Table of Contents

16.03.06 - Refugee Medical Assistance

000. Legal Authority. ........................................................................................................ 2
001. Title And Scope. ...................................................................................................... 2
002. Written Interpretations. ........................................................................................... 2
003. Administrative Appeals. ......................................................................................... 2
004. Incorporation By Reference. ................................................................................... 2
005. Office -- Office Hours -- Mailing Address -- Street Address -- Telephone -- Internet Website. ................................................................................................. 2
006. Confidentiality Of Records And Public Records Requests. ............................. 2
007. -- 009. (Reserved). ................................................................................................. 2
010. Definition Of Terms And Abbreviations. .............................................................. 3
011. -- 099. (Reserved). ................................................................................................. 4
100. Identification Of Refugees. .................................................................................... 4
101. -- 124. (Reserved). ................................................................................................. 5
125. Identification Of Entrants. ..................................................................................... 5
126. -- 134. (Reserved). ................................................................................................. 5
135. Precedence Of Categorical Assistance Programs. .............................................. 5
136. -- 149. (Reserved). ................................................................................................. 5
150. Refugee Medical Assistance Program. ................................................................. 5
151. -- 199. (Reserved). ................................................................................................. 7
200. Assistance To Cuban And Haitian Entrants. ......................................................... 7
201. -- 299. (Reserved). ................................................................................................. 7
300. Sponsorship. ........................................................................................................... 7
301. -- 399. (Reserved). ................................................................................................. 8
400. Income And Resources On Date Of Application. ................................................. 8
401. Transition To Refugee Medical Assistance. ......................................................... 8
402. -- 599. (Reserved). ................................................................................................. 8
600. Relationship To Supplemental Security Income (SSI). ...................................... 8
601. -- 699. (Reserved). ................................................................................................. 8
700. Overpayments And Restoration Of Benefits. .................................................. 8
702. -- 799. (Reserved). ................................................................................................. 8
800. Case Record Information. ..................................................................................... 8
801. -- 994. (Reserved). ................................................................................................. 8
995. Provisions Contingent Upon Federal Funding. ................................................... 9
996. -- 999. (Reserved). ................................................................................................. 9
000. LEGAL AUTHORITY.
This program is authorized by 45 CFR Parts 400 and 401, by Section 412E, Title IV, Pub. L. 96-212 also known as the Refugee Act of 1980, 94 Stat. 114 (8 USC 1521) and Action Transmittal ORR-AT-80-6, and by provisions of Sections 56-202 and 56-203, Idaho Code, which authorize the Department of Health and Welfare to assist needy people of the State with medical assistance and to enter into contracts with the federal government to provide assistance.

001. TITLE AND SCOPE.
01. Title. The title of these rules is IDAPA 16.03.06, “Refugee Medical Assistance.”
02. Scope. This chapter of rules governs the administration of the Refugee Medical Assistance Program in the state of Idaho.

002. WRITTEN INTERPRETATIONS.
There are no written interpretations for this chapter of rules.

003. ADMINISTRATIVE APPEALS.
Administrative appeals are governed by IDAPA 16.05.03, “Rules Governing Contested Case Proceedings and Declaratory Rulings.”

004. INCORPORATION BY REFERENCE.
There are no documents incorporated by reference in this chapter of rules.

005. OFFICE -- OFFICE HOURS -- MAILING ADDRESS -- STREET ADDRESS -- TELEPHONE -- INTERNET WEBSITE.
01. Office Hours. Office hours are 8 a.m. to 5 p.m., Mountain Time, Monday through Friday, except holidays designated by the State of Idaho.
02. Mailing Address. The mailing address for the business office is Idaho Department of Health and Welfare, P.O. Box 83720, Boise, Idaho 83720-0036.
03. Street Address. The business office of the Idaho Department of Health and Welfare is located at 450 West State Street, Boise, Idaho 83702.
04. Telephone. (208) 334-5500.
05. Internet Website Address. The website address is: http://www.healthandwelfare.idaho.gov.

006. CONFIDENTIALITY OF RECORDS AND PUBLIC RECORDS REQUESTS.
01. Confidential Records. Any information about an individual covered by these rules and contained in the Department's records must comply with IDAPA 16.05.01, “Use and Disclosure of Department Records.”
02. Public Records. The Department will comply with Sections 9-337 through 9-350, Idaho Code, when requests for the examination and copying of public records are made. Unless otherwise exempted, all public records in the custody of the Department are subject to disclosure.

007. -- 009. (RESERVED).
010. DEFINITION OF TERMS AND ABBREVIATIONS.
For the purposes of these rules, the following terms and abbreviations are used as defined below: (4-2-08)

01. **AFDC.** Aid to Families with Dependent Children. AFDC is the family assistance program in effect on June 30, 1997. It was replaced by Temporary Assistance for Families in Idaho (TAFI). (4-2-08)

02. **Caretaker.** A person related by blood or marriage who holds legal responsibility for the care and support of a minor child or otherwise dependent individual and who is needed in the home to care for such dependent. (4-2-08)

03. **Department.** The Idaho Department of Health and Welfare or a person authorized to act on behalf of the Department. (4-2-08)

04. **Eligible Amerasian.** A citizen of Vietnam born between January 1, 1962, and January 1, 1976, who has one (1) American parent. (4-2-08)

05. **Entrant.** A person from Cuba or Haiti who has been granted special immigration status by USCIS. (4-2-08)

06. **Federal Poverty Guidelines (FPG).** The federal poverty guidelines issued annually by the Department of Health and Human Services (HHS). (4-2-08)

07. **HHS.** United States Department of Health and Human Services. (4-2-08)

08. **INA.** Immigration and Nationality Act, 8 USC Sections 1101-1537. (4-2-08)

09. **IRSP.** Idaho Refugee Service Program. (4-2-08)

10. **I-94.** A white three by five (3x5) inch alien identification card issued to refugees prior to their release to a sponsor. This card gives the refugee’s name, United States address, and other identifying data. The refugee status will be printed in the lower right hand corner. If a refugee does not have this card, he should be referred to USCIS to obtain one. The dependent of a repatriated United States citizen may also have an I-94 card. (4-2-08)

11. **Medical Assistance Program.** Services funded by Titles XIX or XXI of the federal Social Security Act, as amended. (4-2-08)

12. **Refugee.** An alien who:
   a. Because of persecution or fear of persecution on account of race, religion, or political opinion fled from his homeland; and (4-2-08)
   b. Cannot return there because of fear of persecution on account of race, religion or political opinion. (4-2-08)

13. **State Children’s Health Insurance Program (SCHIP).** SCHIP is Title XXI of the Social Security Act. It is a federal and state partnership similar to Medicaid, that expands health insurance to targeted, low-income children. (4-2-08)

14. **TAFI.** Temporary Assistance for Families in Idaho. TAFI is Idaho’s family assistance program whose purpose is to provide temporary cash assistance for Idaho families who meet the eligibility requirements under IDAPA 16.03.08, “Rules Governing the Temporary Assistance for Families in Idaho (TAFI)” program. TAFI replaced the Aid to Families With Dependent Children (AFDC) program. (4-2-08)

15. **USCIS.** United States Citizenship and Immigration Services, formerly known as Immigration and Naturalization Services (INS). (4-2-08)
100. IDENTIFICATION OF REFUGEES.

01. Refugee Immigration Status. A person has refugee status for purposes of assistance under the Refugee Medical Assistance Program if he is one (1) of the following:

a. A person from Cambodia, Laos, or Vietnam who has a Form I-94 indicating that the person has been paroled under Section 212(d)(5) of the Immigration and Nationality Act (INA). The I-94 must clearly indicate that the person has been paroled as a refugee or asylee.

b. A person from Cuba who is present in the United States, and who has an I-94 indicating that the person has been paroled under Section 212(d)(5) of the INA. The I-94 must clearly indicate that the person has been paroled as a refugee or asylee.

c. A person from any country who has Form I-94 indicating that the person has been: (4-2-08)

i. Paroled under Section 212(d)(5) of the INA as a refugee or asylee; or

ii. Admitted as a conditional entrant under Section 203(a)(7) of the INA; or

iii. Admitted as a refugee under Section 207 of INA; or

iv. Granted asylum under Section 208 of INA; or

d. A person who entered the United States and has Form I-151 or I-551 showing that his status has been subsequently adjusted from one (1) of the statuses in Subsection 100.02.c. of this rule to that of permanent resident alien, provided he can document his previous status.

e. A child born in the United States to eligible refugee parent(s) with whom he lives.

f. An Amerasian together with close family members who entered the United States beginning March 20, 1988, in immigrant status through the Orderly Departure Program. Close family members who are eligible refugees under this provision are limited to:

i. The Amerasian’s spouse and child(ren);

ii. The mother of an unmarried Amerasian and such mother’s spouse and child(ren); and

iii. A person who has acted as the parent of an unmarried Amerasian and that person’s spouse and child(ren).

02. Afghan Special Immigrants. An Afghan special immigrant, as defined in Public Law 110-161, who has special immigration status after December 26, 2007, is eligible for eight (8) months from the date they enter into the U.S. as a special immigrant or the date they convert to the special immigrant status.

03. Iraqi Special Immigrants. An Iraqi special immigrant, as defined in Public Law 110-181, who has special immigration status after January 28, 2008, is eligible for eight (8) months from the date they enter the U.S. as a special immigrant or the date they convert to the special immigrant status.

04. Other Factors in Determining Eligibility for the Refugee Medical Assistance Program.

a. An applicant who has applied for, but has not been granted asylum, is not eligible.

b. A person who entered the United States as a resident alien is not eligible.
c. A Form I-94 which shows a person has been paroled into the United States under Section 212(d)(5) of the INA must clearly indicate that the person has been paroled as a “Refugee” or “Asylee” if such form was issued:
   i. To a person from Cambodia, Laos, or Vietnam before October 1, 1997, in accordance with P.L. 106-429, Section 101(a), as amended by P.L. 108-447; or
   ii. To a person from Cuba; or
   iii. To a person from any other country at any time.

d. A person whose status is Cuban/Haitian Entrant must have his eligibility for benefits under the Refugee Medical Assistance Program determined under Sections 125 and 200 of these rules.

e. An Amerasian or close family member admitted as an immigrant but eligible for Refugee Medical Assistance as though he were a refugee must have either of the following documents verifying his status:
   i. A temporary identification document, Form I-94 stamped “Processed for I-551. Temporary evidence of lawful admission for permanent residence. Valid until (expiration date). Employment authorized.” The back of Form I-94 contains the stamped word “Admitted” and is coded AM1, AM2, or AM3; or
   ii. A permanent identification document, Form I-551 coded AM6, AM7, or AM8.

101. -- 124. (RESERVED).

125. IDENTIFICATION OF ENTRANTS.
Identification of Cuban or Haitian entrants or other entrants, and determination of their eligibility for Refugee Medical Assistance must be conducted in accordance with 45 CFR 401.

126. -- 134. (RESERVED).

135. PRECEDENCE OF CATEGORICAL ASSISTANCE PROGRAMS.

01. New Applicants. An applicant for medical assistance must first have his eligibility determined for Medicaid or SCHIP. To be eligible for Medicaid or SCHIP, the refugee must meet all the eligibility criteria for the applicable category of assistance. If the applicant is determined ineligible for Medicaid or SCHIP, then the Department will determine his eligibility for the Refugee Medical Assistance Program.

02. Transfer of Cases. At the end of the eight (8) month time limit for Refugee Medical Assistance, a refugee who is determined Medicaid-eligible in accordance with IDAPA 16.03.01, “Eligibility for Health Care Assistance for Families and Children” or IDAPA 16.03.05, “Rules Governing Eligibility for Aid to the Aged, Blind and Disabled (AABD),” will be transitioned to Medicaid without the need to submit an additional application.

136. -- 149. (RESERVED).

150. REFUGEE MEDICAL ASSISTANCE PROGRAM.

01. Time Limitation. Medical assistance under the Refugee Medical Assistance Program will be limited to eight (8) consecutive months beginning with the month the refugee enters the United States. The eligibility period for a child born in the United States to parents receiving Refugee Medical Assistance expires when both of his parents with whom he is living are no longer eligible.

02. Medical Only. A refugee is not required to apply for or receive Cash Assistance as a condition of eligibility for Refugee Medical Assistance. Denial or closure of Refugee Cash Assistance is not a reason to deny or close Refugee Medical Assistance.
03. **Refugee Cash Assistance Excluded.** Refugee Cash Assistance is excluded from income and resources when determining eligibility for Refugee Medical Assistance. (4-2-08)

04. **Automatic Eligibility.** Refugees whose countable income does not exceed one hundred fifty percent (150%) of the Federal Poverty Guidelines are automatically eligible for Refugee Medical Assistance. (4-2-08)

05. **Refugee Medical Assistance with “Spend Down.”** An applicant for Refugee Medical Assistance whose countable income exceeds one hundred fifty percent (150%) FPG for his family size may become eligible for Refugee Medical Assistance under certain conditions. A special provision, for refugees only, will allow those refugees whose income exceeds one hundred fifty percent (150%) FPG for his family size to subtract his medical costs from his income and thus “spend down” to the FPG limit for his family size. This “spend down” will be determined on a quarterly basis; the quarter begins with the month of application. The amount by which the refugee’s income exceeds one hundred fifty percent (150%) FPG for his family size on a monthly basis is determined by:

   a. Using the best estimate of income to be received during the quarter; and (4-2-08)
   b. Multiplying the monthly excess by three (3) to determine the quarterly “spend down.” (4-2-08)

06. **Counting Income and Resources for Refugee Medical Assistance with a “Spend Down.”** (4-2-08)

   a. Income and resources are counted or excluded in accordance with IDAPA 16.03.01, “Eligibility for Health Care Assistance for Families and Children.” The sole exception is that Refugee Cash Assistance is excluded from income and resources when determining eligibility for Refugee Medical Assistance. (4-2-08)
   b. The Federal Poverty Guideline applicable for the size of the family determines the amount to which an individual or family must “spend down” to be eligible for Refugee Medical Assistance. (4-2-08)
   c. Total countable resources for the family must not exceed one thousand dollars ($1,000). (4-2-08)
   d. Financial resources that are not available to the refugee, including resources remaining in his homeland, can not be considered in determining eligibility for Refugee Medical Assistance. (4-2-08)
   e. The income and resources of sponsors, and the in-kind services and shelter provided to refugees by their sponsors, will not be considered in determining eligibility for Refugee Medical Assistance. A shelter allowance must not be given for any in-kind shelter provided. (4-2-08)

07. **Financially Responsible Relatives.** (4-2-08)

   a. The Department must consider the income and resources of nonrefugee spouses or parents as available to the refugee whether or not they are actually contributed, if they live in the same household. (4-2-08)
   b. If the nonrefugee spouse or parent does not live with the individual, the Department must consider income and resources that are actually contributed by the spouse or parent as available to the refugee. (4-2-08)

08. **Deduction of Incurred Medical Expenses.** If countable income exceeds one hundred fifty percent (150%) of the Federal Poverty Guidelines for the family size, the Department must deduct from income, in the following order, incurred medical expenses that are not subject to payment by a third party: (4-2-08)

   a. Medicare premiums, other health insurance premiums, deductibles, or coinsurance charges incurred by the individual, family, or financially responsible relatives. (4-2-08)
   b. Expenses incurred by the individual, family, or financially responsible relatives for necessary medical and remedial services not covered under the scope of the Medical Assistance Program. (4-2-08)
c. Expenses incurred by the individual, family, or financially responsible relatives for necessary medical and remedial services covered in the scope of the Medical Assistance Program. (4-2-08)

d. On a case by case basis, the Department may set reasonable limits on expenses to be deducted from income under Subsections 150.08.a. and 150.08.b. of this rule. (4-2-08)

09. Determining Eligibility for Refugee Medical Assistance for Refugees Who Must Meet a “Spend Down.” The refugee applicant must provide verification of expenses incurred pursuant to Subsection 150.08 of this rule. If the applicant has medical coverage from a third party, he must verify that charges will not be paid by this third party by providing an Explanation of Benefits or other written statement from the third party. (4-2-08)

a. As the applicant submits medical expenses, the charges should be added in the order listed in Subsection 150.08 of this rule. The expenses that come under Subsection 150.08.c. must be put in chronological order by the date of service. (4-2-08)

b. When the charges equal or exceed the amount of the “spend down,” the applicant becomes eligible for Refugee Medical Assistance. (4-2-08)

c. The date of eligibility is the date of service on the last bill which is covered under the scope of the Medical Assistance Program. (4-2-08)

d. It is the responsibility of the Department caseworker who is determining the applicant’s eligibility to determine when the “spend down” has been met. (4-2-08)

10. Issuing a Medical Card to a Refugee Who Must Meet a “Spend Down.” A Medical Card will not be issued until the applicant has met the “spend down.” The dates on the Medical Card under “Valid Only During” will be the date the applicant becomes eligible for Medicaid benefits “to” the last day of the last month in the quarter for which the “spend down” has been determined. (4-2-08)

11. Continued Coverage. If a refugee who is receiving Refugee Medical Assistance receives earnings from employment, the earnings do not affect the refugee’s continued eligibility for Refugee Medical Assistance. Once a refugee begins receiving Refugee Medical Assistance, he continues to receive it through his eighth month in the United States. (4-2-08)

151. -- 199. (RESERVED).

200. ASSISTANCE TO CUBAN AND HAITIAN ENTRANTS.

01. Eligibility. Except as otherwise provided in Section 200, Refugee Medical Assistance must be provided to Cuban and Haitian entrants under the same conditions, and to the same extent as such assistance is provided to refugees. (4-2-08)

02. Period of Eligibility. The number of months during which an entrant may be eligible for Refugee Medical Assistance under the Cuban/Haitian Entrant Program must be counted starting with the first month in which an individual entrant was first issued documentation by the USCIS indicating:

a. The entrant has been granted parole; or (4-2-08)

b. The entrant is in voluntary departure status; or (4-2-08)

c. The entrant’s residence in the United States is known by USCIS. (4-2-08)

201. -- 299. (RESERVED).

300. SPONSORSHIP.

01. Providing Name of Resettlement Agency. A refugee must provide the name of his resettlement
agency as a condition of eligibility for the Refugee Medical Assistance Program.  

02. **Resettlement Agency and Sponsor Notification.** Whenever a refugee applies for cash or medical assistance for which total or partial reimbursement is provided by the Office of Refugee Resettlement, the Department must promptly notify the resettlement agency (or its local affiliate) that provided for the initial resettlement of the refugee.  

03. **Contact.** In determining a refugee’s eligibility for medical assistance, the Field Office must contact the refugee’s sponsor or resettlement agency and obtain financial information, including verification of the amount of financial assistance the sponsor or resettlement agency is providing to the refugee.  

301. -- 399. (RESERVED).

400. **INCOME AND RESOURCES ON DATE OF APPLICATION.**  
Eligibility is determined using income and resources on the date of application. Income is not averaged over the application processing period.  

401. **TRANSITION TO REFUGEE MEDICAL ASSISTANCE.**  
A refugee is transitioned from Medicaid to Refugee Medical Assistance, if he is within eight (8) months following his entry into the United States, and loses Medicaid because of earnings from employment. The transition to Medicaid coverage is made without a Refugee Medical Assistance eligibility determination. In such cases, the income limits under Section 150 of these rules do not apply.  

402. -- 599. (RESERVED).

600. **RELATIONSHIP TO SUPPLEMENTAL SECURITY INCOME (SSI).**  
Each refugee who receives Refugee Medical Assistance and is sixty-five (65) or older, or aged, blind, or disabled, must be immediately referred to the Social Security Administration to apply for SSI benefits.  

601. -- 699. (RESERVED).

700. **OVERPAYMENTS AND RESTORATION OF BENEFITS.**  
Policy governing recovery of overpayments and restoration of benefits of Refugee Medical Assistance is contained in IDAPA 16.03.01, “Eligibility for Health Care Assistance for Families and Children.”  

702. -- 799. (RESERVED).

800. **CASE RECORD INFORMATION.**  
The following information must be recorded in case records of refugees in addition to documentation required by IDAPA 16.03.01, “Eligibility for Health Care Assistance for Families and Children.”  

01. **Registration Number.** Passport or alien registration number from INA Form I-94;  

02. **Date of Entry.** Month and year of entry into the United States. The receipt of benefits under the Refugee Medical Assistance Program will be limited to eight (8) months from the date of entry into the United States;  

03. **Nationality.** Country in which the refugee was living and fled because of persecution or fear or persecution;  

04. **Resettlement Agency.** Name of the resettlement agency;  

05. **Sponsor.** Name and address of the sponsor; and  

06. **Initial Settlement.** Name(s) of the State(s) from which he moved and in which he initially settled, if a refugee initially settled in another State or States prior to moving to Idaho.  

801. -- 994. (RESERVED).
995. PROVISIONS CONTINGENT UPON FEDERAL FUNDING.
The provisions in Sections 000 through 995 of these rules, are contingent upon availability and receipt of funds appropriated through federal legislation. When federal funds are not available to the State of Idaho, these provisions, or any part therein, will not be in force and operation of the Refugee Medical Assistance Program in Idaho will be suspended. Advance notice of termination or reduction of benefits is not required. (4-2-08)

996. -- 999. (RESERVED).
# Subject Index

<table>
<thead>
<tr>
<th>A</th>
<th>AFDC 3</th>
<th>Afghan Special Immigrants 4</th>
<th>Assistance To Cuban &amp; Haitian Entrants 7</th>
<th>Automatic Eligibility 6</th>
</tr>
</thead>
<tbody>
<tr>
<td>C</td>
<td>Caretaker 3</td>
<td>Case Record Information 8</td>
<td>Contact 8</td>
<td>Counting Income &amp; Resources for Refugee Medical Assistance with a Spend Down 6</td>
</tr>
<tr>
<td>D</td>
<td>Date of Entry 8</td>
<td>Deduction of Incurred Medical Expenses 6</td>
<td>Definition Of Terms &amp; Abbreviations 3</td>
<td>Determining Eligibility for Refugee Medical Assistance for Refugees Who Must Meet a Spend Down 7</td>
</tr>
<tr>
<td>E</td>
<td>Eligibility 7</td>
<td>Eligible Amerasian 3</td>
<td>Entrant 3</td>
<td>Federal Poverty Guidelines (FPG) 3</td>
</tr>
<tr>
<td>F</td>
<td>HHS 3</td>
<td>I-94 3</td>
<td>Identification Of Entrants 5</td>
<td>Identification Of Refugees 4</td>
</tr>
<tr>
<td>H</td>
<td>Limitation 5</td>
<td>Medical Assistance Program 3</td>
<td>Medical Only 5</td>
<td>Nationality 8</td>
</tr>
<tr>
<td>I</td>
<td>Sponsor 8</td>
<td>Sponsorship 7</td>
<td>State Children's Health Insurance Program (SCHIP) 3</td>
<td></td>
</tr>
<tr>
<td>J</td>
<td>TAFI 3</td>
<td>Transfer of Cases 5</td>
<td>U</td>
<td>USCIS 3</td>
</tr>
</tbody>
</table>

for the Refugee Medical Assistance Program 4 | Overpayments & Restoration Of Benefits 8 | Precedence Of Categorical Assistance Programs 5 | Providing Name of Resettlement Agency 7 | Provisions Contingent Upon Federal Funding 9 | Refugee 3 | Refugee Cash Assistance Excluded 6 | Refugee Immigration Status 4 | Refugee Medical Assistance Program 5 | Refugee Medical Assistance with Spend Down 6 | Registration Number 8 | Relationship To Supplemental Security Income (SSI) 8 | Resettlement Agency 8 | Resettlement Agency & Sponsor Notification 8 |

| L            | Sponsor 8 | Sponsorship 7 | State Children's Health Insurance Program (SCHIP) 3 |
| M            | TAFI 3 | Transfer of Cases 5 | U            | USCIS 3 |

Other Factors in Determining Eligibility