

Operations Memorandum - Medicaid
OPS040301

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3/1/04

SUBJECT: Medicaid Coverage for Ineligible Non-Citizens
TO: Executive Directors
FROM: Christine M. Bowser, Director, Bureau of Operations

Purpose

To inform County Assistance Offices (CAOs) of new procedures for requesting authorization to provide Medicaid coverage for otherwise ineligible non-citizens when an emergency medical condition requires ongoing treatment.

Background

Medicaid Eligibility Handbook Section 322.32 indicates an illegal, lawful temporary, or undocumented alien may receive Medicaid only to cover an emergency medical condition. The CAO will authorize Medicaid as non-continuous eligibility periods (NCE's) to cover only the period of time required to treat the emergency medical condition.

Policy Clarification, PMA-8928-322, issued May 3, 2000, states if there is a need for emergency medical services involving ongoing treatment (such as dialysis), eligibility must be determined on a case-by-case basis. Under this Policy Clarification, the CAOs were to submit a request along with medical documentation to the Policy Clarification Unit for a determination by Headquarters.

Discussion

An evaluation of need for emergency services involving ongoing treatment will now be made at the county level by each CAO's Executive Director or designee. Conditions where there may be a need for ongoing treatment include, but are not limited to, dialysis, cancer treatment or high-risk pregnancies.

The CAO will still require the following information before a determination can be made:

1. The nature of the emergency medical condition.
2. That the medical treatment was necessary because of the emergency condition.
3. The approximate duration of the emergency (this includes a treatment plan). If the CAO designee authorizes continuous emergency Medicaid, the worker will open Medicaid for the duration of the emergency (not as an NCE). The applicant will have full coverage and be enrolled in managed care. The CAO should set an alert to review eligibility at the end of the emergency period, next redetermination or client contact.

If the CAO has a question regarding eligibility, they can request guidance by forwarding a request to the Policy Clarification Unit.

Next Steps

1. Review this Operations Memorandum with appropriate staff.
2. This Operations Memorandum becomes obsolete after the Medicaid Eligibility Handbook is revised.
3. Policy Clarification PMA-8928-322 becomes obsolete with this Operations Memorandum.
4. Contact your Area Manager or Office of Income Maintenance Policy Clarification Unit if you have any questions.

Last modified: Tuesday, March 02, 2004