California Strategies to
Medicaid Services and Immigrant Coverage

Medicaid Administration

States design their Medicaid programs using different administrative structures and oversight mechanisms. Approaches may include the use of managed care, medical loss ratio requirements, site-neutral payment policies, vendor partnerships for enrollment, and coordination with Medicare. This section assesses how states administer Medicaid to balance efficiency, oversight, and consumer protections. Strategies examined in this section include:

States Utilize Medicaid Managed Care

States Partner with Vendors for Medicaid Enrollment and/or Eligibility

Medicaid-Medicare Integration

Medicaid Covered-Services

State Medicaid programs vary in the range of services they cover beyond federal minimum requirements. Some states have expanded coverage to include fertility treatments, doula services, abortion care, gender -affirming services, hearing aids, vision care, and dental services. This section reviews the extent to which states provide enhanced benefits to improve access and health outcomes. Strategies examined in this section include:

Medicaid Coverage for Fertility Services

Medicaid Coverage for Doula Services

Medicaid Coverage for Abortion Care

Medicaid Coverage for Gender Affirming Care

Medicaid Coverage for Hearing Aids

Medicaid Coverage for Eye Exams and Glasses

Medicaid Coverage for Dental Services

Medicaid Eligibility

Eligibility rules determine who can access Medicaid coverage and the scope of their benefits. States can expand eligibility through Medicaid expansion, extend postpartum coverage, provide continuous eligibility, and adjust asset and income rules for specific populations. Some states also provide coverage to individuals reentering the community after incarceration. This section examines how states structure Medicaid eligibility to promote access and continuity of care. Strategies examined in this section include:

- Medicaid Expansion
- Retroactive Medicaid
- Continuous Eligibility for Adults Enrolled in Medicaid
- 12-Month Postpartum Coverage
- Medicaid Coverage for Re-Entry Populations
- Expanded Asset Limits for Adults Enrolled in a Medicaid Aged, Blind, or Disabled Program
- Life Insurance Exemptions for Eligibility in Medicaid for Aged, Blind and Disabled Program
- Retirement Account Exemptions for Eligibility in Medicaid for Aged, Blind and Disabled Program

Immigrant Coverage

States may extend coverage to immigrants who are otherwise excluded from federal programs, such as undocumented children or adults. Additional policies include state-funded options for prenatal, postpartum, or child health coverage, as well as coverage for lawfully present immigrants without a five-year waiting period. This section evaluates state actions to close coverage gaps for immigrant populations. Strategies examined in this section include:

- Coverage Options for Pregnant Immigrants (FCEP and Postpartum Coverage)
- Coverage for Immigrant Children without a Five-Year Bar
- State-Funded Coverage Options for Undocumented Children
- State-Funded Coverage Options for Undocumented Adults

Medicaid Services and Immigrant Coverage

Medicaid Administration

Policy	Status as of June 2025	Summary
Medicaid Managed Care (MCO)	State partners with MCOs to operate their Medicaid program	In California, it is mandatory for the following populations to be enrolled in managed care plans: Children, pregnant people, parents/caretaker relatives, adults without dependents, seniors and people with disabilities, enrollees in long-term care, HCBS waiver enrollees, dually eligible individuals, those with any other health insurance, and American Indians / Alaska Natives in County Organized Health System counties.
Medicaid Vendor — Eligibility and Enrollment	State contracts with a vendor for Medicaid enrollment or eligibility	
Integrated Medicaid-Medicare	State integrates Medicare-Medicaid to coordinate care for the dually eligible population	California has either or a combination of both highly integrated or fully integrated dual eligible special needs programs (HIDE/FIDE), as well as program of all-inclusive care for the elderly (PACE).

State Has Active Policy or Program | Policy or Program Partially Implemented | State Does Not Have an Active Policy or Program | * No Source, or Limited Information Found

Medicaid Services and Immigrant Coverage

Medicaid Covered Services

Policy	Status as of June 2025	Summary
Medicaid Coverage for Fertility Services	⊗ State Medicaid program does not cover infertility treatments or fertility preservation services	
Medicaid Coverage for Doula Services	● State Medicaid program actively reimburses for doula services	
Medicaid Coverage for Abortion Care	● State Medicaid program utilizes state-based funds to cover abortion care	
Medicaid Coverage for Transition-Related Care	● State Medicaid program explicitly covers any transition-related care for adults	
Medicaid Coverage for Hearing Aids	● State Medicaid program covers hearing aids for all adults	Medicaid covers up to $1,510 of hearing services per person each fiscal year. Pregnant women are not subject to the hearing aid benefit cap if services are part of their pregnancy-related care or if services are used to treat a condition that may cause problems in pregnancy.
Medicaid Coverage for Eye Exams and Glasses	◉ State Medicaid program covers only eye exams or eyeglasses but not both, or biannually or less frequently, or restricts coverage based on age or health condition (see notes)	Exams and glasses covered biannually.
Medicaid Coverage for Dental Services	● State Medicaid program covers preventive and diagnostic dental services, extractions, dentures, root canals, fillings, and crowns for adults	

● State Has Active Policy or Program ◉ Policy or Program Partially Implemented ⊗ State Does Not Have an Active Policy or Program ✱ No Source, or Limited Information Found

Medicaid Services and Immigrant Coverage

Medicaid Eligibility

Policy	Status as of June 2025	Summary
Medicaid Expansion	State has expanded Medicaid eligibility to 138% of the federal poverty level (FPL)	
Retroactive Medicaid	State retroactively extends Medicaid benefits 90 days prior to application date for all adult enrollees	
Adult Medicaid Continuous Eligibility	State has not authorized 12-month continuous eligibility for non-pregnant adult Medicaid enrollees*	
12-Month Postpartum Coverage	State has authorized 12-month postpartum Medicaid coverage	
Medicaid Available to People who are Incarcerated	State has not authorized Medicaid coverage for justice-involved individuals while they are in a correctional setting*	Under the CalAIM Section 1115 waiver, incarcerated residents in California who meet certain criteria may receive select Medicaid benefits 90 days before release, including case management, counseling, medications and medical equipment.
Medicaid Aged, Blind and Disabled (ABD) Asset Limits	State has expanded the asset limit for Medicaid for the Elderly and Disabled eligibility beyond $2,000 for an individual applicant and $3,000 for joint applicants	California Medicaid has no asset limit for applicants.
Medicaid Aged, Blind and Disabled (ABD) Life Insurance Exemption	Life insurance exemption limits exceed $1,500	California eliminated its asset limit, therefore life insurance has no impact on Medicaid eligibility.
Medicaid Aged, Blind and Disabled (ABD) Retirement Account Exemptions	State exempts both applicants' and spouses' retirement savings from Medicaid eligibility determinations	California eliminated its asset limit, therefore applicant / non-applicant spouse's IRA has no impact on Medicaid eligibility.

State Has Active Policy or Program | Policy or Program Partially Implemented | State Does Not Have an Active Policy or Program | * No Source, or Limited Information Found

Medicaid Services and Immigrant Coverage

Immigrant Coverage

Policy	Status as of June 2025	Summary
From Conception to End of Pregnancy (FCEP)	Covers pregnancy-related services through the CHIP From-Conception-to-End-of-Pregnancy (FCEP) Option and post-partum coverage	California extends postpartum coverage to 12 months for parents covered under the From Conception to End of Pregnancy option.
Immigrant Children without a Five-Year Bar	State offers coverage for lawfully residing immigrant children without a five-year bar	
Pregnant Immigrants without a Five-Year Bar	Offers coverage for lawfully residing pregnant immigrants without a five-year bar	
State-Funded Coverage for Children Regardless of Citizenship Status	Offers coverage for children regardless of immigration status	
State-Funded Coverage for Adults Regardless of Citizenship Status	Offers coverage for adults regardless of immigration status	California extended state-funded health coverage to income-eligible young adults ages 19-25 in January 2020, adults ages 50 and older in May 2022 and adults ages 26 to 49 regardless of immigration status in January 2024, making all low-income immigrants in the state eligible for state-funded health coverage regardless of immigration status. California plans to pause enrollment for undocumented adults 19 and older who are not pregnant starting January 2026, end dental benefits for all undocumented adults who are not pregnant or up to one year post-partum starting July 2026, and charge $30 monthly premiums for adults ages 19-59 who are not pregnant starting July 2027.

● State Has Active Policy or Program ◉ Policy or Program Partially Implemented ⊗ State Does Not Have an Active Policy or Program * No Source, or Limited Information Found

November 2025

healthcarevaluehub.org

With support from Arnold Ventures, the Healthcare Value Hub provides free, timely information about the policies and practices that address high health care costs and poor quality, bringing better value to consumers. The Hub is part of Altarum, a nonprofit organization with the mission of creating a better, more sustainable future for all by applying research-based and field-tested solutions that transform our systems of health and health care.