



State of California—Health and Human Services Agency  
Department of Health Care Services



GAVIN NEWSOM  
GOVERNOR

November 30, 2021

TO: ALL COUNTY WELFARE DIRECTORS Letter No.: 21-33  
ALL COUNTY WELFARE ADMINISTRATIVE OFFICERS  
ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS  
ALL COUNTY HEALTH EXECUTIVES  
ALL COUNTY MENTAL HEALTH DIRECTORS  
ALL COUNTY MEDS LIAISONS

SUBJECT: COMPACT OF FREE ASSOCIATION MEDI-CAL ELIGIBILITY

On December 27, 2020, the federal Consolidated Appropriation Act was signed into law. The new law, (H.R. 133: Consolidated Appropriations Act, Division CC, Title II, § 208) provides that individuals from any of the member sovereign states of the Compact of Free Association (COFA) are considered Qualified Non-Citizens (QNC) who are exempt from the federal five-year bar on full scope Medi-Cal eligibility. COFA is applicable to citizens of the Federated States of Micronesia (Kosrae, Pohnpei, Chuuk and Yap), the Republic of the Marshall Islands, and the Republic of Palau who otherwise meet all eligibility criteria. Under the new law, individuals from any of the COFA states are eligible for federally funded full scope Medi-Cal retroactive to December 2020, regardless of age or pregnancy status, if they meet all Medi-Cal eligibility requirements.

Prior to signing of the new federal law, individuals from COFA states were considered to have a lawfully present immigration status, but were not considered QNC. Therefore, they were not eligible for federally funded full scope Medi-Cal, unless they were under 21 years of age or pregnant. California currently grants state funded full scope Medi-Cal coverage to all individuals through 25 years of age or under who are ineligible for federally funded full scope because of their immigration status. Prior to the passage of the new law, California granted individuals from COFA states restricted scope Medi-Cal, if they were over the age of 26 and not pregnant.

**Manual transition of current beneficiaries to full scope Medi-Cal in SAWS**

The counties shall complete a manual transition of current Medi-Cal beneficiaries, who have a COFA immigration status, from restricted scope to full scope Medi-Cal, through

the Statewide Automated Welfare Systems (SAWS). DHCS has provided the counties with a list of Medi-Cal beneficiaries from COFA states who are potentially eligible for federally funded full scope Medi-Cal. Those Medi-Cal beneficiaries, who have a COFA immigration status and are in restricted scope Medi-Cal, will be notified of the transition and no action is required on their part. Therefore, counties should not ask for additional verifications. If applicable, counties will receive a monthly list of the beneficiaries who have a COFA immigration status and require county action, which will be located in the DHCS Secure File Transfer Protocol (SFTP) folders, until all cases have been transitioned.

Counties will be notified by email that the list has been uploaded in the DHCS SFTP folders (not all counties will get a list because not all counties have COFA cases to transition). County Eligibility Workers (CEWs) shall manually grant full scope Medi-Cal, to otherwise eligible COFA migrants, by overriding eligibility results in their respective SAWS system for the current and prior months back to December 2020 so that MEDS reflects full scope eligibility. Full scope eligibility will continue for ongoing months, as long as the COFA beneficiary is eligible. CEWs will need to work directly with their individual SAWS system on how to manually override eligibility.

It is important to note, CEWs shall place a case note or set a task in the case, since they are manually transitioning Medi-Cal beneficiaries with a COFA immigration status to full scope Medi-Cal. Now that California Healthcare, Eligibility, Enrollment, and Retention System (CalHEERS) has been fully updated and functionality implemented, CEWs will need to refer back to the previously transitioned cases and run those cases through CalHEERS.

### **CalHEERS and the Statewide Automated Welfare Systems (SAWS)**

On September 13, 2021, Change Request (CR) 175841 updated CalHEERS to provide full scope Medi-Cal to individuals with a COFA immigration status as QNCs not subject to the five-year bar. This means that eligible individuals, who have a COFA immigration status, will receive full scope Medi-Cal, regardless of age or pregnancy status.

Until full scope COFA eligibility is automated in SAWS, Counties must manually update eligibility for current COFA beneficiaries who need to transition from restricted to full scope Medi-Cal. Counties must also ensure that full scope eligibility is granted to all new COFA applicants and that ongoing full scope eligibility is maintained, if otherwise eligible.

## **Verify Lawful Presence**

For those beneficiaries with a COFA immigration status who are manually transitioned from restricted scope to full scope Medi-Cal, the CEW shall send an Eligibility Determination Request (EDR) for the current and prior months, back to December 1, 2020, if otherwise eligible, and the CalHEERS Business Rules Engine (BRE) will update their immigration status and redetermine their eligibility for full scope Medi-Cal in CalHEERS. The county also has the option of running a SAVE verification as an “admin pass” to CalHEERS. Both of these options will allow CalHEERS to grant full scope Medi-Cal to an otherwise eligible individual who has a COFA immigration status.

## **Code of Admission (COA) Codes for individuals with a COFA immigration status**

Counties will generally receive Code of Admission (COA) codes as part of the SAVE response when the status is verified by the SAVE system. When a COA code is sent in the SAVE response, indicating an individual has a COFA immigration status, that is sufficient for verification of a COFA immigration status for Medi-Cal applicants and beneficiaries. Medi-Cal applicants and beneficiaries, who have a COFA immigration status, will typically have one of the following COA codes:

- CFA/FSM (Compact of Free Association/Federated States of Micronesia)
- CFA/MIS (Compact of Free Association/Republic of the Marshall Islands)
- PAL (Republic of Palau)

**A note on COA Code “PI”:** A SAVE response for an individual from any of the COFA states may return a COA code of “PI”, which identifies persons from the Pacific Trust Territories. Individuals with this COA code may or may not be from a COFA state. In these cases, counties must initiate additional SAVE verification steps to confirm whether or not the individual has a COFA immigration status. This may require that the county obtain additional information about the individual’s immigration status in order to perform what is commonly referred to as the “third step” SAVE verification process.

## **Immigration Documents For Individuals From COFA States**

The U.S. Citizenship and Immigration Services’ (USCIS) documents listed below represent the most common immigration documents provided to individuals from COFA states:

- **I-766, Employment Authorization Document (EAD)**

- COFA applicants may provide Employment Authorization Document (EAD) information as evidence of their immigration status. Individuals from COFA states will have an EAD Category Code of “A08” (Citizen of Micronesia, the Marshall Islands or Palau admitted as a nonimmigrant)
- **Unexpired Foreign Passport**
  - If an unexpired foreign passport was used to enter the United States, input the passport number, first and last name, date of birth, and passport country of issuance for SAVE verification.
  - If the unexpired foreign passport was issued in the United States but was not used to enter the United States, the individual will have an I-94. Use the following information for SAVE verification—I-94 number and/or passport number, first and last name, date of birth, and passport country of issuance for SAVE verification.
- **I-94**
  - If an I-94 was used to enter the United States (either the paper version or a Customs and Border Protection (CBP) printout), input the I-94 number, first and last name, and date of birth for SAVE verification.

### **Retroactive Medi-Cal**

Eligible beneficiaries who have a COFA immigration status and have received or were eligible for restricted scope Medi-Cal, must be granted full scope Medi-Cal retroactively back to December 1, 2020, for any month in which they were Medi-Cal eligible.

### **New Citizen/Alien Indicator Code**

A new Medi-Cal Eligibility Data Systems (MEDS) Citizen/Alien Indicator code “4” has been created to identify individuals from COFA states as QNCs not subject to the five-year bar, rather than, as lawfully present (not QNC). The MEDS Citizen/Alien Indicator code previously assigned to individuals from the COFA states was “2”, which defined them as “Lawfully present, not a qualified immigrant”. The new MEDS Citizen/Alien Indicator code value will identify otherwise eligible individuals from the COFA states as eligible for federally funded full scope Medi-Cal, regardless of their Grant/Entry date, age or pregnancy status. When the SAVE verification confirms an individual has a COFA immigration status, send a transaction to MEDS to update the Citizen/Alien Indicator code to a “4”. Counties must ensure that the “4” is maintained in MEDS for COFA beneficiaries.

## **Aid Codes**

There are no new aid codes for individuals who have a COFA immigration status. Individuals, who have a COFA immigration status and are otherwise eligible under this new law, will be placed into existing full scope MAGI and Non-MAGI Medi-Cal aid codes. For the transitioning of individuals with a COFA immigration status, DHCS has developed an aid code crosswalk that identifies the appropriate full scope aid code that eligible individuals, who have a COFA immigration status and are in restricted scope aid codes, will be moved into based on the new coverage. (see Attachment A – “Aid Code Crosswalk”)

If you have any questions or require additional information, please contact Ernesto Lopez by phone at (916) 345-8161 or via email at [Ernesto.Lopez4@dhcs.ca.gov](mailto:Ernesto.Lopez4@dhcs.ca.gov).

Original Signed By

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Health Care Benefits and Eligibility

Attachment A

<b>Aid Code Crosswalk for the Transition of, “Citizens of Micronesia, the Marshall Islands or Palau” from restricted to full scope Medi-Cal</b>			
<b>Restricted Scope Aid Code</b>	<b>Description</b>	<b>Full Scope Aid Code</b>	<b>Description</b>
<b>0U</b>	Breast and Cervical Cancer Treatment Program (BCCTP) for Undocumented Non-Citizens or individuals Age 65 or younger without SIS – At or below 200% FPL - Limited to breast and/or cervical cancer treatment, LTC, pregnancy-related and emergency services (No SOC)	<b>0P</b>	Breast and Cervical Cancer Treatment Program (BCCTP) - Age 65 or younger – At or below 200% FPL (No SOC)
<b>50</b>	County - Medical Services Program (CMSP) - Omnibus Budget Reconciliation Act (OBRA)/Out-of-County Care	<b>8F</b>	County - Medical Services Program (CMSP) /Out-of-County Care – Companion aid code for aid code 53
<b>1U</b>	Restricted – Aged – Covers the Aged in the Aged & Disabled (A&D) FPL Program without SIS (No SOC)	<b>1H</b>	Aged – Covers the Aged in the Aged & Disabled (A&D) FPL Program without SIS (No SOC)
<b>3T</b>	Transitional Medi-Cal (TMC) - Initial 6 Months for individuals without SIS - Discontinuance of 1931(b) (No SOC)	<b>39</b>	Transitional Medi-Cal (TMC) - Initial 6 Months - Discontinuance of 1931(b)(No SOC)
<b>5J</b>	SB 87 Pending Disability Program (No SOC)	<b>6J</b>	SB 87 Pending Disability Program - Age 21 up to 65 who have lost their non-disability linkage to M/C and are claiming disability (No SOC)

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<b>Restricted Scope Aid Code</b>	<b>Description</b>	<b>Full Scope Aid Code</b>	<b>Description</b>
<b>5R</b>	SB 87 Pending Disability Determination (SOC)	<b>6R</b>	SB 87 Pending Disability Determination – Age 21 up to 65 who have lost their non-disability linkage to M/C and are claiming disability (SOC)
<b>5T</b>	Continuing Transitional Medi-Cal (TMC) – Provides an additional 6 months for individuals without SIS who received 6 months of initial TMC coverage under aid code 3T (No SOC)	<b>59</b>	Continuing Transitional Medi-Cal (TMC) – Provides an additional 6 months of TMC for beneficiaries who had 6 months of initial TMC coverage under aid code 39 (No SOC)
<b>5W</b>	Four Month Continuing (FMC) – Pregnancy and Emergency Services Only (ESO) for individuals without SIS who are no longer eligible for Section 1931(b) (No SOC)	<b>54</b>	Four Month Continuing (FMC) – Covers individuals discontinued from CalWORKs or Section 1931(b) (No SOC)
<b>6U</b>	Restricted - Disabled – Covers the disabled in the Aged & Disabled (A&D) FPL Program without SIS (No SOC)	<b>6H</b>	Disabled – Covers the disabled in the Aged & Disabled (A&D) FPL Program (No SOC)
<b>C1</b>	OBRA Non-Citizens and Unverified Citizens or who do not have SIS – Aged 65 and over - Medically Needy (MN) (No SOC)	<b>14</b>	Aged - Medically Needy (MN) (No SOC)
<b>C2</b>	OBRA Non-Citizens and Unverified Citizens or who do not have SIS – Aged 65 and	<b>17</b>	Aged - Medically Needy (MN) (SOC)

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<b>Restricted Scope Aid Code</b>	<b>Description</b>	<b>Full Scope Aid Code</b>	<b>Description</b>
	over - Medically Needy (MN) (OC)		
<b>C3</b>	OBRA Non-Citizenz and Unverified Citizens or who do not have SIS - Blind - Medically Needy (MN) (No SOC)	<b>24</b>	Blind - Medically Needy (MN) (No SOC)
<b>C4</b>	OBRA Non-Citizens and Unverified Citizens or who do not have SIS - Blind - Medically Needy (MN) (SOC)	<b>27</b>	Blind - Medically Needy (MN) (SOC)
<b>C5</b>	OBRA Non-Citizens and Unverified Citizens or who do not have SIS - Aid to Families with Dependent Children (AFDC) - Medically Needy (MN) (No SOC)	<b>34</b>	Aid to Families with Dependent Children (AFDC) - Medically Needy (MN) (No SOC)
<b>C6</b>	OBRA Non-Citizens and Unverified Citizens or who do not have SIS - Aid to Families with Dependent Children (AFDC) - Medically Needy (MN) (SOC)	<b>37</b>	Aid to Families with Dependent Children (AFDC) - Medically Needy (MN) (SOC)
<b>C7</b>	OBRA Non-Citizens and Unverified Citizens or who do not have SIS - Disabled - Medically Needy (MN) (No SOC)	<b>64</b>	Disabled - Medically Needy (MN) (No SOC)
<b>C8</b>	OBRA Non-Citizens and Unverified Citizens or who do not have SIS - Disabled - Medically Needy (MN) (SOC)	<b>67</b>	Disabled - Medically Needy (MN) (SOC)



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<b>Restricted Scope Aid Code</b>	<b>Description</b>	<b>Full Scope Aid Code</b>	<b>Description</b>
<b>C9</b>	OBRA Non-Citizens and Unverified Citizens or who do not have SIS - Child age 21 or younger - Medically Indigent (MI) (No SOC)	<b>87</b>	Medically Indigent (MI) Child – Age 21 or younger – Covers individuals until the age of 22 who were in an institution for mental disease before age 21 (SOC)
<b>D1</b>	OBRA Non-Citizens and Unverified Citizens or who do not have SIS - Child age 21 or younger - Medically Indigent (MI) (SOC)	<b>83</b>	Medically Indigent (MI) Child – Age 21 or younger (SOC)
<b>D2</b>	OBRA Non-Citizens - Not PRUCOL and Unverified Citizens - Aged - Long Term Care (LTC) - (No SOC)	<b>13</b>	Aged - Long Term Care (LTC) (SOC/No SOC)
<b>D3</b>	OBRA Non-Citizens - Not PRUCOL and Unverified Citizens - Aged - Long Term Care (LTC) – (SOC)	<b>13</b>	Aged - Long Term Care (LTC) (SOC/No SOC)
<b>D4</b>	OBRA Non-Citizens - Not PRUCOL and Unverified Citizens - Blind - Long Term Care (LTC) - (No SOC)	<b>23</b>	Blind - Long Term Care (LTC) (SOC/No SOC)
<b>D5</b>	OBRA Non-Citizens - Not PRUCOL and Unverified Citizens - Blind - Long Term Care (LTC) - (SOC)	<b>23</b>	Blind - Long Term Care (LTC) (SOC/No SOC)
<b>D6</b>	OBRA Non-Citizens – Not PRUCOL and Unverified Citizens - Disabled - Long Term Care (LTC) (No SOC)	<b>63</b>	Disabled - Long Term Care (LTC) (SOC/No SOC)

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<b>Restricted Scope Aid Code</b>	<b>Description</b>	<b>Full Scope Aid Code</b>	<b>Description</b>
<b>D7</b>	OBRA Non-Citizens – Not PRUCOL and Unverified Citizens - Disabled - Long Term Care (LTC) (SOC)	<b>63</b>	Disabled - Long Term Care (LTC) (SOC/No SOC)
<b>D8</b>	OBRA Unverified Pregnant Women - Medically Indigent (MI) Confirmed Pregnancy – Age 21 or older without SIS who meet the eligibility requirements of MI (No SOC)	<b>86</b>	Medically Indigent (MI) Confirmed Pregnancy - Age 21 or older who meet the eligibility requirements of MI (No SOC)
<b>D9</b>	OBRA Unverified Pregnant Women - Medically Indigent (MI) Confirmed Pregnancy - Age 21 or older without SIS who meet the eligibility requirements of MI but are not eligible for 185%/200% or the Medically Needy (MN) programs (SOC)	<b>87</b>	Medically Indigent (MI) Confirmed Pregnancy - Age 21 or older who meet the eligibility requirements of MI but are not eligible for 185%/200% or the Medically Needy (MN) programs (SOC)
<b>F2</b>	Inmate – Adult State Inmate Program (ASIP) – Undocumented Non-Citizen - Limited to covered inpatient hospital and inpatient pregnancy-related services only (No SOC)	<b>F1</b>	Inmate – Adult State Inmate Program (ASIP) – Limited to covered inpatient hospital and inpatient pregnancy-related services only (No SOC)
<b>F4</b>	Inmate - Adult County Inmate Program (ACIP) – Undocumented Non-Citizen - Limited to covered inpatient hospital emergency, inpatient mental health emergency, an	<b>F3</b>	Inmate – Adult County Inmate Program (ACIP) – Limited to covered inpatient hospital and inpatient mental health services only (No SOC)

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<b>Restricted Scope Aid Code</b>	<b>Description</b>	<b>Full Scope Aid Code</b>	<b>Description</b>
	inpatient pregnancy-related services only (No SOC)		
<b>G4</b>	Inmate - Adult County Inmate Program (ACIP) – Individuals without SIS - Limited to covered inpatient hospital emergency, inpatient mental health emergency, an inpatient pregnancy-related services only (SOC)	<b>G3</b>	Inmate – Adult County Inmate Program (ACIP) – Limited to covered inpatient hospital and inpatient mental health services only (SOC)
<b>G9</b>	Inmate - State Medical Parole Program (MPP) – Individual without SIS – Limited to covered emergency and pregnancy-related services only (No SOC)	<b>G0</b>	Inmate - State Medical Parole Program (MPP) - Entitled to all M/C covered services because they are not considered to be incarcerated (No SOC)
<b>J3</b>	Inmate - County Compassionate Release/Medical Probation (CCRP/CMPP) – Undocumented Non-Citizen or individual without SIS – Limited to all M/C covered emergency, mental health emergency, and pregnancy-related services only (No SOC)	<b>J1</b>	Inmate - County Compassionate Release/Medical Probation (CCRPCMPP) – Entitled to all M/C covered services because they are not considered to be incarcerated (No SOC)
<b>J4</b>	Inmate - County Compassionate Release/Medical Probation (CCRP/CMPP) --	<b>J2</b>	Inmate - County Compassionate Release/Medical Probation (CCRP/CMPP) - Entitled to all

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<b>Restricted Scope Aid Code</b>	<b>Description</b>	<b>Full Scope Aid Code</b>	<b>Description</b>
	Undocumented Non-Citizen or individual without SIS – Limited to all M/C covered emergency, mental health emergency, and pregnancy-related services only (SOC)		M/C covered services because they are not considered to be incarcerated (SOC)
<b>J6</b>	Inmate – County Compassionate Release/Medical Probation County Inmates who reside in LTC facilities– Without SIS – Medi-Cal benefits limited to Medi-Cal covered emergency, mental health emergency (Title XIX), and pregnancy-related (Title XXI) services only. Covers all Medi-Cal covered LTC services. (No SOC/SOC)	<b>J5</b>	Inmate – County Compassionate Release/Medical Probation County Inmates who reside in LTC facilities – Title XIX, entitled to all Medi-Cal covered LTC services because they are not considered to be incarcerated. (No SOC/SOC)
<b>J8</b>	Inmate - County Compassionate Release/Medical Probation (CCRP/CMPP) - LTC - Disabled Undocumented Non-Citizen who resides in a LTC facility – Limited to all emergency, mental health emergency and pregnancy-related services. Covers all M/C covered LTC services (SOC/No SOC)	<b>J7</b>	Inmate - County Compassionate Release/Medical Probation (CCRP/CMPP) - LTC - Disabled (not on SSI) who resides in a LTC facility – Entitled to all M/C covered LTC services because they are not considered to be incarcerated (SOC/No SOC)

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<b>Restricted Scope Aid Code</b>	<b>Description</b>	<b>Full Scope Aid Code</b>	<b>Description</b>
<b>K3</b>	Inmate – State Medical Parole Program (MPP) - Newly eligible Undocumented Non-Citizen age 19 up to 65 – with (MAGI) income 0% to 138% FPL, including disabled/blind with income 128% to 138% FPL – Limited to all M/C covered emergency, mental health emergency, and pregnancy-related services (No SOC)	<b>K2</b>	Inmate - State Medical Parole Program (MPP) – Newly eligible, Citizen/with SIS age 19 up to 65 – with (MAGI) income 0% to 138% FPL, including disabled/blind individuals with income 128% to 138% FPL – Covers all M/C covered services, including mental health services (No SOC)
<b>K5</b>	Inmate – State Medical Parole Program (MPP) – Not newly eligible Undocumented Non-Citizen age 19 up to 65, including disabled/blind (MAGI) 0% to 128% FPL – Limited to all covered emergency, mental health emergency, and pregnancy-related services (No SOC)	<b>K4</b>	Inmate - State Medical Parole Program (MPP) – Newly eligible, Citizen/with SIS age 19 up to – with (MAGI) income 0% to 138% FPL, including disabled/blind individuals with income 128% to 138% FPL – Covers all M/C covered services, including mental health services (No SOC)
<b>K7</b>	Inmate – County Compassionate Release/Medical Probation (CCRP/CMPP) – Newly eligible Undocumented Non-Citizen age 19 up to 65, including disabled/blind - (MAGI) 0% to 138% FPL - Limited to all M/C covered emergency, including	<b>K6</b>	Inmate – County Compassionate Release/Medical Probation (CCRP/CMPP) – Newly eligible Citizen/with SIS age 19 up to 65, including disabled/blind through (MAGI) 0% to 138% FPL – Covers all M/C covered services,

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	labor/delivery and mental health, and all pregnancy-related services only (No SOC)		including mental health services (No SOC)
<b>K9</b>	Inmate – County Compassionate Release/Medical Probation (CCRP/CMPP) – Not newly eligible Undocumented Non-Citizen age 19 up to 65, including disabled/blind (not on SSI) - (MAGI) 0% to 128% FPL - Limited to all M/C covered emergency, including mental health, and all pregnancy-related services (No SOC)	<b>K8</b>	Inmate – County Compassionate Release/Medical Probation (CCRP/CMPP) – Not newly eligible Citizen/with SIS age 19 up to 65, including disabled/blind (not on SSI) - (MAGI) 0% to 128% FPL – Covers all M/C covered services, including mental health services (No SOC)
<b>L7</b>	ACA – Undocumented Non-Citizen Disabled/Blind Adults - Age 19 up to 65 - (MAGI) at or below 128% FPL (No SOC)	<b>L6</b>	ACA – Citizen/lawfully present Disabled/Blind Adults - Age 19 up to 65- (MAGI) at or below 128% FPL (No SOC)
<b>M0</b>	Pregnant Undocumented Non-Citizen women - (MAGI) 139% up to and including 213% FPL – Limited to family planning, pregnancy-related, postpartum and emergency services (No SOC)	<b>M9</b>	Pregnant Citizen/lawfully present woman - (MAGI) 139% up to and including 213% FPL – Limited to family planning pregnancy- related, postpartum and emergency services (No SOC)
<b>M2</b>	Adults – Undocumented Non-Citizen Age 19 up to 65 - (MAGI) at or below 138% FPL – Provides pregnancy-related	<b>M1</b>	Adults - Age 19 up to 65 - (MAGI) at or below 138% FPL (No SOC)

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	services, including services for conditions that may complicate the pregnancy, postpartum services, emergency services and LTC services (No SOC)		
<b>M4</b>	Parents and Caretaker Relative – Undocumented Non-Citizen -(MAGI) At or below 109% FPL (No SOC)	<b>M3</b>	Parents and Caretaker Relative – Citizens/lawfully present - (MAGI) at or below 109% FPL (No SOC)
<b>M8</b>	Pregnant Undocumented Non-Citizen Women - (MAGI) Up to and including 138% FPL (No SOC)	<b>M7</b>	Pregnant Citizen/lawfully present Women - (MAGI) up to and including 138% FPL (No SOC)
<b>N6</b>	Inmate – Adult State Inmate Program (ASIP) – Undocumented Non-Citizen Age 19 up to 65 - (MAGI) 0% to 138% FPL – Limited to inpatient hospital emergency services only (No SOC)	<b>N5</b>	Inmate – Adult State Inmate Program (ASIP) – Age 19 up to 65 - (MAGI) 0% to 138% FPL (No SOC)
<b>N8</b>	Inmate – Adult County Inmate Program (ACIP) – Undocumented Non-Citizen Age 19 up to 65 - (MAGI) 0% to 138% FPL – Limited to inpatient hospital emergency, inpatient mental health emergency, and inpatient pregnancy-related services only (No SOC)	<b>N7</b>	Inmate - Adult County Inmate Program (ACIP) - Age 19 up to 65 - (MAGI) 0% to 138% FPL – Limited to all covered inpatient hospital and inpatient mental health services only (No SOC)