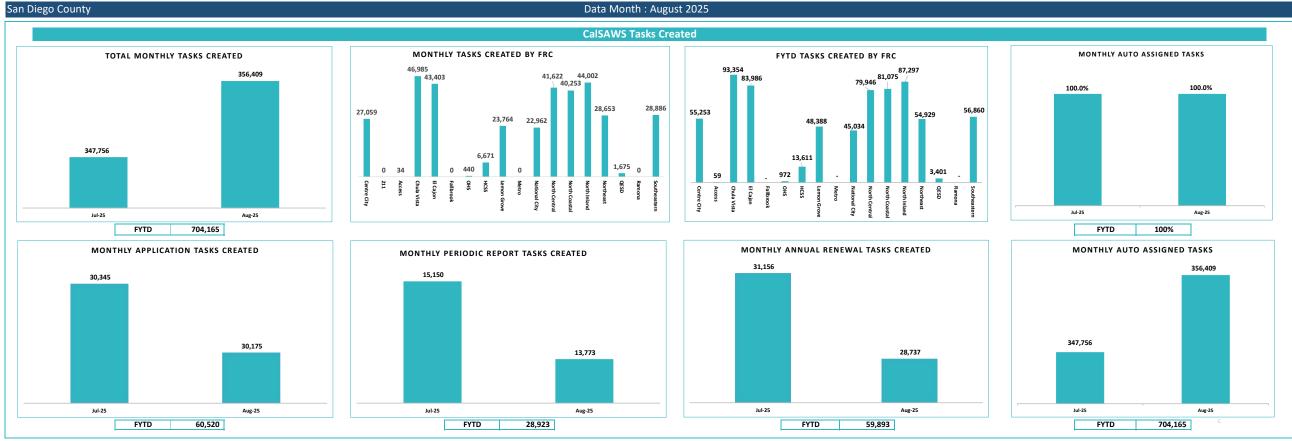


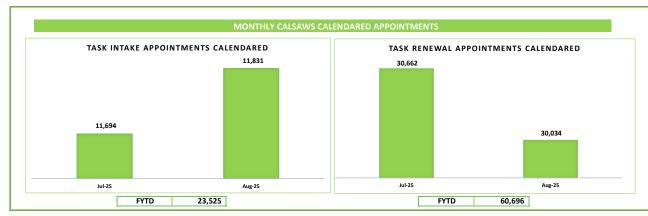
Office of Military and Veterans Affairs (OMVA) Data Tracker

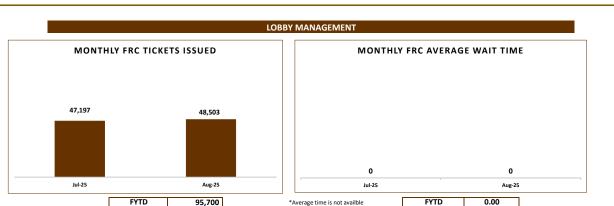
OMVA Service Delivery	August 2025	FYTD
Calls Received	4,469	8,647
Calls Received- Average Wait Times	1:55	1:35
In-Person Customer Visits	3,029	6,107
Driver's License Applications	3	7
License Plate Applications	328	633
College Fee Waiver Applications	1358	3,113
VA Claim Appointments Made	559	1,114
VA Claim Appointments Wait Time (Business Days)	12	13
Community Events	3	3
Contacts Made at Community Events	178	178



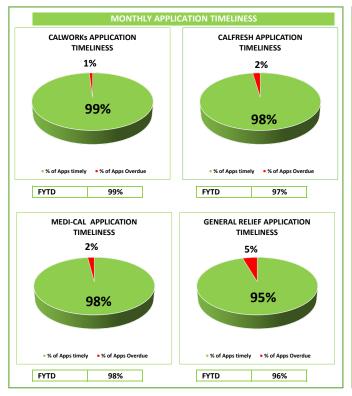
Monthly Self-Sufficiency Services Performance Dashboard (FY 25/26)

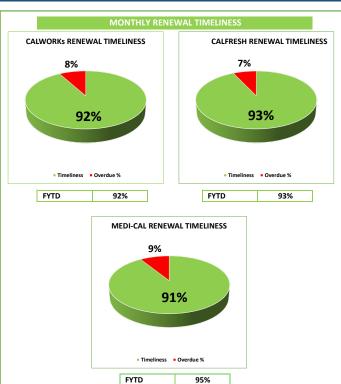


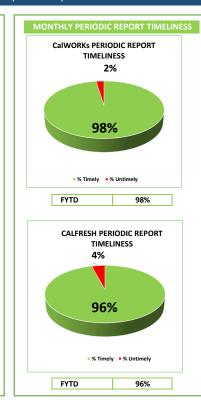




CASE PROCESSING PERFORMANCE (CALSAWS)





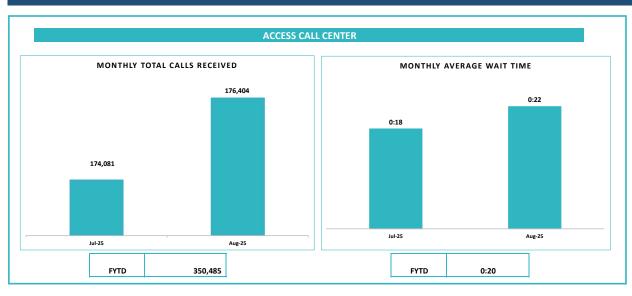


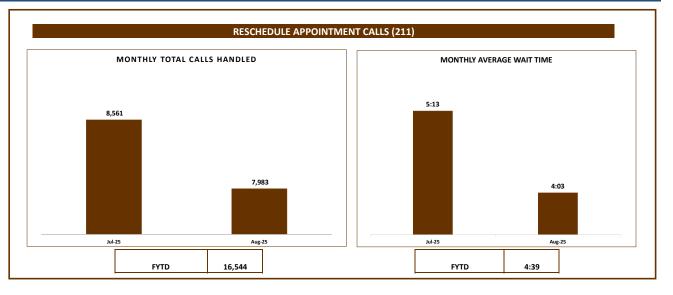




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ACCESS CALL CENTER









Monthly Robo-Calls & Text Messaging Report FY 2025/2026

Automated (Robo) Call Summary	Program			
Month	CW/CF SAR Reminder	CW Balderas	CW/CF RE's	Grand Total
July 2025	8,714	216	1,237	10,167
August 2025	8,787	230	5,479	14,496
September 2025				
October 2025				
November 2025				
December 2025				
January 2026				
February 2026				
March 2026				
April 2026				
May 2026				
June 2026				
Grand Total	17,501	446	6,716	24,663

Text Messaging								
Summary	Program							
Month	CW/CF SAR Reminder	CW/CF Balderas	CalFresh Renewal	CalWORKs Renewal	MC Renewal SMS Pre Packet	MC Renewal SMS No Renewal Received	Other	Grand Total
July 2025	14,168	8,556	5,851	1,025	20,385	15,346	3,244	68,575
August 2025	14,365	8,562	6,103	942	20,483	14,167	34,645	99,267
September 2025								
October 2025								
November 2025								
December 2025								
January 2026								
February 2026								
March 2026								
April 2026								
May 2026								
June 2026								
Grand Total	28,533	17,118	11,954	1,967	40,868	29,513	37,889	167,842

Text Messaging Summary	Special Campaign				
Month	MC 65+	WTW/ES Sanction SMS	Text2LiveHealthy	Housing and Community Development Services	Grand Total
July 2025	1,304	720	1,220		3,244
August 2025	1,283	748	16,431	16,183	34,645
September 2025					
October 2025					
November 2025					
December 2025					
January 2026					
February 2026					
March 2026					
April 2026					
May 2026					
June 2026					
Grand Total	2,587	1,468	17,651	16,183	37,889

*Note: Robo Calls have been temporarily suspended in all circumstances except for CalWORKS and CalFresh Balderas call notifications.
In lieu of this, all former Robo Call receipients were reprogrammed to receive text message notifications to alert them of any upcoming case actions.

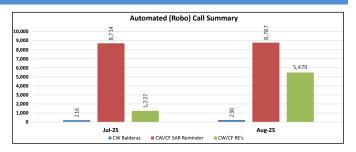
*Note: PR Text Message Summary methodology updated to count CW/CF Household once.

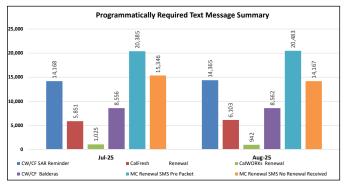
There household are cent one text message CW/CF household are included in CW Toy! Mes

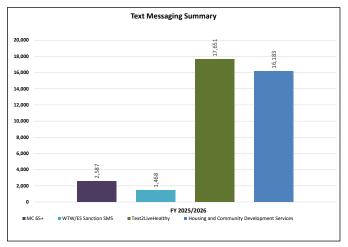
These houseold's are sent one text message. CW/CF households are included in CW Text Message Count.

Effective 12/2020, Access is no longer doing the Monthly Consent Text Messaging RRR Campaign, nor mailing CF Packets.

Report Data Month: 08/2025 Report Run Date: 09/01/2025











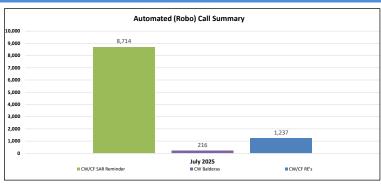
July 2025

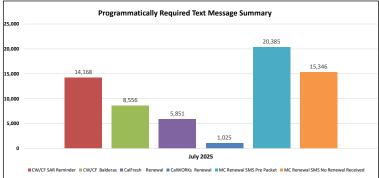
Automated (Robo) Call Summary	Program			
Month	CW/CF SAR Reminder	CW Balderas	CW/CF RE's	Grand Total
July 2025	8,714	216	1,237	10,167
Grand Total	8,714	216	1,237	10,167

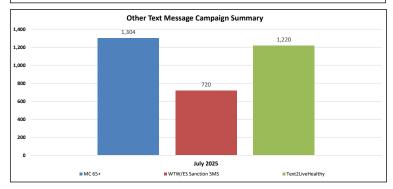
Text Messaging Summary	Program							
Month	CW/CF SAR Reminder	CW/CF Balderas	CalFresh Renewal	CalWORKs Renewal	MC Renewal SMS Pre Packet	MC Renewal SMS No Renewal Received	Other	Grand Total
July 2025	14,168	8,556	5,851	1,025	20,385	15,346	3,244	68,575
Grand Total	14,168	8,556	5,851	1,025	20,385	15,346	3,244	68,575

Text Messaging Summary	Special Campaign			
Month	MC 65+	WTW/ES Sanction SMS	Text2LiveHealthy	Grand Total
July 2025	1,304	720	1,220	3,244
Grand Total	1,304	720	1,220	3,244

Report Data Month: 07/2025 Report Run Date: 09/01/2025









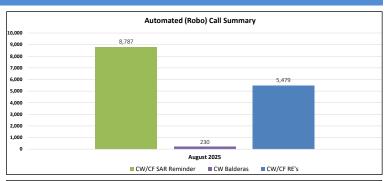
August 2025

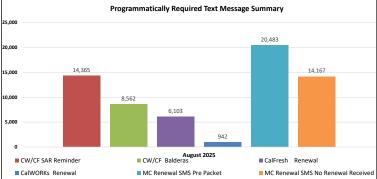
Automated (Robo) Call Summary	Program			
Month	CW/CF SAR Reminder	CW Balderas	CW/CF RE's	Grand Total
August 2025	8,787	230	5,479	14,496
Grand Total	8,787	230	5,479	14,496

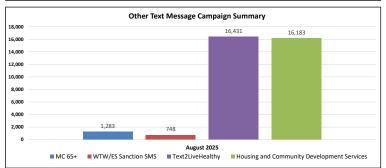
Text Messaging Summary	Program							
Month	CW/CF SAR Reminder	CW/CF Balderas	CalFresh Renewal	CalWORKs Renewal	MC Renewal SMS Pre Packet	MC Renewal SMS No Renewal Received	Other	Grand Total
August 2025	14,365	8,562	6,103	942	20,483	14,167	69,290	133,912
Grand Total	14,365	8,562	6,103	942	20,483	14,167	69,290	133,912

Text Messaging Summary	Special Campaign				
Month	MC 65+	WTW/ES Sanction SMS	Text2LiveHealthy	Housing and Community Development Services	Grand Total
August 2025	1,283	748	16,431	16,183	34,645
Grand Total	1,283	748	16,431	16,183	34,645

Report Data Month: 08/2025 Report Run Date: 09/01/2025







	07/2025-09/2025 Opplication Referrals by	у Арра		Status						
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CalFresh Denials in the Month Regardless of Application Date from Disposition Report

	CalFuoah	Daniad	0/ of Domind		0/ of ETD
Month	CalFresh	Denied	% of Denied	FTP Denials	% of FTP
02/2022	Disposition Cases	CalFresh	CalFresh	F FF4	Denials
03/2022	19,689	7,278	36.96%	5,551	76.27%
04/2022	18,621	7,346	39.45%	5,833	79.40%
05/2022	18,048	6,914	38.31%	5,453	78.87%
06/2022	18,966	7,543	39.77%	5,728	75.94%
07/2022	18,832	7,825	41.55%	6,130	78.34%
08/2022	21,263	9,246	43.48%	7,170	77.55%
09/2022	21,115	9,460	44.80%	7,885	83.35%
10/2022	22,443	9,891	44.07%	7,905	79.92%
11/2022	20,679	9,544	46.15%	8,027	84.11%
12/2022	20,969	9,258	44.15%	7,539	81.43%
01/2023	19,525	8,483	43.45%	7,032	82.90%
02/2023	19,810	9,040	45.63%	7,543	83.44%
03/2023	21,709	9,829	45.28%	8,076	82.17%
04/2023	18,834	8,310	44.12%	6,806	81.90%
05/2023	19,916	8,818	44.28%	7,284	82.60%
06/2023	19,089	8,379	43.89%	6,816	81.35%
07/2023	17,504	9,136	52.19%	4,147	45.39%
08/2023	22,677	11,683	51.52%	5,232	44.78%
09/2023	20,962	10,946	52.22%	5,033	45.98%
10/2023	23,550	11,830	50.23%	5,300	44.80%
11/2023	22,144	11,563	52.22%	5,586	48.31%
12/2023	19,694	9,537	48.43%	4,529	47.49%
01/2024	19,711	9,211	46.73%	3,963	43.02%
02/2024	21,928	10,794	49.22%	5,208	48.25%
03/2024	21,780	10,415	47.82%	4,733	45.44%
04/2024	19,101	9,466	49.56%	4,579	48.37%
05/2024	19,490	9,808	50.32%	2,533	25.83%
06/2024	17,291	8,634	49.93%	2,101	24.33%
07/2024	21,178	10,993	51.91%	2,676	24.34%
08/2024	21,171	10,790	50.97%	2,590	24.00%
09/2024	22,308	12,016	53.86%	2,910	24.22%
10/2024	24,794	12,760	51.46%	2,815	22.06%
11/2024	19,865	10,165	51.17%	2,316	22.78%
12/2024	20,945	11,034	52.68%	2,665	24.15%
01/2025	20,666	9,851	47.67%	2,150	21.83%
02/2025	20,339	10,465	51.45%	2,556	24.42%
03/2025	19,355	9,426	48.70%	2,020	21.43%
04/2025	20,208	9,741	48.20%	2,237	22.96%
05/2025	18,840	9,384	49.81%	2,380	25.36%
06/2025	16,938	8,404	49.62%	2,108	25.08%
07/2025	17,509	8,623	49.25%	2,116	24.54%
08/2025	15,951	7,546	47.31%	1,637	21.69%

CalFresh Dispositions and Denials CalFresh Disposition Cases Denied CalFresh FTP Denials

01/2024

07/2024

05/2024

11/2024 01/2025 03/2025 05/2025 07/2025





Months	Count of Case Number
Jun-23	6,956
Jul-23	2,285
Aug-23	9,501
Sep-23	7,746
Oct-23	8,843
Nov-23	8,815
Dec-23	6,619
Jan-24	5,269
Feb-24	7,033
Mar-24	7,399
Apr-24	7,552
May-24	10,240
Jun-24	7,764
Jul-24	7,829
Aug-24	12,038
Sep-24	9,716
Oct-24	9,423
Nov-24	13,244
Dec-24	20,877
Jan-25	6,738
Feb-25	6,520
Mar-25	8,507
Apr-25	7,688
May-25	9,189
Jun-25	7,460
Jul-25	12,917
Aug-25	16,339
Grand Total	244,507

The top four discontinuance reasons are (in order from most to least):

- 1. No Eligible Mem
- 2. Failed to Complete Redetermination
- 3. Inter-County Transfer
- 4. Failed MAGI



Monthly Medi-Cal Renewal Report FY 2025-2026

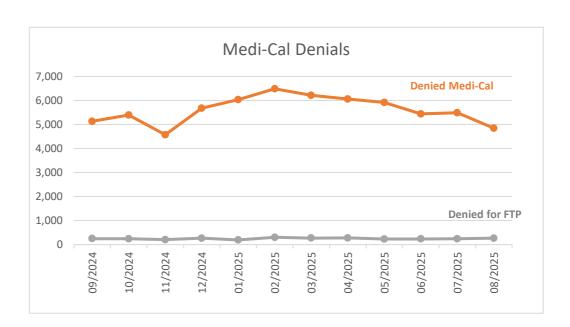
11 2023 2020														
			Data as c	of 7/31			Data as o	of 8/31						
Medi-Cal Renewals	Jul-25	%	Jul-25	%	Aug-2	5 %	Aug-25	%	Sep-25	%	Sep-25	%	Oct-25	%
Total Medi-Cal Renewals Due	41,907	100%	41,907	100%	41,54	0 100%	41,540	100%	43,574	100%	43,574	100%	45,584	100%
Total Medi-Cal Renewals Auto														
Renewed	8,851	21%	8,851	21%	9,29	22%	9,295	22%	12,757	29%	12,757	29%	14,856	33%
Total Medi-Cal Renewals Renewed														
via Combo Case*	8,978	21%	27,763	66%	8,98	22%	27,068	65%	9,701	22%	13,099	30%	9,564	21%
Total Medi-Cal Renewal Packets														
Mailed	23,752	57%	23,752	57%	22,97	7 55%	22,977	55%	20,851	48%	20,851	48%	20,920	46%
Packets Received, Not Yet														
Processed	431	1%	3,762	9%	465	1%	3,725	9%	588	1%	4,582	11%	456	1%
Total Medi-Cal Renewals Completed	17,829	43%	36,614	87%	18,28	4 44%	36,363	88%	22,458	52%	25,856	59%	24,420	54%
Total Medi-Cal Renewals Pending														
Receipt	23,647	56%	1,531	4%	22,79	1 55%	1,452	3%	20,528	47%	13,136	30%	20,708	45%

Source: Daily RRR Status Report
*Combo: Medi-Cal With Active CF/GR/CW
Report Date: 09/03/2025



Medi-Cal Denials in the Month Regardless of Application Date from Disposition Report

Month	Denied Medi-Cal	% of Denied Medi-Cal	Denied for FTP	% of FTP Denials		
09/2024	5,127	42.59%	249	4.86%		
10/2024	5,397	41.26%	242	4.48%		
11/2024	4,574	43.00%	207	4.53%		
12/2024	5,678	44.28%	265	4.67%		
01/2025	6,037	42.28%	194	3.21%		
02/2025	6,486	46.22%	306	4.72%		
03/2025	6,211	44.67%	272	4.38%		
04/2025	6,055	42.86%	279	4.61%		
05/2025	5,919	44.95%	235	3.97%		
06/2025	5,439	44.35%	238	4.38%		
07/2025	5,487	42.96%	242	4.41%		
08/2025	4,850	36.05%	267	5.51%		





Medi-Cal Case Discontinuances in the Month

Month	Medi-cal Discontinuances	% of Discontinued Cases	Discontinued for FTP	% of FTP Discontinuances
09/2024	15,900	2.96%	5,088	32.00%
10/2024	13,072	2.44%	4,513	34.52%
11/2024	13,340	2.51%	5,476	41.05%
12/2024	18,059	3.44%	10,941	60.58%
01/2025	24,232	4.73%	4,328	17.86%
02/2025	8,777	1.71%	2,411	27.47%
03/2025	8,525	1.65%	2,496	29.28%
04/2025	10,630	2.06%	2,415	22.72%
05/2025	9,278	1.79%	2,663	28.70%
06/2025	10,557	2.04%	2,564	24.29%
07/2025	8,243	1.59%	2,234	27.10%
08/2025	13,336	2.60%	7,147	53.59%

