

## DEPARTMENT OF HEALTH SERVICES

714/744 P STREET  
P.O. BOX 942732  
SACRAMENTO, CA 94234-7320



November 5, 1991

Letter No.: 91-99

TO: All County Welfare Directors  
All County Administrative Officers  
All County Medi-Cal Program Specialists/Liaisons

SUBJECT: AID CODE 55 - LTC/RESTRICTED FOR UNDOCUMENTED ALIENS WHO ARE NOT  
PRUCOL

This is to inform you that Aid Code 55 will be implemented for the October month of eligibility. This letter will replace the Electronic Mail Message, EMC 2 DHS # 91144, sent to you on 8-30-91. Please note the two additional clarifications to the E-Mail in this letter.

## CLARIFICATION #1:

Please reduce the full benefits of any undocumented alien in Long Term Care (LTC) who is not Permanently Residing Under Color of Law (PRUCOL) as determined by the Immigration and Naturalization Service (INS) through the PRUCOL seeking procedures set forth in All County Welfare Directors Letter (ACWDL) 89-84 beginning 10-1-91. Aid Code 55 will entitle the beneficiary to receive all LTC services (state-only expense) and restricted benefits (emergency and pregnancy-related services - state and federal expense).

As instructed, you would have been tracking these cases since the implementation of OBRA/IRCA in October of 1988. For policy information on this subject, please refer to ACWDLs 88-66 and 89-84.

## CLARIFICATION #2:

Please remember, only undocumented aliens in LTC who have gone through the special PRUCOL-seeking procedures (MC 845) and are determined not to have PRUCOL status by the INS are the only Medi-Cal applicants/beneficiaries who can be placed in Aid Code 55. These applicants/beneficiaries will remain in Aid Code 55 even if they leave LTC.

A new Notice of Action (Form MC 239L) has been developed to notify applicants/beneficiaries of this reduction and is currently available through the Department of Health Services Warehouse. The regulations sections to cite at the bottom of the notice are 50301 and 50301.3.

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If you have any questions, please contact Linda Hayes of my staff at  
(916) 657-0145, ATSS 437-0145. Thank you for your cooperation.

Sincerely,

ORIGINAL SIGNED BY

Frank S. Martucci, Chief  
Medi-Cal Eligibility Branch