

MEDI-CAL STATISTICAL BRIEF

OCTOBER 2015

Medi-Cal's Non-Citizen Population

A Brief Overview of Eligibility, Coverage, Funding, and Enrollment

Abstract

In June 2014, nearly 2 million Medi-Cal eligibles were classified as non-citizens. Individuals classified as non-citizens represented 17.4% of Medi-Cal's total enrollment. Between June 2013 and July 2014, Medi-Cal's non-citizen population increased by over 31%, which mirrored Medi-Cal's citizen population growth of 35% during this time frame. This dramatic increase in enrollment was initiated by the implementation of the Patient Protection and Affordable Care Act on January 1, 2014.

Introduction

California is home to the largest foreign-born population in the U.S.¹ Like California's population, Medi-Cal's population is large and diverse. The program affords coverage to individuals with varying immigration statuses. A large percentage of individuals enrolled in Medi-Cal, California's Medicaid program, are non-citizens.² The term "non-citizen" is used throughout this statistical brief to refer to individuals who are not citizens or nationals of the U.S.³ Medi-Cal's non-citizen population consists of multiple subgroups that are, in some cases, afforded differing health care coverage. In addition, federal financial participation (FFP) may be available for emergency and pregnancy-related services only, while in other cases, FFP is available for full-scope coverage.⁴

For the purposes of this statistical brief, the Medi-Cal population has been divided into two distinct groups: citizens and non-citizens. To assist the reader in understanding this unique Medi-Cal population, RASD describes the taxonomy used for studying the non-

citizen population, provides an overview of eligibility requirements, describes the scope of services awarded, and identifies funding sources for various non-citizen subgroups eligible for Medi-Cal. Where appropriate, RASD compares and contrasts Medi-Cal's non-citizen population and the associated subgroups with Medi-Cal's citizen population on several dimensions.

Background

Among Medi-Cal's non-citizen population, there are a number of distinct subgroups. These subgroups are afforded varying degrees of health care coverage, and federal funding may only be available for specified services. For some non-citizen subgroups, federal funding is only available for emergency and/or pregnancy-related services,⁵ while for other non-citizen subgroups federal funding is available for all Title XIX specified services identified in California's Medicaid State Plan.⁶ In other cases, federal funding for full-scope State Plan benefits may only be available after a five-year waiting period.⁷

In terms of the discussion that follows, RASD will address health care coverage and financing from two vantage points: the federal perspective and the state's perspective (i.e., Medi-Cal). In terms of the federal

^a The term "alien" is used in federal law and refers to any person not a citizen or national of the United States (U.S. Code Section 1101 (a)(3)). The term "alien" is not used in this statistical brief. In place of the term "alien", the term "non-citizen" is used and has the same meaning as the federal definition of an "alien."

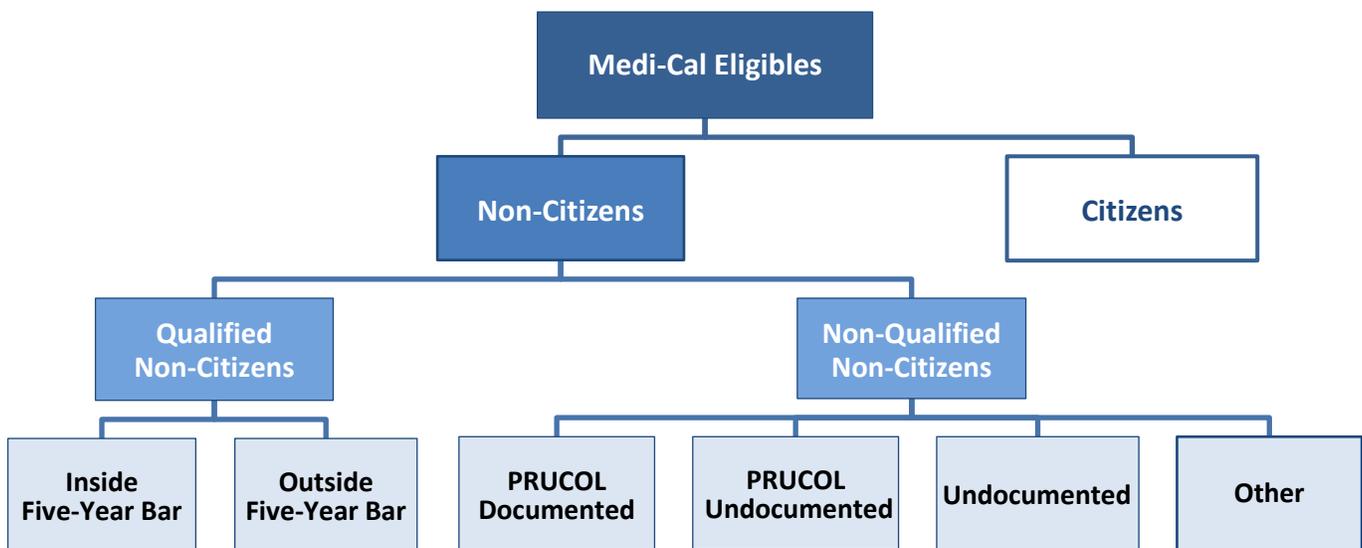
perspective, RASD identifies certain circumstances wherein federal law recognizes a benefit package that they will fund which differs from the state's defined benefit package. In those cases, the federal government may financially support or fund only a narrow benefit package, while the state finances the broader benefit package. For example, this would apply to those individuals classified as “permanently residing under color of law” (PRUCOL). Individuals classified as PRUCOL are entitled to full-scope State Plan Medi-Cal benefits; however, the federal government only finances those benefits or services classified as emergency and pregnancy-related. From the state's perspective in this case, the PRUCOL population is considered to be entitled to full-scope Medi-Cal coverage, while from the federal perspective, the PRUCOL population is considered to be entitled to limited-scope services. In terms of financing, the federal government finances based on the applicable

Federal Medical Assistance Percentage (FMAP), their share of the limited-scope services, while the state finances all other State Plan full-scope benefits. Throughout this statistical brief, RASD highlights these differences and identifies the benefits recognized by the federal and state governments for each group.

RASD divided Medi-Cal’s population into two groups, citizens and non-citizens, and subdivided non-citizens into six subgroups (Figure 1). These subgroups are:

1. Qualified Non-Citizens inside the Five-Year Bar,
2. Qualified Non-Citizens outside the Five-Year Bar,
3. Non-Qualified Non-Citizens PRUCOL classified as Documented,
4. Non-Qualified Non-Citizens PRUCOL classified as Undocumented,
5. Non-Qualified Non-Citizens classified as Undocumented,
6. Non-Qualified Non-Citizens classified as Other

Figure 1: Medi-Cal Non-Citizen Categories



Qualified Non-Citizens

In this statistical brief, a “qualified non-citizen” has the same meaning as defined in federal law as an individual who at the time the individual applies for, receives, or attempts to receive a federal public benefit:⁸

1. is lawfully admitted for permanent residence under the Immigration and Nationality Act; or
2. is granted asylum; or
3. is a refugee who is admitted to the U.S.; or
4. is paroled into the U.S. under specific conditions for a period of at least one year; or
5. whose deportation is being withheld pursuant to specific conditions; or
6. is granted conditional entry pursuant to specific conditions as in effect prior to April 1, 1980; or
7. is a Cuban or Haitian entrant; or
8. has been (or whose child or parent has been) battered or subjected to extreme cruelty in the U.S., or is granted or eligible for nonimmigrant status.

Additional provisions in federal law identify other specific groups who are also treated as qualified non-citizens and are entitled to federal Medicaid benefits.⁹ (See [Appendix A](#) for a list of federal classification authorities and eligibility statuses.)

In general, individuals classified as qualified non-citizens are entitled to full-scope health care services as defined in the Medi-Cal State Plan. However, some individuals classified as qualified non-citizens are ineligible for federally financed Medicaid benefits until they have been classified in a qualified status for at least five years.¹⁰ For qualified non-citizens not exempted from the five-year waiting period who have resided in the U.S. for less than five years, federal

financing is available for emergency and/or pregnancy-related services only, while all other services are financed by state funds.¹¹

In general, the five-year bar or waiting period represents the amount of time an individual must reside in the U.S. before being recognized by the federal government as being eligible for full-scope Medicaid services. For the purposes of the five-year bar, individuals classified as qualified non-citizens are categorized into two groups:

1. Those who have entered the U.S. on or after 08/22/96 and have resided in the U.S. for five years or more, and
2. Those who have entered the U.S. on or after 08/22/96 and have resided in the U.S. for less than five years.¹²

Individuals still subject to the waiting period are also frequently referred to as *newly qualified*.

Qualified Non-Citizens inside the Five-Year Bar:

Qualified non-citizens residing in the U.S. for less than five years, who are not exempt from the five-year threshold, are entitled to full-scope Medi-Cal services, with the federal government generally providing financing for emergency and/or pregnancy-related services only; all other services are financed by state general funds ([Table 1](#)).

Qualified Non-Citizens outside the Five-Year Bar:

Qualified non-citizens who have resided in the U.S. five or more years are entitled to full-scope Medi-Cal benefits. Health care services are financed in accordance with Medi-Cal’s applicable FMAP. The federal government finances all full-scope State Plan health care services based on Medi-Cal’s applicable FMAP.¹³

Non-Qualified Non-Citizens

Individuals classified as non-qualified non-citizens may or may not be entitled to full-scope State Plan Medi-Cal services.^{14,15}

Non-Qualified Non-Citizens PRUCOL classified as Documented or Undocumented:

Some non-qualified non-citizen populations receive full-scope Medi-Cal coverage. In California, specific non-citizens are eligible for state-funded full-scope Medi-Cal services even though they are not recognized under federal law as non-citizens having satisfactory immigration status (SIS). These individuals, referred to as PRUCOL, are recognized in California law and awarded state-funded full-scope Medi-Cal coverage.¹⁶ Federal law does not recognize individuals classified pursuant to PRUCOL as having SIS, and provides federal funding for emergency and pregnancy-related services only. Because the state awards individuals classified as PRUCOL full-scope Medi-Cal coverage, services not considered emergency and/or pregnancy-related must be financed fully by state funds.¹⁷ Individuals in the PRUCOL subgroup may be classified as either documented or undocumented.

The categories and documentation of status for PRUCOL non-citizens are reflected in the Department of Health Care Services (DHCS) Medi-Cal eligibility form MC-13 (Statement of Citizenship, Alienage, and Immigration Status).¹⁸ This form is used by counties

for documenting an applicant's immigration status.¹⁹ Undocumented non-citizens can claim PRUCOL status by showing that: (1) the Immigration and Naturalization Service (INS) knows he/she is in the U.S.; and (2) INS does not intend to deport him/her, either because of the person's status category or individual circumstances.^{20,21,22}

Non-Qualified Non-Citizens classified as Undocumented:

In general, individuals without SIS are entitled to emergency and pregnancy-related services only.^{23,24} The federal government finances its share of the limited-scope services, and Medi-Cal does not award services beyond emergency and/or pregnancy-related services.²⁵ This population is frequently referred to as Medi-Cal's "undocumented" population.

Non-Qualified Non-Citizens classified as Other:

Non-qualified non-citizens classified as "Other" (not synonymous with "unauthorized") includes lawfully present individuals such as students, tourists, and persons in temporary protected statuses.

Citizens

Included in this group are all Medi-Cal certified eligibles who have not been identified in one of the six non-citizen subgroups noted above, and are classified as citizens.

Table 1: Services and Funding for Medi-Cal's Non-Citizen Population

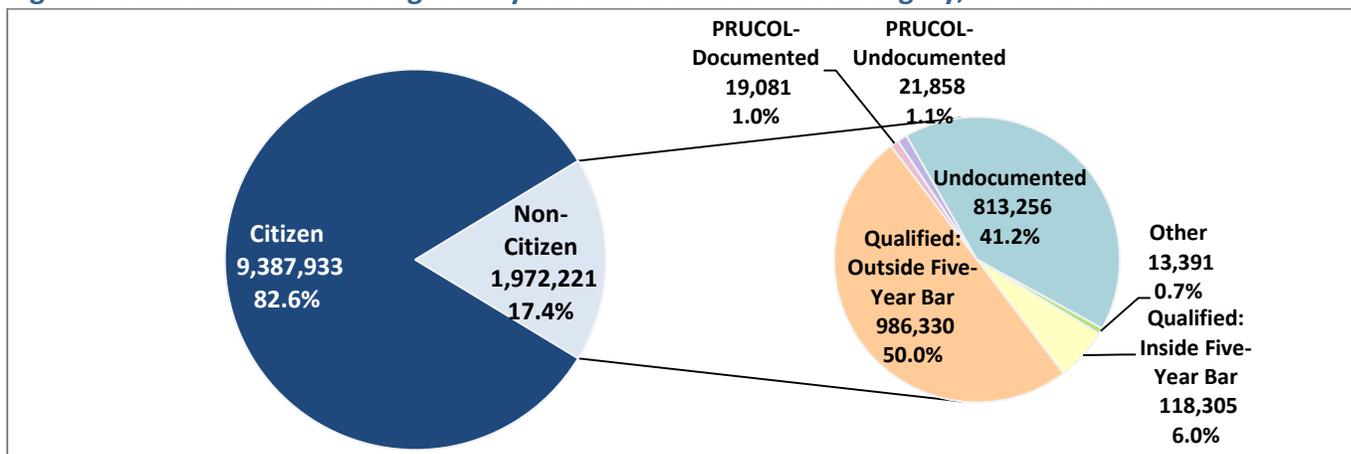
Non-Citizen Status	Qualified	Qualified	Non-Qualified	Non-Qualified	Non-Qualified	Non-Qualified
Non-Citizen Category	Inside the Five-Year Bar	Outside the Five-Year Bar	PRUCOL-Documented	PRUCOL-Undocumented	Undocumented	Other
Eligibility						
Restricted-Scope Services (Emergency/Pregnancy Only)	Yes	Yes	Yes	Yes	Yes	Yes
Full-Scope Services	Yes	Yes	Yes	Yes	No**	No
Funding						
Restricted-Scope Services (Emergency/Pregnancy Only)	Federal/State at state's applicable FMAP rate					
Full-Scope Services	State-funded*	Federal/State at state's applicable FMAP rate	State-funded*	State-funded	N/A**	N/A*

Source: Created by DHCS RASD. Note: Qualified and non-qualified lawfully residing non-citizen children and pregnant women are eligible for federally funded full-scope Medi-Cal (CA State Plan Amendment (SPA) [09-014](#)).²⁶

*Note: Pursuant to federal statute, states may elect to cover pregnant women and children and receive federal funds for full-scope Medi-Cal services. California has elected this option and receives federal funds for providing full-scope health care services to pregnant women and children within the five-year bar.

**Note: Pursuant to [Senate Bill \(SB\) 4](#), which amends §14007.8 of the Welfare and Institutions Code, full-scope Medi-Cal benefits will be extended to undocumented children ages 0-18 who are lacking SIS but are otherwise eligible for the program following DHCS system implementation, but no sooner than May 1, 2016. Benefits for this population, other than emergency and pregnancy-related services, are funded by the state.

Figure 2: Medi-Cal Certified Eligibles by Non-Citizen Status and Category, June 2014



Source: Prepared by RASD using MIS/DSS Data Warehouse data. Counts represent certified eligibles as of May 2015 based on June 2014 month-of-eligibility.

Medi-Cal's Non-Citizen Enrollment by Subgroup

In June 2014, 11,360,154 certified eligibles were enrolled in Medi-Cal. Among these certified eligibles, nearly 2 million, or 17.4%, were classified as non-citizens pursuant to one of the categories previously described. Half of the non-citizens enrolled in Medi-Cal were individuals classified as Qualified Non-Citizens who were present in the U.S. for five years or more (50.0%). Qualified Non-Citizens residing in the U.S. for less than five years represented only 6.0% of Medi-Cal's non-citizen population. The Undocumented subgroup represented the second-largest number of Medi-Cal non-citizens, accounting for over 800,000 eligibles (41.2%). Individuals classified as PRUCOL Undocumented and PRUCOL Documented represented 1.1% and 1.0%, respectively. Other Non-Citizens represented the remaining 0.7% of all non-citizen certified eligible enrollment ([Figure 2](#)).²⁷

Certified Enrollment Trends Among Medi-Cal's Non-Citizen Populations

RASD evaluated the trend in certified eligible enrollment over the period of July 2012 through June 2014. The trend in enrollment among Medi-Cal's overall non-citizen population was relatively flat over the period of July 2012 through December 2013, but changed dramatically after January 2014 ([Table 2](#) and [Table 3](#)).

The acceleration in growth during fiscal year (FY) 2013-14 coincided with the Patient Protection and Affordable Care Act (ACA) expansion commencing in January 2014. After ACA implementation, Medi-Cal's non-citizen population, like Medi-Cal's overall population, experienced a substantial positive enrollment trend. During the period of July 2013 through June 2014, growth rates varied among Medi-Cal's non-citizen subgroups. The two subgroups constituting roughly 91% of the overall non-citizen population – Undocumented Non-Citizens and Qualified Non-Citizens outside the Five-Year Bar – experienced some of the smallest percentage increases in enrollment. The Undocumented (non-PRUCOL) subgroup experienced the least growth, recording a 10% increase between June 2013 and July 2014, while Qualified Non-Citizens outside the Five-Year Bar grew by 48%. Combined, these two non-citizen subgroups grew by 29%, six percentage points less than Medi-Cal's citizen population growth over the same time frame.

Medi-Cal subgroups that accounted for the smallest proportions of Medi-Cal's non-citizen population experienced the greatest growth. Medi-Cal non-citizens classified as Other, which accounted for 0.7% of Medi-Cal's overall non-citizen population, grew by 257% between June 2013 and July 2014. Similarly, Medi-Cal's PRUCOL Documented subgroup (1.0% of non-citizen enrollment) grew by 128%. Qualified Non-Citizens inside the Five-Year Bar grew by 66% between June 2013 and July 2014, and the PRUCOL Undocumented subgroup grew by 36%.

Table 2: Enrollment Trends by Non-Citizen Status, FY 2012-13

Month of Eligibility	Qualified	Qualified	Non-Qualified	Non-Qualified	Non-Qualified	Non-Qualified	All Non-Citizen	Citizen
	Inside 5-Year Bar	Outside 5-Year Bar	PRUCOL-Doc.	PRUCOL-Undoc.	Undoc.	Other		
2012-07	73,251	675,632	8,709	14,045	764,426	3,483	1,539,546	6,086,408
2012-08	73,491	675,116	8,727	14,181	762,462	3,519	1,537,496	6,127,776
2012-09	73,298	675,754	8,646	14,263	755,909	3,511	1,531,381	6,119,220
2012-10	72,915	673,837	8,580	14,507	751,735	3,503	1,525,077	6,120,177
2012-11	71,763	671,918	8,543	14,633	747,183	3,490	1,517,530	6,115,146
2012-12	71,123	673,308	8,558	14,821	743,778	3,492	1,515,080	6,094,812
2013-01	71,043	662,728	8,320	15,017	745,428	3,545	1,506,081	6,358,884
2013-02	70,755	662,263	8,485	15,229	744,459	3,568	1,504,759	6,413,085
2013-03	70,720	664,890	8,480	15,464	749,436	3,624	1,512,614	6,552,068
2013-04	71,426	669,605	8,598	15,646	748,264	3,684	1,517,223	6,864,726
2013-05	71,243	667,781	8,452	15,741	746,216	3,701	1,513,134	6,934,258
2013-06	71,067	665,478	8,310	15,854	742,026	3,715	1,506,450	6,934,383
% Change July 2012-June 2013	-3%	-2%	-5%	13%	-3%	7%	-2%	14%

Source: Prepared by RASD using MIS/DSS Data Warehouse data. Counts represent certified eligibles as of May 2015 based on June 2014 month-of-eligibility.

Table 3: Enrollment Trends by Non-Citizen Status, FY 2013-14

Month of Eligibility	Qualified	Qualified	Non-Qualified	Non-Qualified	Non-Qualified	Non-Qualified	All Non-Citizen	Citizen
	Inside 5-Year Bar	Outside 5-Year Bar	PRUCOL-Doc.	PRUCOL-Undoc.	Undoc.	Other		
2013-07	71,337	665,676	8,354	16,026	738,317	3,756	1,503,466	6,965,522
2013-08	71,806	665,564	8,428	16,227	736,753	3,808	1,502,586	7,099,655
2013-09	71,674	662,156	8,372	16,335	732,102	3,817	1,494,456	7,109,440
2013-10	71,707	661,637	8,370	16,572	727,392	3,842	1,489,520	7,112,749
2013-11	71,450	661,325	8,495	16,724	725,297	3,880	1,487,171	7,134,773
2013-12	71,190	662,703	8,607	16,870	720,711	3,920	1,484,001	7,121,690
2014-01	86,823	816,449	13,745	17,596	731,838	7,278	1,673,729	8,234,028
2014-02	92,650	855,431	15,679	18,305	741,453	8,425	1,731,943	8,514,865
2014-03	106,775	923,534	19,100	19,286	763,434	10,973	1,843,102	8,938,996
2014-04	112,309	952,888	19,037	20,215	780,260	12,024	1,896,733	9,163,081
2014-05	115,360	969,986	18,455	21,052	794,538	12,775	1,932,166	9,288,087
2014-06	118,305	986,330	19,081	21,858	813,256	13,391	1,972,221	9,387,933
% Change July 2013-June 2014	66%	48%	128%	36%	10%	257%	31%	35%

Source: Prepared by RASD using MIS/DSS Data Warehouse data. Counts represent certified eligibles as of May 2015 based on June 2014 month-of-eligibility.

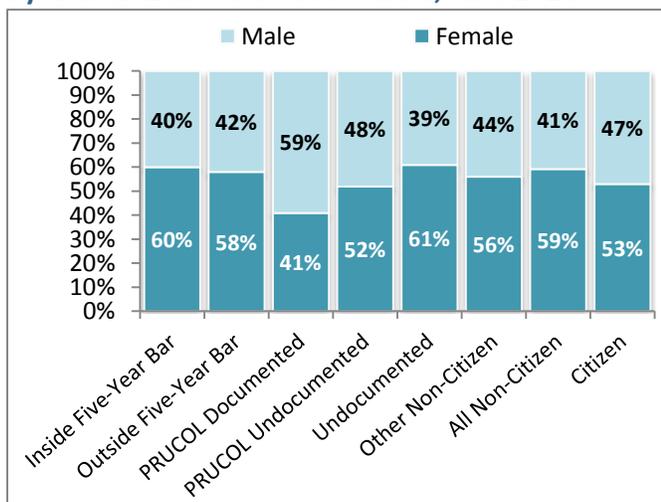
Medi-Cal Non-Citizen Population Profile

The following section compares and contrasts the demographic profiles of Medi-Cal’s overall non-citizen population, Medi-Cal’s overall citizen population, and Medi-Cal’s non-citizen subgroups.

Gender: Among Medi-Cal’s overall non-citizen population, the majority of certified eligibles were female (59%), while 41% were male. Similar distributions were seen among Medi-Cal’s non-citizen subgroups, with the exception of PRUCOL Documented and PRUCOL Undocumented eligibles. The PRUCOL Undocumented subgroup was nearly evenly split between males (48%) and females (52%). PRUCOL Documented eligibles displayed a greater proportion of males than females (59% vs. 41%) (Figure 3).

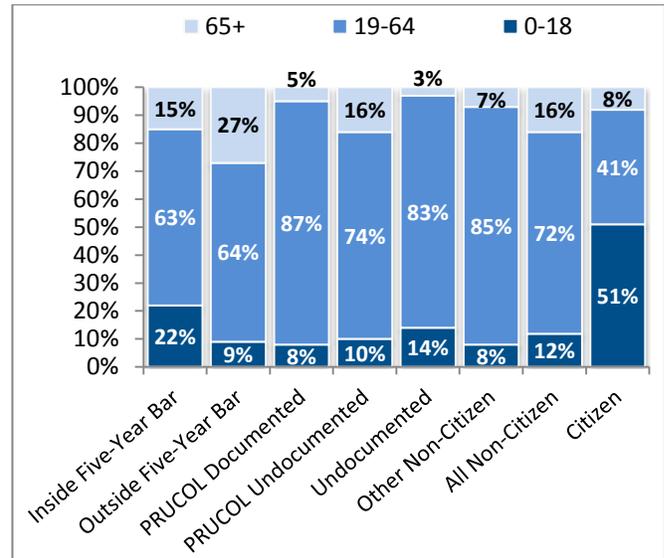
Medi-Cal’s overall non-citizen population displayed a slightly larger proportion of females than males when compared to Medi-Cal’s citizen population (59% vs. 53%, respectively). The proportion of female eligibles was greatest among Undocumented eligibles (female, 61%; male, 39%), and Qualified Non-Citizens inside the Five-Year Bar (female, 60%; male, 40%).

Figure 3: Distribution of Medi-Cal Certified Eligibles by Non-Citizen Status and Gender, June 2014



Source: Prepared by RASD using MIS/DSS Data Warehouse data. Counts represent certified eligibles as of May 2015 based on June 2014 month-of-eligibility.

Figure 4: Distribution of Medi-Cal Certified Eligibles by Non-Citizen Status and Age Group, June 2014



Source: Prepared by RASD using MIS/DSS Data Warehouse data. Counts represent certified eligibles as of May 2015 based on June 2014 month-of-eligibility.

Age: Close to three-quarters of Medi-Cal’s overall non-citizen population was between the ages of 19 and 64 (72%). The 19 to 64 age group was also dominant among non-citizen subgroups overall, ranging from 63% for Qualified Non-Citizens inside the Five-Year Bar, to 87% for the PRUCOL Documented subgroup. The proportion of eligibles in the children (0-18) age group was significantly smaller among non-citizen subpopulations overall. Qualified Non-Citizens inside the Five-Year Bar had the highest percentage of children (22%). Differences were noted in the elder age group (65+), which is a reflection of immigration policy.²⁸ Qualified Non-Citizens outside the Five-Year Bar had the highest percentage of adults ages 65 and older (27%) (Figure 4).

Among Medi-Cal’s citizen population, a far greater proportion of eligibles were between the ages of 0 and 18 (51%) than was seen in Medi-Cal’s overall non-citizen population (12%). Individuals between the ages of 19 and 64 accounted for 41% of Medi-Cal’s citizen population, while among Medi-Cal’s overall non-citizen

population, this age group constituted 72% of the overall population. Individuals ages 65 and older constituted 8% of Medi-Cal’s citizen population, while among Medi-Cal’s overall non-citizen population, this age group constituted 16%.

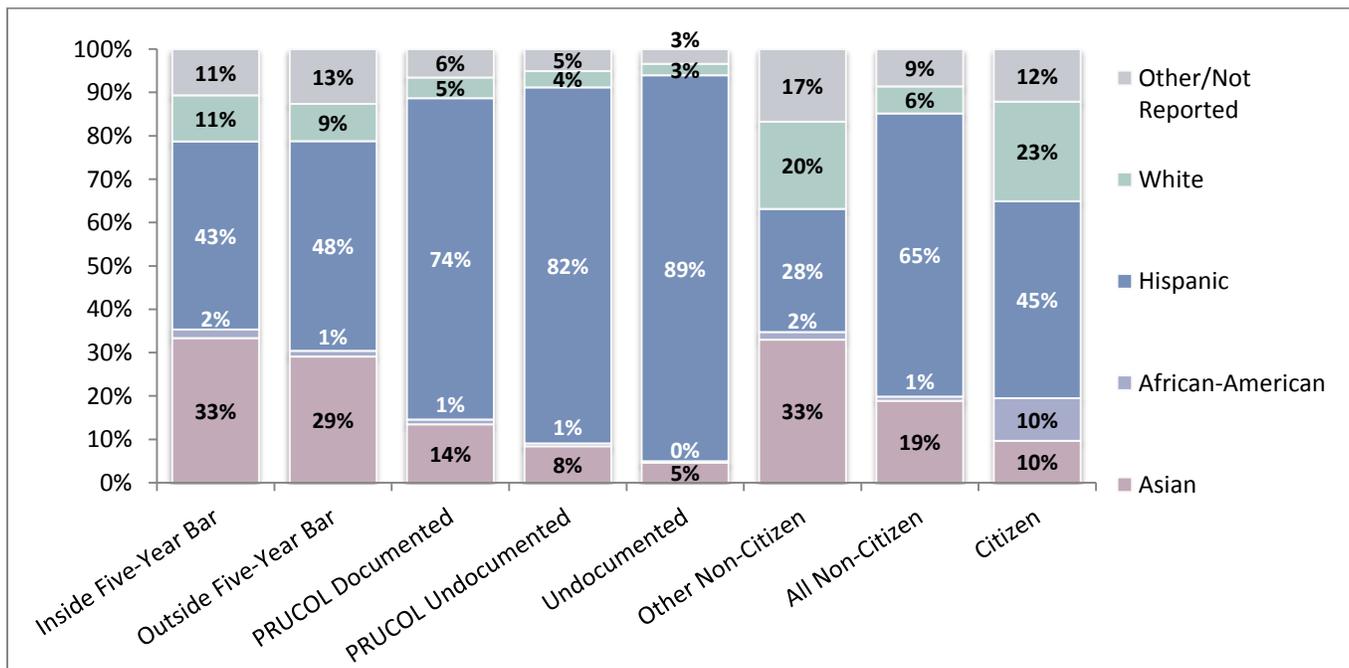
Race/Ethnicity: Roughly 65% of Medi-Cal’s overall non-citizen population was Hispanic. Distributions by racial/ethnic group varied widely among Medi-Cal’s non-citizen subgroups. The Other Non-Citizen subgroup had the smallest proportion of Hispanic eligibles (28%), followed by Qualified Non-Citizens inside (43%) and outside (48%) the Five-Year Bar. In contrast, between 74% and 89% of Medi-Cal’s PRUCOL and Undocumented subgroups were Hispanic. The significant share of Hispanic eligibles among these subpopulations is closely related to the frequency of migration from Latin America to the U.S. by unauthorized immigrants.²⁹ The Pew Research Center estimated that in 2012, Mexico was the country of

birth for 68% of all unauthorized immigrants in California.³⁰ Medi-Cal’s overall citizen population was 45% Hispanic ([Figure 5](#)).

The Asian race/ethnicity constituted the second-largest proportion of non-citizen eligibles, representing 19% of Medi-Cal’s overall non-citizen population. Asians constituted roughly one-third of the Qualified Non-Citizens and Other Non-Citizen subgroups, but only 5% to 14% of the Undocumented and PRUCOL subgroups. This difference was primarily driven by U.S. immigration policy, where it was found that roughly 40% of lawful permanent resident (LPR) flow by region emanates from Asia.³¹

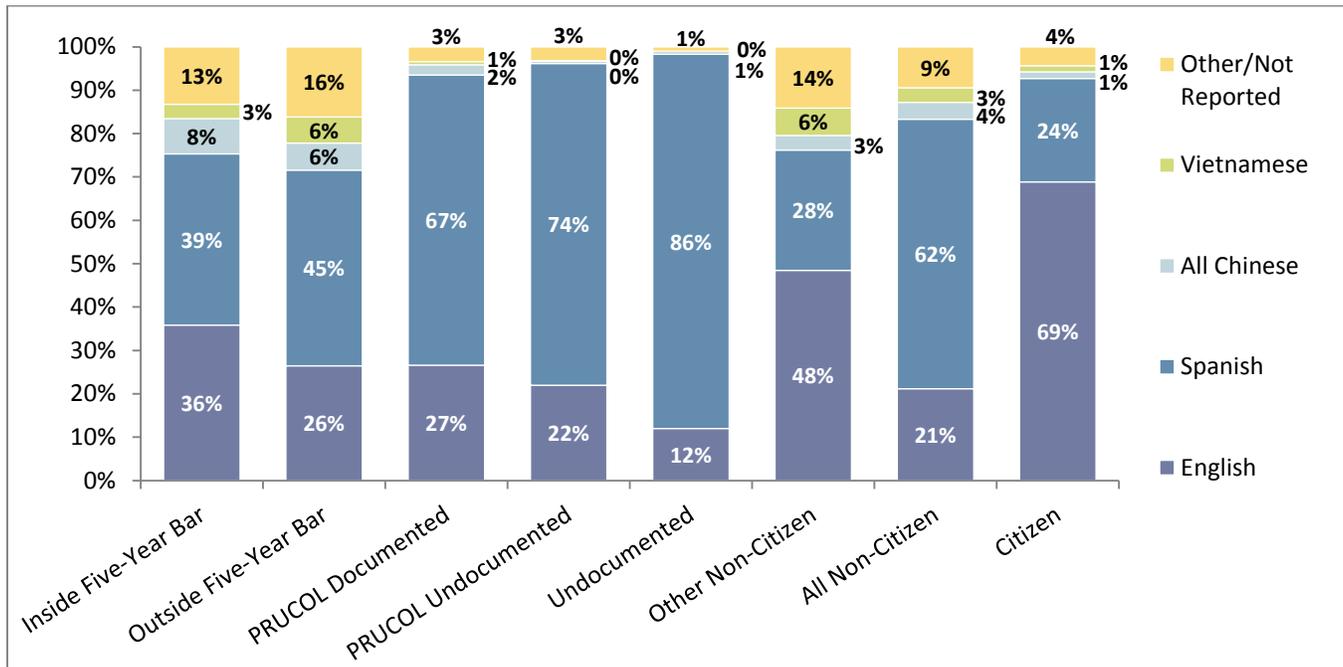
Whites (6%) and African-Americans (1%) represented the smallest proportions of Medi-Cal’s overall non-citizen population. In contrast, Whites constituted 23%, and African-Americans 10%, of Medi-Cal’s citizen population.

Figure 5: Distribution of Medi-Cal Certified Eligibles by Non-Citizen Status and Race/Ethnicity, June 2014



Source: Prepared by RASD using MIS/DSS Data Warehouse data. Counts represent certified eligibles as of May 2015 based on June 2014 month-of-eligibility.

Figure 6: Distribution of Medi-Cal Certified Eligibles by Non-Citizen Status and Primary Language, June 2014



Source: Prepared by RASD using MIS/DSS Data Warehouse data. Counts represent certified eligibles as of May 2015 based on June 2014 month-of-eligibility.

Language: Among Medi-Cal’s non-citizen subgroups, the most common primary language was Spanish. Overall, 62% of Medi-Cal’s non-citizen population claimed Spanish as their primary language, while only 24% of Medi-Cal’s citizen population claimed Spanish as their primary language (Figure 6).

Medi-Cal’s citizens had a significantly larger proportion of primary English speakers (69%) than Medi-Cal’s non-citizen population (21%). Some non-citizen subgroups, such as the Undocumented, were found to overwhelmingly speak languages other than English, with 88% claiming languages other than English.

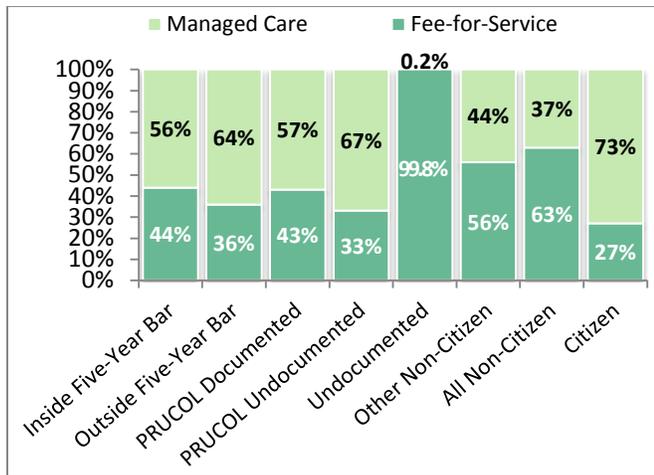
Delivery System: Health delivery system participation varied among Medi-Cal’s non-citizen subgroups. The majority (63%) of Medi-Cal’s overall non-citizen population participated in Medi-Cal’s traditional Fee-for-Service (FFS) system, while 37% participated in Medi-Cal’s managed care delivery

system. In contrast, among citizens, only 27% participated in Medi-Cal’s traditional FFS system while 73% participated in managed care (Figure 7).

Among Qualified Non-Citizens and PRUCOL subgroups, managed care participation was higher than FFS participation, with managed care enrollment ranging between 56% (Qualified inside Five-Year Bar) and 67% (PRUCOL Undocumented). Other Non-Citizens displayed a slight majority in FFS participation (56%) over managed care enrollment (44%).

A negligible percentage (0.2%) of the Undocumented subgroup was enrolled in managed care plans. Because (with few exceptions in select counties)³² the Undocumented population is currently not eligible for managed care participation, 99.8% of this population participated in FFS. As stated prior, this subgroup is generally entitled to receive only emergency and pregnancy-related Medi-Cal services.

Figure 7: Distribution of Medi-Cal Certified Eligibles by Non-Citizen Status and Delivery System, June 2014



Source: Prepared by RASD using MIS/DSS Data Warehouse data. Counts represent certified eligibles as of May 2015 based on June 2014 month-of-eligibility.

Geographic Region: The distribution of non-citizens also differed by geographic region within the state.³³ In general, regions with the largest overall Medi-Cal populations also had the greatest proportions of non-citizens within their respective regions. The region with the greatest overall Medi-Cal eligible population, Los Angeles, also had a Medi-Cal non-citizen

population which comprised over 20% of the eligibles in this region – with 9.7% classified as Undocumented. The Bay Area region had the second-largest proportion of non-citizens (7.2% Undocumented, 12.7% all other non-citizens). In addition, regions that had the smallest overall Medi-Cal eligible populations also displayed the smallest proportions of Medi-Cal non-citizens. The Far North region, in which roughly 80,000 Medi-Cal eligibles reside, had a Medi-Cal non-citizen population that constituted less than 3% of all Medi-Cal eligibles in this region. In nearly all California regions, the proportion of Undocumented eligibles was smaller, if only slightly, than all other non-citizens combined ([Table 4](#) and [Table 5](#)).

An outlier in these patterns is the Central Coast region. The Central Coast had the fourth-smallest number of Medi-Cal certified eligibles (just under 600,000); however, Medi-Cal’s non-citizen population represented nearly 19% of this region’s Medi-Cal eligibles, with the Undocumented subgroup accounting for 9.5% and all other non-citizens accounting for another 9.2% of this region’s overall Medi-Cal population.

Table 4: Number of Medi-Cal Certified Eligibles by California Geographic Region of Residence and Non-Citizen Status, June 2014

Region	Undocumented	All Other Non-Citizens	Citizen	Grand Total
Bay Area	116,794	204,784	1,291,406	1,612,984
Central Coast	56,992	54,773	486,631	598,396
Central Valley	117,831	159,284	1,385,018	1,662,133
Far North	708	1,504	77,959	80,171
Los Angeles	334,469	357,931	2,762,707	3,455,107
North Coast	3,213	3,575	107,527	114,315
Sacramento Valley	23,483	65,228	610,642	699,353
Sierra Range/Foothills	3,800	5,330	153,814	162,944
Southern California	155,966	306,556	2,512,229	2,974,751
Grand Total	813,256	1,158,965	9,387,933	11,360,154

Source: Prepared by RASD using MIS/DSS Data Warehouse data. Counts represent certified eligibles as of May 2015 based on June 2014 month-of-eligibility.

Table 5: Distribution of Medi-Cal Certified Eligibles by California Geographic Region of Residence and Non-Citizen Status, June 2014

Region	Undocumented	All Other Non-Citizens	Citizen	Grand Total
Bay Area	7.2%	12.7%	80.1%	100.0%
Central Coast	9.5%	9.2%	81.3%	100.0%
Central Valley	7.1%	9.6%	83.3%	100.0%
Far North	0.9%	1.9%	97.2%	100.0%
Los Angeles	9.7%	10.4%	80.0%	100.0%
North Coast	2.8%	3.1%	94.1%	100.0%
Sacramento Valley	3.4%	9.3%	87.3%	100.0%
Sierra Range/Foothills	2.3%	3.3%	94.4%	100.0%
Southern California	5.2%	10.3%	84.5%	100.0%
Grand Total	7.2%	10.2%	82.6%	100.0%

Source: Prepared by RASD using MIS/DSS Data Warehouse data. Counts represent certified eligibles as of May 2015 based on June 2014 month-of-eligibility.

Conclusion

Medi-Cal's non-citizen population is a unique group of individuals that can be separated into six subgroups based on immigration status and benefit coverage. Medi-Cal's non-citizen subgroups are influenced by U.S. immigration policy, and in many cases the demographic make-up is reflective of these policies. Like Medi-Cal's citizen population, Medi-Cal's non-citizen population experienced acceleration in enrollment after the implementation of the ACA in January 2014.

When comparing Medi-Cal's non-citizen population to Medi-Cal's citizen population, RASD found significant variation in population demographics. Medi-Cal's overall non-citizen population had a greater proportion of females than males (59% vs. 41%). Among Medi-Cal's citizen population, females represented 53% of the population and males constituted 47%. Females constituted 61% of the Undocumented subgroup.

Adults comprised 88% of Medi-Cal's non-citizen population, while children constituted only 12%. In contrast, Medi-Cal's citizen population revealed that adults constituted 49% of the population, and children represented 51%.

Overall, roughly two-thirds of Medi-Cal's non-citizen population was Hispanic, while another 19% were classified as Asian. Among Medi-Cal's citizens, less than half of the population was Hispanic. Medi-Cal's citizen population also displayed a far greater proportion of White and African-American eligibles than was seen among Medi-Cal's non-citizen population. Among non-citizen subgroups, PRUCOL and Undocumented subpopulations had the highest percentages of Hispanic eligibles (between 74% and 89%), while Qualified Non-Citizens and Other Non-Citizens had the highest percentages of Asian eligibles (constituting roughly one-third of these subpopulations).

Medi-Cal's non-citizen population had a far greater proportion of primary Spanish speakers than Medi-Cal's citizen population (62% vs. 24%). Conversely, the proportion of English speakers was significantly greater among Medi-Cal's citizens (69%) than Medi-Cal's non-citizen population (21%). Among Medi-Cal's overall non-citizen population, Spanish was the most commonly spoken primary language (62%), with the exception of the Other Non-Citizen subgroup which had a large proportion of English speakers (48%). Notably, 86% of eligibles in the Undocumented subgroup were primary Spanish speakers. When comparing Qualified Non-Citizens and the Undocumented subgroup, it was found that close to one-third of the Qualified Non-Citizens were English speakers, while only 12% of the Undocumented subgroup were English speakers. The Qualified Non-Citizen (i.e., inside and outside the five-year bar) and Other Non-Citizen subgroups revealed a broader mix of languages, with Chinese and Vietnamese languages more commonly spoken than among other non-citizen and citizen subgroups.

Finally, RASD found that Medi-Cal's non-citizen population was more likely to participate in Medi-Cal's traditional FFS delivery system than managed care (63% vs. 37%). This is primarily the result of the fact that undocumented individuals almost exclusively participated in Medi-Cal's traditional FFS system. In contrast, Medi-Cal's citizen population was more likely to participate in Medi-Cal's managed care delivery system than the traditional FFS system (73% vs. 27%). In general, the proportion of each Medi-Cal non-citizen subgroup's population participating in managed care was found to be lower than that of Medi-Cal's citizen population. Non-citizen subgroups that were afforded full-scope Medi-Cal coverage displayed Medi-Cal managed care participation rates of between 56% and 67%. Individuals classified as Undocumented were found to participate almost entirely in the FFS delivery system (99.8%).

More Information on the Medi-Cal Population

The DHCS RASD performed the analysis for this report. RASD compiles official statistics and performs analytical studies to assist DHCS in achieving its mission and goals. More information regarding Medi-Cal enrollment, program expenditures, and other relevant topics is available at the RASD [website](#).

Subscribe to the RASD Mailing List

Click [here](#) to receive email notifications when new statistical content is added to the RASD website. The RASD website is updated regularly with graphics, pivot tables and statistical briefs describing the Medi-Cal population, Medi-Cal enrollment trends, and other issues relevant to the Medi-Cal program and its stakeholders.

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PLEASE NOTE:

This document provides a brief summary of complex subjects and should be used only as an overview and general guide to the Medi-Cal program. The views expressed herein do not necessarily reflect the policies or legal positions of the California Health and Human Services Agency (CHHS) or the California Department of Health Care Services (DHCS). These summaries do not render any legal, accounting, or other professional advice, nor are they intended to explain fully all of the provisions or exclusions of the relevant laws, regulations, and rulings of the Medicare and Medicaid programs. Original sources of authority should be researched and utilized.

Appendix A: Federally Qualified Non-Citizens – Classification Authority and Eligibility Status

Federally Qualified Non-Citizens	
Classification Authority	Eligibility Status
Lawful Permanent Resident (LPR) [8 USC §1641(b)(1)]	<ul style="list-style-type: none"> * Ineligible for five years from entry date [8 USC §1613(a)] * Eligible at state option after five years [8 USC §1612(b)(1)] * Eligible if worked 40 qualifying quarters (10 years) [8 USC §1612(b)(2)(B)]
Asylee [8 USC §1641(b)(2)]	<ul style="list-style-type: none"> * Exempt from five-year ineligibility period [8 USC §1613(b)(1)(B)] * Eligible for seven years [8 USC §1612(b)(2)(A)(i)(II)] * Eligible at state option after seven years [8 USC §1612(b)(1)]
Refugee [8 USC §1641(b)(3)]	<ul style="list-style-type: none"> * Exempt from five-year ineligibility period [8 USC §1613(b)(1)(A)] * Eligible for seven years [8 USC §1612(b)(2)(A)(i)(I)] * Eligible at state option after seven years [8 USC §1612(b)(1)]
Parolee (at least 1 yr.) [8 USC §1641(b)(4)]	<ul style="list-style-type: none"> * Ineligible for five years from entry date [8 USC §1613(a)] * Eligible at state option after five years [8 USC §1612(b)(1)]
Deportation Withholdee [8 USC §1641(b)(5)]	<ul style="list-style-type: none"> * Exempt from five-year ineligibility period [8 USC §1613(b)(1)(C)] * Eligible for seven years [8 USC §1612(b)(2)(A)(i)(III)] * Eligible at state option after seven years [8 USC §1612(b)(1)]
Conditional entrée [8 USC §1641(b)(6)]	<ul style="list-style-type: none"> * Ineligible for five years from entry date [8 USC §1613(a)] * Eligible at state option after five years [8 USC §1612(b)(1)]
Batteree [8 USC §1641(c)(1)-(3)]	<ul style="list-style-type: none"> * Ineligible for five years from date of entry [8 USC §1613(a)] * Eligible at state option after five years [8 USC §1612(b)(1)]
Cuban/Haitian Entrée [8 USC §1641(b)(7)]	<ul style="list-style-type: none"> * Exempt from five-year ineligibility period [8 USC §1613(b)(1)(D)] * Eligible for seven years [8 USC §1612(b)(2)(A)(i)(IV)] * Eligible at state option after seven years [8 USC §1612(b)(1)]
Nonimmigrant Victim of Trafficking [8 USC §1641(c)(4)] (Victims of Trafficking and Violence Protection Act of 2000 [PL 106-386] Eligible same as Refugees [22 USC 7105(b)])	<ul style="list-style-type: none"> * Exempt from five-year ineligibility period [8 USC §1613(b)(1)(A)] * Eligible for seven years [8 USC §1612(b)(2)(A)(i)(I)] * Eligible at state option after seven years [8 USC §1612(b)(1)]
Amerasian Immigrant [8 USC §1101 note]	<ul style="list-style-type: none"> * Exempt from five-year ineligibility period [8 USC §1613(b)(1)(E)] * Eligible for seven years [8 USC §1612(b)(2)(A)(i)(V)] * Eligible at state option after seven years [8 USC §1612(b)(1)]
Veteran/Active-Duty Military [38 USC §101 et seq.]	<ul style="list-style-type: none"> * Exempt from five-year ineligibility period [8 USC §1613(b)(2)] * Eligible [8 USC §1612(b)(2)(C)]
American Indian Born in Canada [8 USC §1359]; or Member of an Indian Tribe [25 USC §450b(e)]	<ul style="list-style-type: none"> * Exempt from five-year ineligibility period [8 USC §1613(d)(1)] * Eligible [8 USC §1612(b)(2)(E)]

<p>SSI/SSP Recipients [42 USC §§1381 et seq. & 1382e(a)]</p>	<p>* Eligible [8 USC §1612(b)(2)(F)]</p>
<p>Afghani/Iraqi Special Immigrants [8 USC §1101(a)(27)] (Department of Defense Appropriations Act, 2010 [PL 111-118] Eligible same as Refugees)</p>	<p>* Exempt from five-year ineligibility period [8USC §1613 (b)(1)(A)]</p> <p>* Eligible for seven years [8 USC §1612(b)(2)(A)(i)(I)]</p> <p>* Eligible at state option after seven years 8 USC §1612(b)(1)]</p>
<p>Children/Pregnant Women [42 USC §1396b(v)(4)(A)] (Children’s Health Insurance Program Reauthorization Act of 2009 [PL 111-3])</p>	<p>* Exempt from five-year ineligibility period</p> <p>* Eligible at state option</p> <p>* Qualified and nonqualified lawfully residing noncitizens [CA Title XIX State Plan Amendment 09-014]</p>

End Notes

- ¹ Pew Research Center. (2014, May 14). *15 States with the Largest Share of Immigrants in their Population*. Retrieved from <http://www.pewresearch.org/fact-tank/2014/05/14/15-states-with-the-highest-share-of-immigrants-in-their-population/>
- ² U.S. Citizenship and Immigration Services, Glossary. Retrieved from <http://www.uscis.gov/e-verify/customer-support/glossary>
- ³ Cornell University Law School. (ND) *8 U.S. Code §1101 – Definitions*. Retrieved from http://www.law.cornell.edu/uscode/text/8/1101*
- *Note: For purposes of this brief, the term “non-citizen” has the same meaning as described in 8 USC 1101(a)(3).
- ⁴ U.S.HHS. (2009, February 25). *Summary of Immigrant Eligibility Restrictions Under Current Law*. Retrieved from <http://aspe.hhs.gov/hsp/immigration/restrictions-sum.shtml>
- ⁵ DHCS. (ND). R-15-98E, *Criteria for Emergency and Pregnancy-Related Services for Persons Entitled to Restricted Benefits Only*. Retrieved from http://www.dhcs.ca.gov/services/medi-cal/Documents/ManCriteria_06_EmergPreg.htm
- ⁶ California State Plan Under Title XIX of the Social Security Act. (Revised 2014, October 31). *Eligibility Conditions and Requirements*. Retrieved from <http://www.dhcs.ca.gov/formsandpubs/laws/Documents/Attachment%202.6-A.pdf>
- ⁷ Ibid.
- ⁸ Cornell University Law School. (ND) *8 U.S. Code §1641 – Definitions*. Retrieved from <https://www.law.cornell.edu/uscode/text/8/1641>
- ⁹ Note: These may include: victims of trafficking [22 USC [7105\(b\)](#)], members of a federally recognized Indian tribe [25 USC [450b\(e\)](#)] or American Indians born in Canada [8 USC [1359](#)]; [8 USC [1612\(b\)\(2\)\(E\)](#)], Amerasian immigrants [8 USC [1612\(b\)\(2\)\(A\)\(i\)\(V\)](#)], Iraqi and Afghan special immigrants [8 USC [§1101\(a\)\(27\)](#)], lawfully residing non-citizen; with a military connection (active duty military personnel, honorably discharged veterans, and their immediate family) [8 USC [1612\(b\)\(2\)\(C\)](#)], children and pregnant woman [42 USC [1396b\(v\)\(4\)\(A\)](#)], and supplemental security income recipients [8 USC [1612\(b\)\(2\)\(F\)](#)].
- ¹⁰ Cornell University Law School. *8 U.S. Code § 1613 - Five-year limited eligibility of qualified aliens for Federal means-tested public benefit*. Retrieved from <https://www.law.cornell.edu/uscode/text/8/1613>
- *Note: Federal law does provide exemptions from the five-year waiting period for some categories of qualified non-citizens.
- ¹¹ California Legislative Information, Welfare and Institutions Code, DIVISION 9. PUBLIC SOCIAL SERVICES, PART 3. AID AND MEDICAL ASSISTANCE, CHAPTER 7. BASIC HEALTH CARE, Article 1. General Provisions, §§ 14000-14042. Retrieved from <http://www.leginfo.ca.gov/cgi-bin/displaycode?section=wic&group=13001-14000&file=14000-14042>
- ¹² Op cit., U.S.HHS
- ¹³ Op cit., California State Plan
- *Note: The 08/22/96 date refers to the implementation of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA) [[P.L. 104–193](#)], which imposed greater restrictions on access to public benefits. Those who enter the U.S. on or after this date (with some exceptions) are subject to this law.
- ¹⁴ Op cit., U.S.HHS
- ¹⁵ Cornell University Law School. (ND) *42 CFR 435.406 - Citizenship and alienage*. Retrieved from <https://www.law.cornell.edu/cfr/text/42/435.406>
- ¹⁶ CA Code of Regulations (CCR), Title 22, Section 50301.3. Documentation of Status as an Alien Permanently Residing in the United States Under Color of Law (PRUCOL). Retrieved from

<https://govt.westlaw.com/calregs/Document/I81D56350D4B811DE8879F88E8B0DAAAE?viewType=FullText&originContext=documenttoc&transitionType=CategoryPageItem&contextData=%28sc.Default%29=>

¹⁷ Op cit., California Legislative Information, Welfare and Institutions Code

¹⁸ DHCS (MC 13 December 2009). Statement of Citizenship, Alienage, and Immigration Status. Retrieved from <http://www.dhcs.ca.gov/formsandpubs/forms/Forms/mc13.pdf>

¹⁹ Note: Subsequent to the implementation of the ACA, the DHCS Medi-Cal Eligibility Division issued guidance to the counties on instances where the MC-13 is not required of applicants. Medi-Cal applicants are no longer required to submit paper documentation substantiating their citizenship or immigration status to complete their application (for a more detailed discussion of this guidance see Medi-Cal Eligibility Division Information Letter No. [I 14-21](#)).

²⁰ DHCS. (2000, May 5). *All County Welfare Director's Letter (ACWDL) # 00-28*. Retrieved from <http://www.dhcs.ca.gov/services/medi-cal/eligibility/Documents/c00-28.pdf> *

*Note: See MEPM Section 50257. (2002, January 4). *Manual Letter #25624E-6*. Retrieved from <http://www.dhcs.ca.gov/services/medi-cal/eligibility/Documents/Article24-RefugeeMedicalAsstProgram.pdf>

²¹ DHCS. (2014, March 25). *Medi-Cal Eligibility Division Information Letter (MEDIL) I 14-21*. Retrieved from <http://www.dhcs.ca.gov/services/medi-cal/eligibility/Documents/MEDIL2014/MEDILI14-21.pdf>,

²² DHCS (2014, January 21). *MEDIL I 14-08*. Retrieved from <http://www.dhcs.ca.gov/services/medi-cal/eligibility/Documents/MEDIL2014/MEDILI14-08.pdf>

²³ Op cit., DHCS, R-15-98E. *

*Note: Included in emergency services are acute, ongoing, and maintenance renal dialysis services not related to an organ transplant procedure; and long-term care services. Pregnancy-related services include routine prenatal care, labor and delivery, and routine post-partum services for 60-days and family planning services.

²⁴ Op cit., California Legislative Information, Welfare and Institutions Code *

*Note: Emergency and pregnancy-related services are dually financed by federal and state funds. Emergency medical services are defined as an "medical condition manifesting itself by acute symptoms of sufficient severity, including severe pain, such that the absence of immediate medical attention could reasonably be expected to result in any of the following: placing the patient's health in serious jeopardy; serious impairment to bodily functions; serious dysfunction to any bodily organ or part."

²⁵ Op cit., California State Plan.

²⁶ CMS. (updated 2014, March 24). *Medicaid and CHIP Coverage of Lawfully Residing Children and Pregnant Women*. Retrieved from <http://www.medicare.gov/medicaid-chip-program-information/by-topics/outreach-and-enrollment/lawfully-residing.html>

²⁷ Note: Placement into citizen/non-citizen categories was based on primary aid code, alien indicator, and alien eligibility code as reported in the MIS/DSS data warehouse. Individuals whose primary aid code was a code specific for persons without SIS, were grouped into the Non-Qualified Undocumented category. The remaining eligibles were then grouped as citizen or into a specific non-citizen category based on their alien indicator and alien eligibility code. In cases where there was a conflict between the aid code and the alien indicator, the aid code was used to determine which category would be selected. For example, in the statistics reported for the month of June 2014, there were 99,566 individuals enrolled in an Undocumented aid code without evidence of citizenship status in their eligibility record; these were grouped as Undocumented. The other group with conflicting information numbered 40,081; these individuals were flagged as undocumented by their alien indicator values, but were enrolled in non-undocumented aid codes and are categorized as citizens in this report.

²⁸ E Gorospe. *Elderly Immigrants: Emerging Challenge for the U.S. Healthcare System*. The Internet Journal of Healthcare Administration. 2005 Volume 4 Number 1. Retrieved from <https://ispub.com/IJHCA/4/1/13504>

²⁹ Pew Research Center. (2014). *Unauthorized Immigrant Totals Rise in 7 States, Fall in 14*. Retrieved from http://www.pewhispanic.org/files/2014/11/2014-11-18_unauthorized-immigration.pdf

*Note: The Pew Research Center defines Unauthorized Immigrants as “all foreign-born non-citizens residing in the country who are not “legal immigrants.” Legal Immigrants are defined as, “people who have been granted legal permanent residence; those granted asylum; people admitted as refugees; and people admitted to the U.S. under a set of specific authorized temporary statuses for longer-term residence and work.”

³⁰ Ibid.

³¹ Monger Randall, Yankay, James. *U.S. Lawful Permanent Residents: 2013*. Office of Immigration Statistics, Homeland Security, May 2014. Retrieved from http://www.dhs.gov/sites/default/files/publications/ois_lpr_fr_2013.pdf

³² DHCS. (2015, May 1). *Medi-Cal Managed Care Plans Mandatory or Voluntary Enrollment by Medi-Cal Aid Codes*. Retrieved from <http://www.dhcs.ca.gov/services/Documents/AidCodeChart.pdf> *

*Note: Napa, Solano and Yolo counties mandatorily enroll undocumented eligibles into County Organized Health Systems (COHS) managed care plans.

³³ Note: RASD’s geographic regions are categorized as follows: (1) Bay Area region includes Alameda, Contra Costa, Marin, Napa, San Francisco, San Mateo, Santa Clara, Solano, and Sonoma counties; (2) Central Coast region includes Monterey, San Benito, San Luis Obispo, Santa Barbara, Santa Cruz, and Ventura counties; (3) Central Valley region includes Fresno, Kern, Kings, Madera, Merced, San Joaquin, Stanislaus, and Tulare counties; (4) Far North region includes: Modoc, Shasta, Siskiyou, and Trinity counties; (5) Los Angeles region includes Los Angeles county; (6) North Coast region includes Del Norte, Humboldt, Lake, and Mendocino counties; (7) Sacramento region includes Butte, Colusa, Glenn, Sacramento, Sutter, Tehama, Yolo, and Yuba counties; (8) Sierra Ridge/Foothills region includes Alpine, Amador, Calaveras, El Dorado, Inyo, Lassen, Mariposa, Mono, Nevada, Placer, Plumas, Sierra, and Tuolumne counties; (9) Southern California region includes Imperial, Orange, Riverside, San Bernardino, and San Diego counties.