

MOTION BY SUPERVISORS LINDSEY P. HORVATH
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October 21, 2025

Outreach to Individuals Impacted by Changes to Medi-Cal Asset Test

Medi-Cal is California’s Medicaid program, offering free or low-cost health coverage to those who qualify. Household income is considered for Medi-Cal eligibility and program limits are based on the Federal Poverty Level (FPL), with different thresholds for adults (up to 138% FPL) and children (up to 266% FPL) , as well as those meeting other eligibility criteria such as pregnancy, disability, or foster care enrollment.

As part of the Budget Act of 2021, the health omnibus trailer bill, Assembly Bill (AB) 133 (Chapter 143, Statutes of 2021), modified these limits over two phases. All assets, defined by the California Department of Health Care Services as “things you own,” including “bank accounts, cash, second vehicles, second homes, other financial resources, no matter where they are¹,” were fully disregarded in determining Medi-Cal eligibility, beginning January 1, 2024. However, to address the State’s budget deficit, the 2024-2025 state budget reinstated the Medi-Cal Asset Limit effective January 1, 2026, to consider resources, including property and other assets, when determining Medi-Cal

¹ [Asset Limits FAQs](#) | [Help Center](#) | [Medi-Cal](#)

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eligibility for applicants or members whose eligibility is not determined using Modified Adjusted Gross Income (MAGI) tax rules.

According to guidance on the DHCS website, beginning January 1, 2026, Medi-Cal will examine an applicant's assets to decide if that individual can get or keep their coverage. This applies to applicants that are age 65 or older, live in a nursing home, have a physical, mental or developmental disability, or are in a family that's income is too high to qualify under federal tax rules². There are approximately 400,000 Angelinos who are currently receiving Medi-Cal health coverage, who could be impacted by this policy change.

Starting January 1, 2026, the limit is \$130,000 for one person and an additional \$65,000 for each additional family member, up to 10 people. The LAO estimates that approximately 112,000 Californians added to the program in 2024 and 2025 due to the temporary elimination of the asset limits³. While this number may seem relatively small, we need to ensure these Angelinos understand the change in policy and receive clear guidance on any next steps they should take as a result. We must ensure that seniors are aware of the policy that allows them to keep their property within the asset limits to keep their health coverage. This is another policy change that impacts our community's health and wellbeing, and we must ensure that people are provided with the information they need to make safe and informed choices.

WE, THEREFORE, MOVE that the Board of Supervisors suspend Section 22.1 of the Rules of the Board for the limited purpose of considering this motion.

² [Asset Limits FAQs | Help Center | Medi-Cal](#)

³ [The 2025-26 Budget: Understanding Recent Increases in the Medi-Cal Senior Caseload](#)

WE, FURTHER, MOVE that the Board of Supervisors direct the Department of Public Social Services, in collaboration with the Departments of Health Services, Public Health, Mental Health, Aging and Disabilities, Business and Consumer Affairs, and Economic Opportunity, and the Chief Executive Office's Poverty Alleviation Initiative, and in coordination with managed care plans, community health providers centers, and, to do the following within the next 60 days:

1. Evaluate the potential impact of the asset limit restriction on the County's population of Medicaid enrollees, and identify how many individuals in Los Angeles County will be impacted;
2. Identify and implement a community outreach and information campaign to ensure those impacted by this change are aware of the asset limit changes,
3. Include information on the asset limit changes in the County's "Keep Your Coverage" campaign and other outreach materials.

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AGN. NO.