



Ways You Can Be a DRAGON Slayer!

1. Be sure that your client is a US citizen or national. Remember – The DRA does not require anything new from non-citizen immigrants!
2. If your client is a US citizen or national, is your client in one of the exempt categories?

Exempt Categories

Now or ever on SSI	Minor Consent
Receiving Social Security Disability	On CalWORKS
Restricted Scope Pregnancy	Adoption Assistance
Foster Care Children	On Medicare
Abandoned babies born in U.S.	
Presumptive Eligibility for Pregnancy*	
Deemed Eligible Infants (until first redetermination)	
Accelerated Eligibility Programs for children (CHDP Gateway, school lunch program, children applying through Single Point of Entry*)	

*Note that individuals in these programs will have to provide DRA documentation to be Determined eligible for full scope benefits beyond the PE or AE period.

3. If your client is not exempt, has your client already provided proof of citizenship and identity in another county or state, or by applying for another program, such as CalWORKS? Remember this is a once in a lifetime requirement!
4. If your client is not exempt and was born in California, is there a vital records birth match? If yes, your client only has to provide proof of identity. (For children under 16, the parent's or guardian's signature on the application establishes identity.)
5. If there was not a vital records birth match, did your client give his correct birth name to DPSS? Does your client have a copy of his/her birth certificate? Suggest that your client give a copy of the birth certificate to the Medi-Cal worker. This will help DPSS to locate a California vital records birth match.
5. If your client is not exempt and was born outside of California, has your client completed a form allowing DPSS to request the client's birth record from another state?

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6. Is your client applying for Medi-Cal?
- a. Encourage your client to apply for benefits immediately even if the client does not have the necessary documents. This locks in the application date.
 - b. If your client needs more time to search for the documents, be sure that the client tells the Medi-Cal worker that the client is making a good faith effort to locate and produce the documents.
 - c. Advise your client to keep all correspondence sent to help locate the documents. The client should also keep a list of the people and telephone numbers of people she calls to help her locate the documents.
 - d. **Is your client pregnant?**
 1. Advise your client that she can get Presumptive Eligibility (PE) without providing the DRA documents. This will allow her to receive immediate pre-natal care PE can be extended by the provider as long as the woman completes a Medi-Cal application before the end of the month after she applies for PE. Remember that PE does not cover labor & delivery or anything unrelated to the pregnancy.
 2. If your client has applied for Medi-Cal but is unable to provide proof of citizenship and identity and you want to be sure that she has coverage for labor & delivery, advise her of her right to tell her worker that she is no longer able to make a good faith effort to produce the documents, but she wants to reserve her right to produce the documents later. This will allow your client to receive restricted scope Medi-Cal, which includes coverage for labor & delivery.
 3. If your client provides the necessary DRA documents within one year of her Medi-Cal application, be sure that full scope Medi-Cal benefits are reinstated back to the application date. You can assist the client to inform providers from whom she received non-emergency care that they can submit claims to Medi-Cal. The client should write a letter informing providers of her full scope eligibility and also enclose a copy of her



Medi-Cal card. The letter should remind the provider that the claim must be submitted within one year of the service date. She should be sure to keep a copy of this letter in case there is a problem in the future. If your client has paid for services that are now covered by her retroactive benefits, she can request reimbursement from the provider.

4. If you or the client need additional help in handling reimbursement issues, contact one of these agencies:

Maternal & Child Health Access (213) 749-4261
The Health Consumer Center (800) 896-3203

7. Is your client already on Medi-Cal?

- a. Help your client retain Medi-Cal benefits!! Remind your client to respond to Annual Eligibility Renewal requests and Mid-Year Status Reports (if applicable). It is more important than ever for your client to keep the Medi-Cal case active! If your client is rightfully terminated from Medi-Cal, she may not be able to receive full scope benefits until she produces the DRA required documents!
- b. Advise your client to maintain a good faith effort to search for and produce the necessary documents. As long as the client makes a good faith effort to produce the documents, she should not lose her Medi-Cal.
- c. The Medi-Cal worker must accept any reasonable good faith effort explanation. Advise your client to maintain records of all efforts made to locate and produce DRA documentation.

8. Does your client already have the required documents?

- a. If yes, discourage your client from sending original documents to DPSS in the mail.
- b. Give your client a list of the DPSS offices at which your client can turn in documents in person. There are special lobby teams at certain offices whose only job will be to review, copy and return the documents to your client. When your client does this, she should receive her original documents back at the same time, along with a receipt that she has complied with the DRA. She should keep this receipt in a safe place.
- c. If your client is not able to go to a DPSS office in person, ask if there is a relative or trusted friend who can turn in the documents for the client

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9. Is your client uncertain of his/her immigration or citizenship status?
 - a. Help your client by asking about place of birth, parents' citizenship, and various places that s/he spent childhood years. Not all clients know that they are U.S. citizens by virtue of their birth in the U.S. or that they may be able to claim derivative citizenship through a citizen parent. Also ask your client about previous travel experience. S/he may have forgotten about an expired passport.
 - b. If your client has lost his/her citizenship or naturalization certificate, assist your client in completing a form that allows DPSS to send an inquiry to the Department of Homeland Security to confirm the client's immigration status. This is called a SAVE inquiry.

10. Does your client have an emergency that requires immediate treatment or for which there is an outstanding bill?
 - a. If your client experiences an emergency medical need that would be covered under restricted scope Medi-Cal, advise your client of her right to tell her worker that she is unable to continue her good faith effort to locate the necessary documents. This will allow your client to receive restricted scope benefits to cover emergencies, including labor & delivery.
 - b. Then assist your client in submitting the required DRA documentation within one year of the date of her application to Medi-Cal. Once the client submits the documents, be sure that the client's Medi-Cal is retroactively changed to full scope. If there are outstanding bills that were not covered under restricted scope Medi-Cal, you can advise or assist the client in submitting the new full scope Medi-Cal information to the providers. If your client paid for services that would have been covered under full scope Medi-Cal, advise or assist the client to obtain reimbursement.



c. If you or the client need additional help in handling reimbursement issues, contact one of these agencies:

Maternal & Child Health Access	(213) 749-4261
The Health Consumer Center	(800) 896-3203

11. Has your client's Medi-Cal been denied, terminated or have her benefits been reduced from full scope to restricted scope because she failed to comply with requests for DRA documents?
- Make sure that your client was required to submit the documents. Review help tips above. If your client is a non-citizen immigrant, in an exempt category, or is otherwise not required to comply with the DRA, advise your client to call her Medi-Cal worker to explain that the client should not have been asked for the documents. If the worker does not agree, advise your client to request a state fair hearing AND to ask for aid paid pending if the client was already on benefits. (Aid paid pending does not apply to applicants.)
 - If your client was already on Medi-Cal, ask her if she told her worker that she was making a good faith attempt to locate and produce the documents. Advise the client that she needs to let her worker know that she is continuing to make a good faith effort and wants her full scope Medi-Cal re-activated. If the worker does not agree, advise your client to request a state fair hearing within 10 days of finding out that her benefits have been reduced to restricted scope AND be sure your client asks for aid paid pending. Aid paid pending will restore the full scope benefits until the hearing is over.
 - If your client already submitted the required documents and has a receipt from DPSS, advise her to call her worker and to tell the worker that the documents have been submitted. The client may need to show her receipt. If the worker does not agree, advise your client to request a state fair hearing AND to ask for aid paid pending if the client was already on benefits. (Aid paid pending does not apply to applicants.)
 - If your client did not get a notice but her full scope Medi-Cal benefits were reduced to restricted scope benefits because of DRA requirements, advise her to call her worker to let her worker know that the benefits were reduced without notice. If the worker does not agree to put the client back on full scope benefits and issue a proper notice, advise the client to appeal and request aid paid pending.

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- e.** If your client did receive a notice and will be appealing, the client should fill out the appeal form on the back of the notice and send the form to the address on the notice.
 - f.** The client can also call **1-800-952-5253** to ask for a hearing. If the client had her benefits reduced from full scope to restricted scope, be sure that your client asks for “aid paid pending” so that the client’s full scope Medi-Cal can continue while she is waiting for the hearing.
 - g.** If your client needs assistance for the state fair hearing, the client can call the **Health Consumer Center at (800) 896-3203.**
12. If you or your client need additional assistance or have DRA questions, you can call:

Maternal & Child Health Access	(213) 749-4261
The Health Consumer Center	(800) 896-3203

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