

Donation & Transplantation Among Undocumented Immigrants

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The Human Face of an Undocumented Organ Recipient



Case 1

The name and details below are not actual patient information , however, the general concepts are similar to numerous persons I have seen through out the years.

- Mary is a 24 year old married, Latina female.
- She entered the US from Mexico with her parents at age 9months.
- She grew up in a largely Hispanic community, learning to speak both Spanish and English.
- She did not realize that she was born in Mexico until her health began to fail at age 17 and she required dialysis.
- She was still a minor (under age 21,) and she received Medi-cal & CCS to cover the costs of her dialysis & medical care.



Case 1

- Mary was not aware that when she reached age 21 the CCS coverage would cease, her Medi-cal coverage would change to a limited coverage.
- Mary had many concerns initially due to the stigma she felt over learning about her non-US citizen status
- She was also adjusting and fearful about her dialysis and thought of a possible Kidney Transplant.
- Mary continued dialysis until age 24 , when she received a kidney transplant from a deceased donor
- One year after receiving her kidney transplant, Mary found that her coverage of Medi-cal would stop,
- as she had not pursued Legal Residency status or US Citizenship due to being overwhelmed by her health concerns.
- She did not have any other linkage to Medi-cal , ie no minor children, no other disability.

Who are eligible persons for services under Medi-cal definition

- **Restricted or Emergency Medi-Cal, Including Pregnancy-Related Care⁵**
- The term “emergency medical condition” means a medical condition manifesting itself by acute symptoms of sufficient severity, including severe pain, such that the absence of immediate medical attention could reasonably be expected to result in any of the following:
 - (1) Placing the patient's health in serious jeopardy. (2) Serious impairment to bodily functions. (3) Serious dysfunction to any bodily organ or part.
- Under restricted Medi-Cal, pregnant immigrants can receive pregnancy-related services, which include prenatal care, labor, delivery, up to 60 days post-partum care and family planning services.⁸

Medi-Cal Services for Immigrants, Including Non-Citizens and Undocumented Immigrants¹

- Since the enactment of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA),² there has been a misperception in many communities that immigrants and noncitizens are no longer entitled to any federal or state public health benefits.
- In reality, many immigrants and non-citizens remain eligible to receive a wide range of publicly funded health benefits, including Medi-Cal and Healthy Families. The extent of the services depends on the immigration status of the immigrant.
- Qualified immigrants or immigrants who **are PRUCOL (Permanently Residing Under Color of Law)** are eligible for full-scope Medi-Cal, as long as they are “otherwise eligible,” that is, they meet the financial, residential, and categorical requirements of the Medi-Cal program.
- Those immigrants who are not eligible for full scope Medi-Cal still can receive emergency and pregnancy-related services under restricted or emergency Medi-Cal,³ as well as other types of services.

Restricted or Emergency Medi-Cal

- **Breast and Cervical Cancer Treatment Programs**
- **Long-Term Care and Kidney Dialysis**
- Once a Non-US resident has qualified under this category, has been approved for a Kidney Transplant and it is time for their renewal of Medi-Cal, (not having any other linkage to Medi-cal) the person will loose their Medi-Cal and most likely will not have financial means to pay for the Transplant Medications.
- **Family Planning, Access, Care and Treatment (Family PACT)**
- **Minor Consent Services**
- This program offers specific confidential services to some female and male minors under age 21, regardless of immigration status, who are unmarried and living with a parent or guardian or are claimed as a dependent on a parent's tax return. Eligibility is based on the minor's income and resources, not the parental income or property, and there is no share of cost.

Case 2



- John & his family came to the US on a work Visa 7 years ago
- He applied for residency in the US.
- Once he became ill he was no longer able to work and lost his Insurance, became eligible for Medi-cal
- His Work Visa has expired as he became disabled yet receives both SSD & General Assistance with minor dependent children

Case 2

- John received his transplant, had Medi-cal coverage continue as he has three minor, dependent children.
- He is attempting to return to work, yet has not been able to find work in his field.
- His financial situation is very limited even with the assistance he receives.
- He called UCI Transplant department to ask for assistance
- Case 1
- Mary called her Transplant Post Coordinator to ask for help.



HOPE

- **Helping to Optimize Patient Experience,**
Organ Transplant Fund
Empowering Organ Transplant Patients with **HOPE**
- The process of waiting for an Organ Transplant can be physically, emotionally and financially challenging. Optimizing care, support and resources is the goal of the University of California Irvine Medical Center, Kidney, Pancreas & Islet Cell Transplant Department. Chronically Ill patients, those with Renal Disease (CKD & ESRD) are faced with changes and challenges that can often limit ability to be gainfully employed, either citizen, resident or non US resident.
- UCI has also created a lower cost protocol of Immunosuppressant Medication Therapy to maintain the Kidney/Pancreas Transplant. Coupled with the HOPE Fund as needed, those who meet the challenge of potentially losing the transplanted organ are offered a variety of resources to maintain the transplanted Kidney/ Pancreas.

University of California Irvine Medical Center

Division of Kidney , Pancreas and Islet Cell Transplantation

makes every effort to assist those with, or in need of a Kidney and/or Pancreas Transplant..... to not only obtain the Transplanted Organ needed but to maintain the Transplanted Organ for as long as possible in a healthy manner.

Our HOPE is to as offer HOPE

Thank you!

