

# Policy Brief

## Full Medi-Cal Coverage for Older Adults Regardless of Immigration Status



### Older Adult Expansion

#### What is “Older Adult Expansion”?

Assembly Bill 133 removes immigration status as a barrier to full-scope Medi-Cal eligibility for Californians ages 50 and over. Most income-eligible adults ages 50 and older will be eligible for comprehensive Medi-Cal health insurance coverage, regardless of immigration status, making California’s health system more equitable and universal for everyone.<sup>1</sup>

#### How to Apply



Apply online at [mybenefitscalwin.org](https://mybenefitscalwin.org) or [www.coveredca.com](https://www.coveredca.com).

Call **510-272-3663** to apply by phone or request a mail-in application.

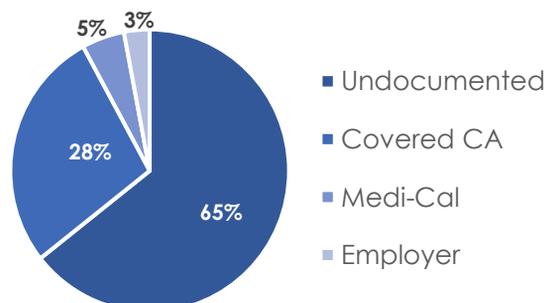
Visit an Alameda County Social Services office to apply in person.

**As of May 1, 2022, immigration status is no longer a barrier to full coverage healthcare through Medi-Cal for older adults.**

#### New Benefits for Undocumented Older Adults

1.7 million people in California are undocumented, and 65% are uninsured, including nearly 30,000 older adults.<sup>6</sup> Uninsured and undocumented older adults, with no regular healthcare, have turned to restricted Medi-Cal in cases of emergency. The expansion provides them with access to full Medi-Cal coverage, giving them access to preventative care and disease management programs. They also benefit from the In-Home Supportive Services (IHSS) program, which funds caregivers, allowing older adults to remain in their homes.<sup>2</sup>

#### UNINSURED CALIFORNIANS BY ELIGIBILITY



Source: UC Berkeley Labor Center, UCLA Center for Health Policy Research<sup>6</sup>

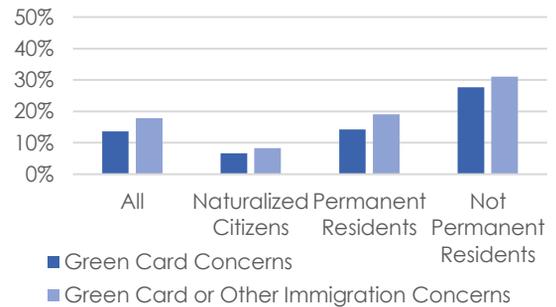
## Full Medi-Cal Coverage for Seniors Regardless of Immigration Status

### Alameda County Effects and Outreach

**Financial:** The budget estimates state costs of \$320 million for the expansion, which will benefit 27,000 individuals. The new policy has implications for local finances: county-based programs, together with community clinics and emergency rooms, had provided essential medical services for undocumented, uninsured older adults, who would otherwise have no access to healthcare. As these older adults are now eligible for full-scope Medi-Cal, the state will finance their care instead of the county, where applicable. This shift frees up funding that can be invested in other health-related county responsibilities, such as disaster preparedness, prevention activities, and substance use disorder treatment.<sup>2</sup>

**Building Community Trust:** The “public charge” rule, by which immigrants’ applications for entry and permanent residency were affected by their use of public benefits, was expanded under the Trump administration to include Medicaid. This policy was reversed; health, food, and housing services are not part of the public charge determination. However, many noncitizens are still fearful that enrolling themselves or their children in assistance programs could affect their immigration status.<sup>3</sup> In a 2020 national survey, 1 in 4 adults in low-income immigrant families reported immigration concerns deterred them from seeking help with basic needs, including healthcare.<sup>4</sup> To make Medi-Cal Expansion more effective, the Alameda County Social Services Agency is encouraging older adults to apply for services, through a multicultural public outreach campaign across multiple platforms, in partnership with community organizations such as the Alameda Health Consortium and La Familia. For more information on AB 74 and the Medi-Cal Health Enrollment Navigators Project, visit: <https://healthyac.org> and [www.dhcs.ca.gov/services/medi-cal/eligibility/pages/navigatorsproject.aspx](http://www.dhcs.ca.gov/services/medi-cal/eligibility/pages/navigatorsproject.aspx)

### National Percentage of Immigrants Who Did Not Apply for Non-Cash Benefits Because of Immigration Concerns<sup>6</sup>



Source: The Urban Institute's Well-Being and Basic Needs Survey, Dec. 2020<sup>7</sup>

### COVID-19 Impact

Immigrant families, largely working in low-income, service, or essential fields, faced higher rates of both financial difficulty and exposure to COVID-19. Many immigrant families were excluded from early pandemic-relief legislation and from federally funded safety-net programs and limited in their access to relief. Lower rates of health care coverage, combined with declining enrollment, contributed to health and economic instability. Nationally, 50% of immigrants in low-income families surveyed reported that the pandemic negatively affected employment within their family. 30% reported that someone in their family did not receive needed healthcare because difficulty paying medical bills.<sup>5</sup>

#### References:

1. California Governor's Office, April 29, 2022
2. Public Policy Institute of California, "Medi-Cal Expansion for Undocumented Seniors", February 21, 2020
3. Kaiser Family Foundation, "Health Coverage of Immigrants", April 06, 2022
4. Urban Institute, "Adults in Low-Income Families Were Deeply Affected by the Covid-19 Crisis yet Avoided Safety Net Programs in 2020", May 26, 2021

5. Urban Institute, "How Federal and State Leaders Can Reach Immigrants and Build Their Trust in the Safety Net", July 28, 2021
6. UC Berkeley Labor Center, UCLA Center for Health Policy Research, "Undocumented Californians Projected to Remain the Largest Group of Uninsured in the State in 2022" April 13, 2021
7. Urban Institute, "Immigrant Families Continued Avoiding the Safety Net during the COVID-19 Crisis", February 2022