Immigrant Eligibility Changes in 2026 & 2027

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Health Care Practice Tip: Medi-Cal Immigrant Eligibility Changes in 2026 & 2027

Medi-Cal eligibility for immigrants got worse starting on **January 1, 2026**, and is scheduled to worsen again in **January and July 2027**. Several changes harm people differently depending on their **age, pregnancy status, and immigration status**. Until California's elected officials reverse these harmful cuts, this Practice Tip provides information and strategy ideas to help immigrants access the health care that they need.

Many immigrants are exempt from these harmful changes!

We start with the only good news in this tip! Many immigrants can **keep their full-scope Medi-Cal because they are exempt** from the changes described below. Please review each change carefully to see if any of these groups are exempt:

- Children up to their 19th or 20th birthdays
- Current foster youth, former foster youth up to their 26th birthday, and nonminor dependents[1]
- Pregnant people, including 12 months after the pregnancy ends

💡TIPS to help people in these three groups stay exempt from these changes:

- **People should report their pregnancies as soon as possible.** When applying for Medi-Cal, answer "yes" to the question "Are you pregnant?" If somebody already has Medi-Cal, they should report their pregnancy to their county Medi-Cal office by phone, at BenefitsCal.com, by mail, or in person.

[1] The legislature first did not include foster youth, former foster youth, and nonminor dependents in the list of excluded groups, but they added them in later amendments to Welf. & Inst. Code §§ 14007.8(b)(3) (enrollment freeze), 14007.5(f)(4) (monthly premiums). For purposes of this exemption, a "former foster youth" is a youth between the ages of 18 and 25 who was in foster care in any state on their 18th birthday or later. *Id.* § 14005.28. And a "nonminor dependent" is a youth between the ages of 18 and 21 who was in foster care on their 18th birthday and remains under the supervision of the juvenile court with a transitional independent living case plan (i.e., in Extended Foster Care). *Id.* § 11400(v).

- **Watch out for when somebody turns age 19, 21 or 26.** For all of the changes in this tip, Medi-Cal uses special rules to decide when somebody "ages out" of these groups:[2]
    - People who turn 19, 21 or 26 on or after the second day of the month are considered 18 or 25 for the entire month – so they can keep their Medi-Cal for an extra month! ☺
    - But when people turn 19, 21 or 26 on the first day of the month, they are considered that age for the entire month – so their Medi-Cal will change that same month. ☹
    - When people reach those age limits, they will keep their Medi-Cal but be subject to all of the bad news below. ☹

For people outside of these three exempted groups, please read on for how the coming harmful changes will impact immigrants in chronological order.

January 1, 2026

Medi-Cal stopped enrolling adults without documented status in full-scope Medi-Cal

The California Legislature and Governor betrayed their commitments to Health4All by banning full-scope Medi-Cal for adults with no documented status and three types of non-immigrant visas. Starting on January 1, 2026, these adults (age 19 and older) who apply for Medi-Cal can only qualify for restricted-scope (emergency) Medi-Cal.[3]

Several groups are exempt from this change and can still enroll in full-scope Medi-Cal:[4]

- All kids under age 19
- All pregnant people (including 12 months post-pregnancy)
- Current foster youth, former foster youth up to their 26th birthday, and nonminor dependents

Important: This exclusion impacts only certain adults, age 19 and older, who used to be eligible for full-scope Medi-Cal under the different Medi-Cal expansions regardless of immigration status:

- Adults with no immigration status
- Adults with unverified status
- Adults with any of three types of non-immigrant visas (student, work, and tourist visas)[5]

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[2] ACWDL 25-13 confirms these age-out policies for the "expansion freeze" (what we call the "full-scope Medi-Cal ban") scheduled for January 1, 2026. And ACWDL 25-33 confirms the same for monthly premiums.
[3] Welf. & Inst. Code § 14007.8(b)(1).
[4] Welf. & Inst. Code § 14007.8(b).
[5] California law limits the full-scope Medi-Cal ban to only these immigrant adults through a complicated cross-referencing of state and federal statutes. Welf. & Inst. Code § 14007.8(b)(1)

Adults in these groups may still be eligible for full-scope Medi-Cal if they can claim PRUCOL, which stands for Permanently Residing Under Color of Law: immigration authorities are aware that they are in the United States; and immigration authorities do not intend to deport or remove them, either because of their status, individual circumstance or a combination of both.[6]

All immigrants with other statuses are not affected by this change! This includes: green card holders and applicants (regardless of the five-year waiting period); DACA recipients; refugees; asylees; Cuban/Haitian entrants; Violence Against Women Act (VAWA) petitioners; non-VAWA battered immigrant categories; parolees; U visa applicants and holders; T visa applicants and holders; Citizens of Micronesia, the Marshall Islands, and Palau (COFA); people Permanently Residing in the U.S. Under Color Of Law (PRUCOL); and more.

💡**TIP:** As of February 2026, Medi-Cal's immigration category chart lists which status groups are still eligible to enroll in full-scope Medi-Cal. When helping somebody figure out whether they can still apply for full-scope Medi-Cal, look for their immigration status on that chart, and remember that even if it shows people are eligible, they may still be eligible under PRUCOL.

This means there are now two groups of immigrant adults that will get different kinds of Medi-Cal, either full-scope or emergency/restricted-scope. What matters most is:

- Did the person have full-scope Medi-Cal in December 2025?
- Did the person apply for Medi-Cal before January 1, 2026?

> ✅ **If the answer is "YES" to either question – good news! They can still be eligible for full-scope Medi-Cal after January 1, 2026** as long as they continue to qualify and complete their annual renewals in 2026 and beyond. The same adults who apply for Medi-Cal by December 31, 2025 (and whose applications are approved later by the county) can qualify for full-scope Medi-Cal and keep it as long as they remain eligible. It does not matter when the county approves the application. All that matters is the date of submission.
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> ❌ **If the answer is "NO" to both questions – bad news.** Adults with no documented status and some non-immigrant visa holder adults applying for Medi-Cal starting on January 1, 2026 will only qualify for restricted-scope (emergency) Medi-Cal, except for pregnant people who can still enroll in full-

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establishes the restriction for people ages 19 and older, who are not United States Citizens (§ 14011.2(e)(1)), who are not in immigration statuses receiving federal full-scope Medicaid funding, and who are not PRUCOL (§ 14007.5(d)). By process of elimination, this leaves only these adult immigrants as subject to this change. Importantly, only the student, work, and visitor/tourist visas are included here, and not other non-immigrant visas like U or T visas.

[6] 22 CCR §§ 50301(b)(4), 50301.3(s).

scope coverage (but they will transition to restricted-scope Medi-Cal after their pregnancy and 12-month post-pregnancy period ends).[7]

💡TIPS to help adults with no documentation and some non-immigrant visa holders stay enrolled in full-scope Medi-Cal:

- **The last day for these adults to apply for full-scope Medi-Cal was December 31, 2025.** If you submitted your Medi-Cal application no later than 11:59PM on December 31, 2025, you should have full-scope Medi-Cal.
- Sign up for an account at BenefitsCal.com and opt into both email and text (phone) alerts. This will help you receive notifications when the county Medi-Cal office needs information to keep coverage active.
- Watch your mail, email, and phone for any contacts from your county Medi-Cal office. You must respond to all requests for information, including annual renewals, to keep your Medi-Cal active.
- When Medi-Cal ends for any reason, a new **three-month grace period** allows people time to return any information that the county Medi-Cal office needs to restore coverage.[8] So when Medi-Cal terminates, people should contact their county Medi-Cal office to find out what is needed to turn their Medi-Cal back on. The county might simply need the person to submit a proof or confirm some information. In other situations, the person may need to submit a new Medi-Cal application. Be sure to **take action before the three-month grace period ends!**
- When somebody does not turn in requested information or reapply during the three-month grace period, they will be stuck with restricted (emergency) Medi-Cal.
- People who miss the three-month grace period may still get their Medi-Cal back if it ended as a result of an administrative error, like a county's late processing of submitted information, a county data collection error, or other mistake that was not the fault of the Medi-Cal member.[9] They may also qualify for Medi-Cal after the three-month grace period if they can show good cause, which county Medi-Cal offices determine on a case-by-case basis.[10]

💡TIPS to help adults with no documentation and certain non-immigrant visa holders who are stuck with restricted-scope (emergency) Medi-Cal:

- **Medical bills:** When the applicant meets Medi-Cal requirements in any of the three months before the application month, they may qualify for full-scope Medi-Cal during any

[7] Welf. & Inst. Code § 14007.8(b)(1).
[8] Welf. & Inst. Code § 14007.8(b)(2) (grace period applies when somebody "loses coverage for full-scope Medi-Cal"). This is broader than the traditional 90-day cure period that applies only to terminations resulting from a member's "failure to provide needed information." Welf. & Inst. Code § 14005.37(i).
[9] ACWDL 25-13 at 9.
[10] MEDIL 25-27 at page 3. Good cause includes physical or mental illness, literacy or language barriers, and more. 22 CCR § 50175(c).

retroactive months before January 2026.[11] The deadline to ask the county for this retroactive-month eligibility is one year after the month for which a person seeks coverage.[12]
    - This means that adults with no documentation and some non-immigrant visa holders applying for Medi-Cal in January, February, and March 2026 can ask the county to evaluate them for full-scope Medi-Cal for any of the three months that occur in 2025 before their application month.[13]
    - For example: A 27-year-old adult with a student visa applies for Medi-Cal on January 16, 2026. They request retroactive coverage for October, November, and December 2025. They can qualify for full-scope Medi-Cal during those retroactive months, because they would have been eligible under the Adult Expansion and the ban was not in place during those months. They can qualify for restricted scope (emergency) Medi-Cal starting in January 2026.
    - Note: Effective January 1, 2027, federal law requires Medi-Cal to shorten the retroactive eligibility period to one month for most adults, and two months for everybody else.[14]
- Restricted (emergency) Medi-Cal covers more than just emergency department hospital care.[15] It also includes ongoing treatment or inpatient care if required to prevent serious injury or death, such as dialysis, and other services related to renal failure or dialysis complications.[16] Also covered are pregnancy-related services and long-term care, depending on a patient's needs.[17]

Here are some examples that show how this full-scope Medi-Cal ban should work:

Example: Rebeca is 20 years old and has no documented status. She had full-scope Medi-Cal in December 2025, so her Medi-Cal continues into 2026. But in May 2026, Rebeca's Medi-Cal terminated.

→ Rebeca must contact her county Medi-Cal office within the three-month grace period and do whatever it takes to get her Medi-Cal eligibility turned back on. Since Rebeca's benefits terminated in May, her three-month grace period will end on the last day of August 2026.

→ If Rebeca waits until September 2026 to reapply for Medi-Cal, she will have missed the three-month grace period so she will only qualify for restricted (emergency) Medi-Cal, unless she can ask for extra time because the county made an error.

Example: José is 31 years old and has DACA. He applies for Medi-Cal in January 2026.

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[11] ACWDL 25-13 at pages 6-8.
[12] 22 C.C.R. §§ 50148, 50197.
[13] ACWDL 25-13 at 6-7.
[14] H.R. 1 (2025) Section 71112 amended 42 U.S.C. 1396d(a).
[15] 42 U.S.C. § 1396b(v)(3); 42 C.F.R. § 440.225; Welf. & Inst. Code § 14007.5(d).
[16] *Crespin v. Kizer*, 226 Cal. App. 3rd 498 (1990).
[17] Welf. & Inst. Code §§ 14007.65 (long-term care), 14007.7 (pregnancy).

→ Because people with DACA are not impacted by this full-scope Medi-Cal ban, José can qualify for full-scope Medi-Cal.

Example: Mauricio is 20 years old, has a student visa, and applies for Medi-Cal in February 2026.

→ Because he has one of the three types of non-immigrant visas that are subject to the full-scope Medi-Cal ban (student, work, and tourist/visitor), Mauricio qualifies only for restricted-scope (emergency) Medi-Cal. He may qualify for retroactive month coverage in November and December of 2025.

Example: Úrsula has no documentation and is a former foster youth with active full-scope Medi-Cal. On May 3, 2026, she turns 26 years old.

→ Úrsula will age out of the former foster youth category starting on June 1, 2026. When this happens, she will keep her full scope Medi-Cal. But later, her Medi-Cal will be affected by all of the changes in this tip: the full-scope Medi-Cal ban above, plus the dental exclusion and premiums described below.

January 1, 2027

Medi-Cal will exclude immigrants with state-funded coverage from health plans

On January 1, 2027, Medi-Cal will disenroll immigrants with state-funded Medi-Cal from their Medi-Cal managed care plans.[18] Starting in 2027, they will be assigned new aid codes and will receive care covered by regular Medi-Cal through the "fee-for-service" (FFS) system.

Only two groups of people are spared from this exclusion and can keep their managed care plans when they are "lawfully present":[19]

- Children under 21
- Pregnant people (including the 12-month post-pregnancy period)

Soon Medi-Cal will start notifying members about this massive change. In mid-September, Medi-Cal is mailing notices to the immigrants losing federal funding for their coverage on October 1, 2026. It includes basic information about how they must access care under regular Medi-Cal starting January 1, 2027. Medi-Cal will send more mailers in December 2026.

This exclusion will disrupt the health care and wellbeing for **two million Californians**. Starting in July 2026, advocates have been urging Medi-Cal to take several protective measures:

- Continuity of care protections, modeled after current protections for people enrolling in Medi-Cal health plans.
- Development of a searchable fee-for-service provider directory available online and paper version, and that is regularly updated.
    - Medi-Cal recommends people use the Medi-Cal Find Care search tool. Later in 2026, Medi-Cal plans to improve the tool.
- Ensure access to care through a provider analysis that includes overlap of FFS and health plan providers by specified provider types, including requiring FFS providers to meet health plan time or distance and timely access standards; and especially access to specialty care, like gender-affirming care providers.
- Outreach and noticing requirements so that people know what the exclusion is, how they will be impacted, and steps to take to continue accessing care.
- Language access protections and have a toll-free number with interpretation services and a TDD line.
    - Medi-Cal is training call center staff to help people find Medi-Cal providers. You can reach the call center at (800) 541-5555.

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[18] Welf. & Inst. Code § 14007.8(e) (effective July 1, 2026).
[19] DHCS interprets Welf. & Inst. Code § 14007.8(e) to require exclusion from managed care for all members who do not receive federal funding for their full-scope Medi-Cal. Importantly, many people under age 21 and pregnant people receive federally-funded coverage under the separate CHIPRA. SHO 10-006. For a full list of "lawfully present" immigrants, visit NILC's Guide.

- Make CalAIM's Enhanced Care Management (ECM) and Community Supports (CS) covered benefits for the excluded immigrant population and clarify that Community-Based Adult Services (CBAS) is a covered FFS benefit.
- Add care management services for people who may not meet ECM criteria but still need help with care management.
- Expedite the process for Medi-Cal plan-contracted providers to become FFS providers so that the available provider network is adequate.

Please check back here for more information in the coming months.

💡TIPS for accessing care before & after January 1, 2027:

- Before January 1, 2027, Medi-Cal members should complete all care they need through their health plan, including: appointments and treatments, maximum prescriptions for drugs and supplies (including to last into early 2027), CalAIM Community Supports and Enhanced Care Management, and anything else they need from their health plan.
- Members should also ask their current providers if they accept "regular" or "fee-for-service" Medi-Cal. If they do not, members should start looking for new providers.
- People should report all pregnancies, including during the 12-month post-pregnancy period. This could help people keep their health plan or "regular" Medi-Cal – whichever system works best for them.
- Report any changes to your immigration status, since if your new status is considered "lawfully present" you could keep your health plan

Example: José is 31 years old and has DACA. He has been enrolled in Medi-Cal's Partnership HealthPlan since January 2026. Because people with DACA over age 20 receive state-funded Medi-Cal, he will be disenrolled from Partnership HealthPlan in January 2027. Starting then, José will need to access all of his Medi-Cal-covered care in the regular Medi-Cal system. José takes heart medication, so he should ask his health plan doctors to write the maximum prescription in late 2026 so that he has enough doses to last until he can get a new prescription in 2027. He should also start asking all his providers if they accept regular Medi-Cal.

July 1, 2027

Medi-Cal will stop covering non-emergency dental care for many immigrants

Medi-Cal will add a third type of coverage starting on **July 1, 2027**: "full-scope Medi-Cal with no dental." This type of Medi-Cal will cover ordinary dental services, except for non-emergency dental care.[20] Still covered will be all other Medi-Cal benefits (including behavioral health), plus any dental treatments needed after or during an emergency medical condition, including:[21]

- Accidents or injuries impacting the mouth
- Serious tooth pain
- Infections
- Tooth removals, and more![22]

Some groups can keep their regular dental coverage because this change does not apply to them:[23]

- All kids under age 19
- All pregnant people (including 12 months post-pregnancy)
- Current foster youth, former foster youth up to their 26th birthday, and nonminor dependents
- Youth ages 19 and 20 who are "lawfully present"

The impacted group of immigrants for this change is broader than the full-scope Medi-Cal ban above. It includes adults who are qualified immigrants ineligible for federally-funded Medi-Cal, DACA recipients, PRUCOL, adults with no documentation and non-immigrant visa holder immigrants in the group above, and others.[24] Starting in January 2027, Medi-Cal will use new aid codes to identify impacted people.

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[20] Welf. & Inst. Code § 14007.5(m)(1) (limiting dental coverage to "the treatment of an emergency medical condition and medical care directly related to the emergency, as defined in federal law.").

[21] For a full list of Medi-Cal benefits, visit Medi-Cal's website, "What does Medi-Cal cover?" Find the most detailed list of covered benefits and services in the Medi-Cal Provider Manuals.

[22] There are several definitions of what emergency care should be covered. Federal law defines emergencies as "acute symptoms of sufficient severity (including severe pain)...that could reasonably be expected to result in placing patient's health in serious jeopardy; serious impairment to bodily functions; or serious dysfunction of any bodily organ or part." 42 C.F.R. § 440.255(b). State statute incorporates this definition, and clarifies that both inpatient and outpatient care is covered. Welf. & Inst. Code § 14007.5(e); Health & Safety Code § 1317.1. State regulations are similar. 22 C.C.R. § 97500.73. Medi-Cal added some of these examples as dental care that would still be covered to its website, and they published specific Current Dental Terminology (CDT) codes that are covered as emergency dental care.

[23] Welf. & Inst. Code §§ 14007.5(p), 14007.8(k). For a full list of "lawfully present" immigrants, visit NILC's Guide.

[24] State law defines the group of immigrants getting Medi-Cal with no dental in two different statutes. Welf. & Inst. Code § 14007.5(c) (defining the group as including qualified immigrants

Many immigrants can keep Medi-Cal with non-emergency dental coverage. They include: green card holders exempt from or who have met the five-year waiting period, Cuban/Haitian entrants, and Citizens of Micronesia, the Marshall Islands, and Palau (COFA).[25] Stay tuned for any changes in the 2027-2028 state budget that may preserve non-emergency dental coverage for more groups of immigrants.

TIP: As of July 2026, Medi-Cal's immigration category chart lists which status groups can keep full-scope Medi-Cal with dental, and which people will only be eligible for emergency dental starting on July 1, 2027.[26]

Before the 2026-2027 budget delayed this change from July 2026 to July 2027, Medi-Cal mailed an informing notice and FAQ document to all immigrant households that will see their Medi-Cal change to "Medi-Cal with no dental."[27] A total of 2.5 million mailings were sent in weekly batches starting November 7, 2025. In July 2026, Medi-Cal mailed a corrected notice (in all threshold languages) that informs people of the delay to July 2027.

TIPS to help adult immigrants subject to Medi-Cal with no dental:

- Medi-Cal continues to cover a wide range of dental benefits through June 30, 2027. This includes dental exams and cleanings, X-rays, fillings, crowns, root canals, full and partial dentures, denture adjustments, and more! Many of these dental services will not be available under emergency-only dental coverage.
- People should schedule treatments now so that they receive the services by June 30, 2027. Schedule early to make sure you get it done in time, including fittings for any dentures! Search for a Medi-Cal Dentist here.
- The immigrant groups exempted from these changes will keep their full-scope Medi-Cal with dental! But when people age out of the youth and former foster youth groups, or reach the end of their 12-month post-pregnancy period, their coverage will change to Medi-Cal with no dental.
- People can access non-emergency dental care that Medi-Cal excludes through different clinic, dental school, and community programs. Before Medi-Cal covered dental care,

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who do not get federal funding for their Medi-Cal, plus people claiming PRUCOL), (m) (setting removal of non-emergency dental for adults ages 19 and up for these immigration status groups); § 14007.8(k) (defining group as immigrants receiving state-funded full-scope Medi-Cal).

[25] In AB 173 (2026), the legislature amended Welf. & Inst. Code § 14007.5(p) and 14007.8(k) to add to the exempt groups pregnant people (including 12 months post-pregnancy).

[26] Medi-Cal's immigration category chart is subject to change. It still needs to be updated to reflect the July 1, 2027 effective date finalized in the 2026-2027 state budget. And before February 27, 2026, it inaccurately described the scope of coverage and premium payment obligations for U visa applicants, who must have the same full-scope Medi-Cal without premiums as refugees. Welf. & Inst. Code § 18945.

[27] The mailings will be sent in all threshold languages. MEDIL 25-22 includes the English-Language version.

people would access dental services through an incomplete patchwork of free, low-cost, and private pay providers. Today there are several options that may help people get free or low-cost dental care:

- Search for a nearby dental provider in California Dental Association's "Low-cost Dental Services" search tool.
- Many local dental schools offer free or low-cost dental clinics. For example:
  - Southwestern College Dental Hygiene Clinic
  - UCLA's Dental Student General Clinic
  - Pasadena City College's Dental Hygiene Clinic
  - UCSF's Dental Center
  - University of the Pacific's Dental Clinic
- And many others! Contact the Health Consumer Alliance for help locating dental care in your area.

Example: José is 31 years old and has DACA. He applied for Medi-Cal in January 2026 and was approved for full-scope Medi-Cal because the full-scope Medi-Cal ban applies only to immigrants who have no status or any of the three non-immigrant visas. He should seek all needed dental care before July 1, 2027, when his coverage will change to Medi-Cal with no dental.

Example: Remedios has no immigration documentation and has been enrolled in full-scope Medi-Cal since February 2025. In November 2025, she received a letter from Medi-Cal saying that her dental care would end in July 2026. She rushed to complete her dental cleaning, but could not schedule her cavity filling until August 2026. Fortunately, because the 2026-2027 state budget postponed the dental cut to July 2027, Remedios should have Medi-Cal Dental coverage for the cavity filling.

July 1, 2027

Medi-Cal will stop state-funded full-scope Medi-Cal for some immigrant groups

Federal law will change which groups of immigrants receive federal funding for their Medi-Cal coverage. Starting on October 1, 2026, Medi-Cal will no longer receive federal funding for full-scope Medi-Cal for these immigrant groups:[28]

1. Adults resettled in California as refugees
2. Adults granted asylum or withholding of removal
3. Adults paroled into the United States (after completing the five year bar)
4. Adult survivors of domestic violence with a pending or approved VAWA application (after completing the five-year bar)
5. Adult survivors of trafficking with a pending or approved T visa or continued presence
6. Adult Afghan or Iraqi Special Immigrant Visa holders
7. Certain Native Americans who are not citizens or lawful permanent residents

Fortunately, the 2026-2027 state budget includes funding to maintain full-scope Medi-Cal for these groups until at least July 1, 2027.[29] Beyond that point, the State Senate made a "commitment to work to maintain eligibility."[30] We await next year's state budget before we will know for sure that full-scope Medi-Cal will end for these groups in July 2027.

If federal funding ends in July 2027, many people can keep their full-scope Medi-Cal through a mixture of federal and state funding:[31]

- U.S. citizens
- Lawful permanent residents (green card holders), even if they have not met the five-year waiting period
- Cuban & Haitian entrants
- Citizens of Micronesia, the Marshall Islands, and Palau (COFA)
- "Lawfully present" children under age 21
- "Lawfully present" pregnant people through a year after the pregnancy ends
- All immigrants in the "frozen" group (described above)
- All immigrants who can still enroll in full-scope Medi-Cal (described above)

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[28] H.R. 1 (2025) Section 71109 amended 42 U.S.C. 1396b(v), explained in NILC's excellent The Anti-Immigrant Policies in Trump's Final "Big Beautiful Bill," Explained - NILC.
[29] Welf. & Inst. Code § 14007.5(b) (effective July 1, 2026). Pre-existing and unchanged state funding for full-scope Medi-Cal remains for people subject to the five-year bar. ACWDL 26-13 at 2 & 4.
[30] Senate Democrats, Budget Act of 2026 summary at page 3.
[31] 42 U.S.C. § 1396b(v)(5), explained in NILC's excellent The Anti-Immigrant Policies in Trump's Final "Big Beautiful Bill," Explained. For immigration statuses considered "lawfully residing," check out NILC's helpful guide. ACWDL 26-13 explains how state funding provides full-scope coverage for members who have not yet met the five-year bar.

Federal rules require Medi-Cal to re-verify the immigration statuses of immigrants in the groups 1 through 7 above. The goal is to provide an opportunity for people to report new immigration statuses that may qualify them for federally-funded Medi-Cal starting in October 2026. Starting in September 2026, counties will be attempting to automatically re-verify statuses. In mailers sent to Medi-Cal members starting September 14, 2026, Medi-Cal asks people to report any changes in immigration statuses to county Medi-Cal offices.[32] Nobody's Medi-Cal should change during this re-verification process, since state funding supports coverage until at least July 2027.

Medicare & Medi-Cal

For people with Medicare and Medi-Cal in the groups 1 through 7 above, state funding will protect their Medicare Savings Program and buy-in enrollment until February 1, 2027 (when their Medicare terminates).[33]

Supplemental Security Income (SSI) & CalWORKs

People with SSI and CalWORKs can keep their Medi-Cal coverage! Normally everybody who has SSI and CalWORKs also has full-scope Medi-Cal. Starting October 1, 2026, Medi-Cal will use state funding to preserve full-scope coverage for the immigrants in groups 1 through 7 above who have SSI or CalWORKs.[34]

💡TIPS to help adult immigrants when this federal law takes effect:

- Because the level of Medi-Cal coverage after July 2027 is uncertain, people in the groups above losing federal funding **should get Medi-Cal services now** (before their Medi-Cal may change next year). They should also respond to all county requests and renewals to keep their coverage.
- Pay special attention to kids under age 21 and pregnant people. Their Medi-Cal should not change since separate federal funding supports it.[35]

July 1, 2027

Some immigrants ages 19-59 will pay premiums for Medi-Cal

Unlike the changes above, the last harmful Medi-Cal change for immigrants impacts only some immigrants **ages 19 through 59**. Starting on July 1, 2027, each person will need to pay a

[32] ACWDL 26-13 at 5-8 describes the re-verification steps in depth.
[33] ACWDL 26-13 at 8-9. Check out Justice in Aging's guide for more information on Medicare changes.
[34] ACWDL 26-13 at 10.
[35] ACWDL 26-13 at 3 explains how kids under age 21 and pregnant people (through the 12-month post-pregnancy period) are all considered "lawfully present."

monthly premium of between $30 and $50 to keep their Medi-Cal with no dental.[36] Everybody between the ages of 19 and 59 who has full-scope Medi-Cal with no dental (the same immigrant groups listed above for emergency-only dental) will need to pay these premiums. Many immigrants do not need to pay the monthly premiums:[37]

- All people under age 19
- Youth ages 19 and 20 who are "lawfully present"
- All people over age 59
- Pregnant people including through the 12-month post-pregnancy period
- Foster youth, former foster youth under age 26, and nonminor dependents
- Anybody who has full-scope Medi-Cal with dental
- Anybody who has restricted (emergency) Medi-Cal
- People enrolled in the county or state Medi-Cal Inmate Eligibility Program (MCIEP)

Starting in January 2027, Medi-Cal will use new aid codes to identify impacted people. Medi-Cal has not published details about how premium payments will work. But from state law, draft guidance, and past Medi-Cal premium payment programs, we can anticipate some details about how people will pay their premiums and keep their coverage:

- People will pay their premiums by cash, check, Western Union, electronic funds transfer (EFT), and credit card (with the option for recurring payments) to the Medi-Cal Premium Payment Section.[38]
- When people do not pay a monthly premium, they must pay the entire balance due within 90 days.[39] If they do not pay, their full-scope Medi-Cal with no dental will terminate, and they will be stuck with restricted (emergency) Medi-Cal only (which does not require premium payments). Immigrants in the "frozen" group can use the three-month grace period (described above) to pay back all balances due to get their full-

[36] The 2025-2026 budget fixed the premium amount at $30/mo. Welf. & Inst. Code §§ 14007.5(e)(1) (effective Sept. 17, 2025), 14007.8(j)(1) (same); ACWDL 25-33. The 2026-2027 budget changes the premium amount so that it will be finalized in the Governor's 2027-2028 May Revision at an amount between $30 and $50/mo. Welf. & Inst. Code § 14007.5(f)(2) (effective July 1, 2026).

[37] Welf. & Inst. Code §§ 14007.5(e)(1)(B), (e)(4). Note that subdivision (e)(1)(B) references people with restricted (emergency) Medi-Cal described in subdivision (d), but it also limits premiums "as a condition of eligibility for the full scope of Medi-Cal benefits, subject to service limitations described in subdivision (*l*)," which is Medi-Cal with no dental. As a result, people with restricted (emergency) Medi-Cal do not need to pay premiums. According to ACWDL 25-33 at page 5, new Medi-Cal aid codes will be issued to identify members in this eligibility group that must pay premiums.

[38] ACWDL 25-33 at 5. Medi-Cal contracts with a private company called "Maximus" to administer these premiums, including handling all operations of the Medi-Cal Premium Payment Section.

[39] Welf. & Inst. Code § 14007.5(f)(3) (effective July 1, 2026).

scope Medi-Cal restored.[40] All other immigrants (not subject to the "freeze") can reapply for Medi-Cal at any time, but must pay off the entire unpaid premium balance first.[41]

- The maximum an individual could owe Medi-Cal in unpaid premiums is the balance of the premiums that they do not pay for 90 days. Generally speaking, the most an individual would owe in unpaid premiums is $30 to $50 for every month during a 90-day grace period (or three months' worth of premiums), which would be around $90 to $150 total per person.
- After the three-month grace period expires, adults subject to the full-scope Medi-Cal ban above cannot qualify for full-scope Medi-Cal. All other immigrants can reapply, but they must pay all past-due premiums before their application for full-scope Medi-Cal can be approved.

TIPS to help adult immigrants ages 19-59 when these premiums start:

- People must pay their premiums to keep their Medi-Cal coverage active. They might need help setting up their payments with the Medi-Cal Premium Payment Section.
- People should check their mail for any notices from the Medi-Cal Premium Payment Section. For example, if a payment fails and they have an overdue balance, Medi-Cal will send them a mailing.
- Paying premiums is especially important for adults subject to the full-scope Medi-Cal ban described above. If their Medi-Cal ends because of problems with the premium payments, they will have only three months to resolve it because they get stuck with restricted (emergency) Medi-Cal only. All other immigrants can reapply when they pay any premiums due from the past year.
- When people turn age 60, they are exempt from paying premiums starting with their birthday month.[42]
- People with Aid Paid Pending while awaiting fair hearing decisions are not required to pay premiums.[43]
- When people request retroactive Medi-Cal months to cover past medical bills, they must pay monthly premiums for each retroactive month.[44]

Example: Pilar is 32 years old, has DACA, and has been with Medi-Cal for the past three years. On July 1, 2027 her Medi-Cal will change to Medi-Cal with no dental.

- Pilar should schedule all non-emergency dental care to be completed before then! Starting on July 1, 2027, Pilar will need to pay a $30 to $50 per month premium to keep her Medi-Cal. In August 2027, she gets really busy with work and does not pay her premiums for two months. Medi-Cal sends her several letters asking her to pay the balance due.

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[40] ACWDL 25-33 at 8.
[41] ACWDL 25-33 at 8.
[42] ACWDL 25-33 at 4.
[43] ACWDL 25-33 at 4.
[44] ACWDL 25-33 at 6.

- Pilar is too busy, so she does not pay, and her Medi-Cal changes to restricted (emergency) scope approximately 90 days after her first skipped premium payment.
- By the next year, Pilar has time to reapply for full-scope Medi-Cal. Fortunately, because she has DACA, she can still apply but must pay the unpaid premiums first.

Additional Resources

People should consider any of several other medical care programs to supplement their Medi-Cal when they are banned from full-scope Medi-Cal, downgraded to Medi-Cal with no dental, or downgraded to restricted (emergency) Medi-Cal:

- People can still qualify for many health programs regardless of immigration status:
    - Hospital Presumptive Eligibility
    - Pregnancy Presumptive Eligibility
    - Breast & Cervical Cancer Treatment Program (BCCTP)
    - Every Woman Counts
    - Prostate Cancer Treatment Program (IMPACT)
    - Family Planning, Access, Care & Treatment Program (FPACT)
    - Medi-Cal's 213% FPL Pregnancy Program
    - Medi-Cal Access Program (MCAP)
    - County safety-net programs (not all counties cover immigrants without documentation)
    - Emergency room screening & care
    - Hospital financial assistance (charity care) (not all hospitals provide financial assistance to immigrants without documentation)
    - Kaiser Permanente's Community Health Coverage Program
    - Community health centers & clinics

Groups across California have created several helpful resources. Please note that (as of July 1, 2027) many need to be updated to reflect the 2026-2027 final budget's delay of most of these changes until July 1, 2027:

- Health Consumer Alliance flyers in threshold languages: "Medi-Cal Changes for Adult Immigrants (ages 19 and up) in California Starting in 2026 and 2027"
- Health Consumer Alliance's chart on eligibility for California's health programs based on an individual's immigration status
- Health Consumer Alliance's chart explaining the various health programs in California and their eligibility criteria, including immigrant eligibility criteria
- NHeLP's Medi-Cal Changes Under OBBBA and CA Budget: Immigrant Eligibility & Benefits
- NHeLP & Children's Law Center's "Upcoming Medi-Cal Cuts Don't Apply to Immigrant Foster Youth, Nonminor Dependents, and Former Foster Youth"
- NHeLP's Immigrant Youth Access to Medi-Cal and Managed Care
- NILC's Major Benefit Programs Available to Immigrants in California (Jan. 2026)

- NILC's The Anti-Immigrant Policies in Trump's Final "Big Beautiful Bill," Explained
- Privacy Information for Immigrants With Medi-Cal
- Health4All FAQs: Medicaid Information Sharing with Immigration Enforcement (Spanish)

Official information from the Department of Health Care Services:

- Medi-Cal's What Medi-Cal Members Need to Know, including the Immigration Category Chart.

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