

IMMIGRATION AND MEDI-CAL ISSUES

PRUCOL

Some immigrants, even if they are not Legal Permanent Residents or U.S. citizens, may still be eligible for full scope Medi-Cal benefits under the Medi-Cal "PRUCOL" classification. PRUCOL stands for "Permanently Residing in the United States Under the Color of Law" and means that the U.S. Citizenship and Immigration Services (USCIS) (formerly known as the INS) knows that the immigrant is living in the U.S. and is not taking steps to deport him or her. PRUCOL is a Medi-Cal classification, not a type of immigration status. A person in the PRUCOL classification might be someone whose application to adjust his or her status has been submitted and received by USCIS and is pending review. USCIS knows that the person is here, but has not yet processed his or her application or issued a "green card." A few examples of PRUCOL eligible people include immigrants who have applied for or received Deferred Action for Childhood Arrivals (DACA), Temporary Protective Status (TPS) applicants for political asylum, people who have or applied for T or U visas, anyone applying for an adjustment of status.

In order for Medi-Cal to determine if a person meets the PRUCOL classification, that person should have a notice or letter from USCIS stating that his or her application has been received, or that there is some sort of USCIS paperwork in process. The applicant or beneficiary should have a copy of the USCIS notice available to give to the Medi-Cal worker upon request.

To receive full-scope benefits under the PRUCOL classification, the beneficiary or applicant, who is otherwise eligible for Medi-Cal, should inform the Medi-Cal worker that he or she qualifies under the PRUCOL classification and ask to be evaluated for full-scope Medi-Cal. There are no other conditions to being evaluated for the PRUCOL classification, such as having a certain medical condition or being in long-term care!

Once the request is made, Medi-Cal will send the applicant or beneficiary a form called the "Statement of Citizenship, Alienage and Immigration Status" or the MC 13. After the MC13 form is completed and sent back to the Medi-Cal worker, the Medi-Cal worker should change the applicant's or beneficiary's aid code to allow full-scope Medi-Cal benefits. There should be no delays by Medi-Cal to change the scope of benefits.

In some cases the Eligibility Worker will complete a SAVE (G-845) process, which will be sent to USCIS to verify whether or not the applicant/beneficiary is known to USCIS. If the applicant/beneficiary is not known to USCIS or they are pursing the expulsion of the applicant/beneficiary, then the level of benefits will be reduced back to restricted scope. If the

¹ For a list of immigration categories that may fall under the PRUCOL classification, see Title 22 California Code of Regulations Section 50301.3 or Medi-Cal form MC13 http://www.dhcs.ca.gov/formsandpubs/forms/Forms/mc13.pdf

applicant/beneficiary is in Long Term Care, on Renal Dialysis or in Foster Care they will be asked to fill out form MC845.

For further information, please refer to All County Welfare Directors Letter (ACWDL) 92-48 or DPSS Administrative Directive 5293, or call MCHA at (213) 749-4261 or Health Consumer Center at (800) 896-3203.

VISA ISSUES

Non-Immigrant Visa Holders (NIVHs) who meet Medi-Cal's income limits are eligible for Medi-Cal if they reside in California (they no longer are required to have the intention to remain permanently)*. NIVHs who are under age 26 or pregnant are eligible for full scope benefits. All others are eligible for restricted benefits. Those NIVHs with restricted Medi-Cal benefits may also apply for Covered CA with financial assistance.

Please note that even though a NIVH is eligible for Medi-Cal this does not guarantee that the person may not have problems with immigration authorities if he or she decides to leave and re-enter the country. For clarification on individual cases, contact CHIRLA at (888) 624-4752 or Health Consumer Center at (800) 896-3203.

ALL COUNTY WELFARE DIRECTORS LETTERS (ACWDL)

To access Medi-Cal's All County Welfare Directors Letters, go to http://www.dhcs.ca.gov/services/medi-cal/eligibility/Pages/ACWDLbyyear.aspx .

*After the implementation of the Affordable Care act California changed the Medi-Cal state residency requirement from 22 CCR 50320 to WIC 14007.15. This change reflects the Affordable Care Act's inclusion of Lawfully Present Individuals for Medi-Cal eligibility.

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