

H-2400 REFUGEE MEDICAL ASSISTANCE**H-2400 GENERAL INFORMATION**

Refugee Medical Assistance (RMA) is a short-term, federally funded program designed to ensure that refugees receive the medical care they need while they make the transition to life in the United States. Eligibility must be reviewed for all other Medicaid programs prior to being certified. The Refugee Resettlement Agency (RRA) will refer all applicants/enrollees and must provide verification of acceptable refugee status.

All recipients of Refugee Cash Assistance (RCA) that are ineligible for a Medicaid program shall be certified in RMA. It is not a requirement that applicants/enrollees receive or apply for RCA to be eligible for RMA.

A refugee who loses eligibility for Medicaid because of increased earnings from employment and is within the eligibility time period shall be transferred to RMA.

The Affordable Care Act (ACA) changed the methodology for determining financial eligibility for Medicaid for most individuals to the Modified Adjusted Gross Income (MAGI) methodology. The Office of Refugee Resettlement (ORR) granted authority to states to apply MAGI methodologies to the RMA program. Applicants/enrollees in RMA are considered a MAGI group for the duration of this authority.

Effective March 28, 2022 in accordance with ORR regulations the RMA eligibility period has been extended from eight (8) months to twelve (12) months if the individual enrolled on or after October 1, 2021.

H-2410 COVERAGE

Applicants/enrollees are eligible for the full range of Medicaid covered services.

H-2415 ELIGIBILITY DETERMINATION PROCESS

Explore eligibility for other Medicaid programs that offer full Medicaid benefits before considering the RMA program.

All recipients of RCA that are ineligible for a Medicaid program shall be certified in RMA.

If not eligible for RCA, determine eligibility by applying the following criteria beginning with H-2415.1 Determine Assistance/Benefit Unit. The elements have been listed in the most logical order, but work on all steps simultaneously.

H-2415.1 DETERMINE ASSISTANCE/BENEFIT UNIT

The assistance/benefit unit consists of the applicant, spouse, and/or any minor children living in the home. Each member of the unit must meet all eligibility requirements.

H-2415.2 ESTABLISH CATEGORICAL REQUIREMENT

Establish that the applicant/enrollee:

- Is a Refugee or Asylee; Cuban or Haitian entrant; Iraqi or Afghan Special Immigrant; Ukrainian Humanitarian Parolees; severe trafficking victim (Refer to [I-312 Qualified Alien](#)); and
- Is not eligible for Medicaid or the Louisiana Children's Health Insurance Program (LaCHIP); and
- Falls into the established time limit of twelve (12) months from the date of arrival in the United States (for refugees), or from the date asylum is granted (for asylees); and
- Is not enrolled as a full-time student in an institution of higher education, unless it is a one (1) year re-certification program that is part of the refugee's Comprehensive Resettlement Plan (CSR); and
- Provides the name of the sponsoring RRA (Asylees are exempt from this requirement.); or
- Is a child with parents who both meet the requirements of RMA, or with a mother who is receiving RMA when child is born. These newborns can receive RMA until the end of the mother's eighth month period of eligibility.

H-2415.3 Establish Non-Financial Eligibility

Verify eligibility for each member of the assistance/benefit unit with regard to the following factors:

- [Assignment of Third Party Rights](#) [I-200](#)

- [Citizenship/Identity and Alienage](#) [I-300](#)
- [Enumeration](#) [I-600](#)
- [Residence](#) [I-1900](#)

H-2415.4 Establish Need

Household composition and countable income for RMA are based on MAGI. Refer to [I-1550, MAGI Determinations](#).

There is no asset or resource test for the MAGI groups.

Compare the total countable income to the monthly Medically Needy Income Eligibility Standards (MNIES) for the number of individuals in the MAGI household.

If the income is equal to or less than the MNIES, the assistance unit is income eligible for RMA.

If the income is greater than the MNIES, the assistance unit is ineligible for RMA. Consider for the Spend Down Medically Needy Program - RMA.

Spend Down Medically Needy Program - RMA

If the applicant has been determined income ineligible for Regular RMA, convert the monthly MAGI income to quarterly MAGI income by multiplying by three (3), subtract the quarterly MNIES for the number of individuals in the MAGI household, and subtract the medical bills from the excess income in the following order:

- Step 1. Subtract allowable medical bills for individuals, other than the applicant, who are included in the MAGI household.
- Step 2. Subtract unpaid medical bills for services received up to three (3) months prior to the month of application, in chronological order.
- Step 3. Subtract allowable health insurance premiums. Refer to [H-1011.5 Medical Expenses Allowed in the Spend-down Process](#).

Note:

Liability for health insurance premiums arises in the month payment is due, rather than in the month(s) for which coverage is purchased.

- Step 4. Subtract paid and unpaid bills incurred for services received within the spend-down quarter, from oldest to most recent (per diem if necessary). Include insurance co-payments and deductibles. Hospital bills shall be used before physician bills in the spend-down process.

The applicant is eligible for the Spend-Down Medically Needy Program - RMA on the date the excess income is equal to the allowed medical expenses (or “spent-down”), unless the date is prior to the month of application. RMA does not have retroactive coverage.

Reminder:

When determining eligibility:

- Do not consider in-kind services and shelter provided by an applicant’s sponsor or local resettlement agency;
- Do not consider any cash assistance payments provided to an applicant; and
- Do not average income over the application processing period. Use the applicant’s income on the date of application.

H-2415.5 Eligibility Decision

Evaluate all eligibility requirements and verification received to make the eligibility decision to either reject, close, certify, or extend eligibility.

H-2415.6 Certification Period

RMA coverage begins the month of application. For individuals enrolled prior to October 1, 2021, the certification period shall not exceed eight (8) months from the date of entry. The certification period shall not exceed twelve (12) months for individuals enrolled on or after October 1, 2021. Use the date marked on the I-94 to verify the entry date. For persons granted asylum, the entry date is the date the individual is granted asylum. There is no retroactive coverage for RMA.

Example:

An individual is granted asylum on May 1, 2020 and applies for RMA on July 1, 2020. The individual would be eligible for RMA from July 1, 2020 (the date of application) through December 2020. In this case, no additional assistance or services would be provided for the months of May and June since these months occurred prior to the date of application.

Note:

Once certified, increased earnings from employment shall not affect the applicant/enrollee's eligibility for RMA.

H-2415.7 Notice of Decision

A notice of decision shall be sent to the applicant.