

# Policy Transmittal Office of Self-Sufficiency Programs



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**Authorized signature**

**Number:** SS-PT-21-005

**Issue date:** 03/05/2021

**Update:** 03/09/2021

**Due date:** 03/05/2021

**Topic:** Medical Benefits

**Transmitting (check the box that best applies):**

- New policy   
  Policy change   
  Policy clarification   
  Executive letter  
 Administrative Rule   
  Manual update   
  Other:

**Applies to (check all that apply):**

- |   |  |
|---|--|
| <input type="checkbox"/> All DHS employees                                | <input type="checkbox"/> County Mental Health Directors                                  |
| <input checked="" type="checkbox"/> Area Agencies on Aging: {Select type} | <input type="checkbox"/> Health Services   |
| <input checked="" type="checkbox"/> Aging and People with Disabilities    | <input checked="" type="checkbox"/> Office of Developmental Disabilities Services (ODDS) |
| <input checked="" type="checkbox"/> Self Sufficiency Programs             | <input checked="" type="checkbox"/> ODDS Children’s Intensive In Home Services           |
| <input type="checkbox"/> County DD program managers                       | <input type="checkbox"/> Stabilization and Crisis Unit (SACU)                            |
| <input type="checkbox"/> Support Service Brokerage Directors              | <input type="checkbox"/> Other (please specify):   |
| <input checked="" type="checkbox"/> ODDS Children’s Residential Services  |  |
| <input type="checkbox"/> Child Welfare Programs                           |  |

|                               |  |                         |  |
|-------------------------------|--|-------------------------|--|
| <b>Policy/rule title:</b>     | Non-Citizen Eligibility Changes for COFA Residents                 |                         |  |
| <b>Policy/rule number(s):</b> | OARs <a href="#">410-200-0215</a> and <a href="#">461-120-0125</a> | <b>Release number:</b>  |  |
| <b>Effective date:</b>        | 03/10/2021   | <b>Expiration date:</b> |  |
| <b>References:</b>            |  |                         |  |
| <b>Web address:</b>           |  |                         |  |

**Update:** Links to [member communications](#) are now included.

### **Discussion/interpretation:**

With the passing of the Consolidated Appropriations Act (CAA) of 2021, Compact of Free Association (COFA) residents are now considered Qualified Non-Citizens (QNCs) who are not subject to the 5-year bar for Medicaid. COFA includes citizens from three independent countries: the Republic of the Marshall Islands, the Federated States of Micronesia, and the Republic of Palau. **This policy change is retroactively effective December 28, 2020.**

Prior to the CAA being passed, only COFA children under 19 met the non-citizen requirement. Now, COFA residents of any age meet the non-citizen status requirement for all HSD and APD medical programs. Additionally, assuming all other eligibility criteria are met, COFA adults will now be able to receive Medicare Savings Programs (MSP), Long-Term Care Services and can be determined eligible for medical through the Hospital Presumptive Eligibility (HPE) process.

Note: This change only applies to HSD and APD medical programs.

### **Implementation/transition instructions:**

The Oregon Eligibility (ONE) system is expected to be updated the night of March 10, 2021. After the system update, a mass update job will run to identify individuals impacted by this change and:

- Automatically transition their benefits from CAWEM/CAWEM Plus coverage to OHP Plus. OHP Plus will be effective December 28, 2020.
- Identify if they also receive Medicare. If they do, ONE will evaluate them for an MSP program.
- Send a Notice of Eligibility (NOE)
- Send a Request for Information (RFI) for immigration document information

Additional ONE changes include:

- The rules built into ONE will be updated so that COFA citizens of any age will meet the non-citizen requirements for HSD and APD medical programs
- Verify Lawful Presence (VLP) interface triggering logic will be updated to allow the interface to attempt verification of the immigration status of COFA adults

### **Staff actions required**

- A one-time report will be generated to identify individuals with a date of request of December 28, 2020 and later and who were denied MSP due to not meeting non-citizen requirements so eligibility can be redetermined. Central Office will work the report and contact local office managers for any follow-up actions. If MSP eligible, the earliest effective date of benefits will be as follows:
  - Qualified Medicare Beneficiary (QMB): January 1, 2021

- SLMB and QSMF: December 1, 2020
- Central Office will identify COFA individuals with a date of request of December 28, 2020 and later who were denied Long-Term Care Services. Central Office will retrigger the LTC request task and work with the local office manager to follow-up with the individual for completion of a service assessment.
- Prior to the signing of the CAA, federal regulations did not require the state to verify the immigration status for adult COFA citizens. Due to this, the state does not have immigration documentation for most of the COFA citizens impacted by this policy change. If immigration document information has not been entered into ONE, an RFI will be sent requesting this. Once immigration document information is received, staff will need to enter this into ONE and initiate the VLP interface. If the VLP response is not successful, staff should attempt to verify the immigration documentation through SAVE.
- Please be aware, as of now, the Federal Data Services Hub (FDSH) has not updated the VLP interface to recognize COFA citizens as being QNCs. Until VLP is updated, we expect an RFI to be generated for adult COFA citizens. If an RFI related to immigration documentation is generated:
  - Review the VLP response, and if necessary, run SAVE to confirm the COFA status.
  - If the VLP or SAVE response verifies the COFA status, select “SAVE” in the ‘Immigration Information Verification’ field on the Non-Citizen Detail screen and re-run eligibility to clear the RFI.
  - Create a case note to explain why SAVE was selected
- COFA immigration status is considered verified if the VLP or SAVE response reflects any of the following:
  - Eligibility Statement Code description or any other language indicating COFA status
  - One of the following COAs: FSM, MIS, PAL

## **Advanced Premium Tax Credits (APTC) and the COFA Premium Assistance Program**

### **APTC**

- APTC is a tax credit that can be taken to reduce the premiums of a health insurance Qualified Health Plan (QHP) purchased through the Federally Facilitated Marketplace (FFM).
- FFM regulations allow individuals receiving CAWEM to receive an APTC.
- FFM regulations do not allow an individual to be eligible for an APTC if they are eligible for OHP plus coverage.

If a COFA citizen has a QHP plan and is receiving APTC, they need to contact the FFM once they have been transitioned to OHP Plus to report this change.

### **COFA Premium Assistance Program**

- The [COFA Premium Assistance Program](#) is administered by the Oregon Health Insurance Marketplace housed in the Department of Consumer Business Services (DCBS). This program provides additional financial assistance to help COFA citizens pay their QHP out-of-pocket costs.
- The COFA Premium Assistance Program will end on March 31, 2021 for those individuals who are transitioned to OHP Plus.

### **Training/communication plan:**

This information is communicated via transmittal. The Non-Citizen chapter of the Family Services Manual along with corresponding training materials and resources will be updated accordingly.

Staff and Community Partners can use the [Talking Points/FAQ document](#) to respond to questions.

Qualified hospitals and Community Partners who determine eligibility for HPE will receive notification of this change. HPE training materials and resources will be updated.

In addition to the Notice of Eligibility that will be sent from the ONE system, a [letter](#) will be sent to individuals whose benefits transition to OHP Plus. A [Member Fact Sheet](#) is also available online.

### **Local/branch action required:**

Review information with staff.

**Central office action required:** Update impacted OARs, policy manuals, and training materials. Provide technical assistance as needed.

**Field/stakeholder review:**  Yes  No

**If yes, reviewed by:**

### **Filing instructions:**

*If you have any questions about this policy, contact:*

|   |      |
|---|------|
| Contact(s): HSD Medical Eligibility Policy and APD Medicaid Policy  |      |
| Phone:  | Fax: |
| Email: <a href="mailto:HSD.MedicalEligibilityPolicy@dhsosha.state.or.us">HSD.MedicalEligibilityPolicy@dhsosha.state.or.us</a><br><a href="mailto:APD.MedicaidPolicy@dhsosha.state.or.us">APD.MedicaidPolicy@dhsosha.state.or.us</a> |      |