
ALIEN REQUIREMENTS

**MA-2504 – ALIEN REQUIREMENTS
REVISED 07/01/10 – CHANGE NO. 10-10**

I. INTRODUCTION

Individuals who live in the U.S. and are not U.S. citizens are aliens. For Medicaid purposes, aliens are referred to as qualified aliens or non-qualified aliens. Each applicant/recipient (a/r) must provide or cooperate in obtaining proof of alien status. Once documented in the case record, no further requests are made unless the documents become questionable or the individual's alien status changes. If the a/r is undocumented, no citizenship, identity, or alien documentation is needed.

The purpose of this section is to provide instructions for determining alien status. [Figure 1](#) provides definitions for the United States Citizenship and Immigration Services' (USCIS) terms with which you may not be familiar.

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (P.L.104-93), and numerous amendments to it, have significantly changed Medicaid eligibility for individuals who are not citizens of the United States. Some of the laws which amended the Personal Responsibility and Work Opportunity Reconciliation Act are Section 501 of the Illegal Immigration Reform and Immigration Responsibility Act of 1996 (P.L.104-208), the Balanced Budget Act of 1997 (P.L. 105-33), the Noncitizen Benefit Clarification and Other Technical Amendments Act of 1998 (P.L. 105-306), and the Violence Against Women Act of 2000 (Division B of P.L. 106-386). The Trafficking Victims Protections Act of 2000 (Division A of P.L. 106-386) made changes that affect the eligibility of noncitizens.

The Children's Health Insurance Program Reauthorization Act of 2009 (CHIPRA or PL 111-3) provides a provision to extend Medicaid/CHIP coverage to qualified alien pregnant women and children under age 19 lawfully residing in the US who have not met the 5-year disqualification period or 5-year bar required under the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. These individuals are exempt from the 5 year bar. See MA-2504 Figure 2.

Additionally, CHIPRA added 12 categories of non qualified aliens lawfully residing in the US who may be eligible for Medicaid for emergency medical services. These 12 categories of non qualified aliens are referred to as "special aliens". Otherwise eligible pregnant women or children under age 19 who are lawfully residing in the US, referred to as "special aliens" may be eligible for full Medicaid/CHIP coverage. See [MA-2504 Figure 2](#).

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(I.)

The Department of Defense Appropriations Act of 2010 (P.L. 111-118) amends the Refugee Crisis in Iraq Act of 2007 (P.L. 110-181) and the Afghan Allies Protection Act of 2009 (P.L. 111-8) by making Iraqi and Afghan Special Immigrants (SIVs) eligible for resettlement assistance, federal benefits, and entitlements for the same time period as refugees. Iraqi and Afghan special immigrants will no longer be bound by the 5-year bar or limited to an 8 month period of eligibility for Medicaid or North Carolina Health Choice (NCHC).

II. PRINCIPLE

To be eligible for full Medicaid or North Carolina Health Choice (NCHC), an individual must be a U.S. citizen or an alien admitted to the United States by USCIS under a specific immigration status. Immigrants who do not meet this requirement or citizens for whom citizenship and identity are questionable are eligible for Medicaid for emergency medical services only.

REGARDLESS OF IMMIGRATION STATUS, EACH A/R MUST MEET ALL CATEGORICAL AND FINANCIAL ELIGIBILITY REQUIREMENTS FOR THE AID PROGRAM/CATEGORY. THIS INCLUDES MA-2220, STATE RESIDENCE AND MA-2525, DISABILITY, IN THE AGED, BLIND, AND DISABLED MEDICAID MANUAL (IF APPROPRIATE). ONCE EACH A/R MEETS ALL REQUIREMENTS, HE MAY BE ELIGIBLE FOR FULL OR EMERGENCY MEDICAID.

III. QUALIFIED ALIENS

A. Introduction

Medicaid eligibility and the level of coverage for an alien is based on whether the alien is qualified or non-qualified, entered the U.S. before August 22, 1996, the number of years since qualified alien status obtained, and immigration status. Some qualified aliens are banned from receiving assistance until 5 years from the date they became a qualified alien, while others are exempt from this disqualification period. The Deficit Reduction Act of 2005 (P.L. 109-171) did not change the requirements for qualified and non-qualified aliens. **See VII. for information on non-qualified aliens.**

B. 5 Year Mandatory Disqualification Period (Five-Year Bar)

1. There is a 5-year mandatory disqualification period for certain qualified aliens if admitted on or after August 22, 1996. If the 5-year disqualification period applies, evaluate for emergency medical services only.

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NOTE: The 5-year disqualification period does not apply to aliens applying only for emergency Medicaid services.

2. If an applicant is not a U.S. citizen, he may only receive full Medicaid if he is a qualified alien **and** exempt from the 5-year bar. After the 5-year disqualification period expires, qualified aliens are potentially eligible for full Medicaid just like U.S. citizens. See [Figure 2](#) to determine the alien status and who is subject to or exempt from the 5-year bar.

NOTE: If the five-year bar applies, the clock begins to run on the date that the person obtained qualified status; however, if the person entered the country prior to August 22, 1996, and remained continually present until they secured qualified immigrant status, the five-year bar does not apply. The person is eligible as soon as they obtained qualified immigrant status.

This rule applies equally to persons who were in the country without documents prior to August 22, 1996. Presence will likely be difficult to establish, but, can be verified through various forms of documentation including utility bills.

3. The Centers for Medicare and Medicaid Service (CMS) lists the following as exempt from the 5 year bar: refugees, asylees, Cuban and Haitian entrants, Amerasian immigrants, persons granted withholding of deportation, victims of trafficking, veterans and active duty military personnel and their spouses and children, as well as certain Native Americans.
4. **Iraqi and Afghan SIV's, are exempt from the 5-year mandatory disqualification period (bar) and may receive full Medicaid if otherwise eligible.**
5. **Qualified alien pregnant women and children under age 19 lawfully residing in the US who have not met the 5-year disqualification period (bar) are exempt from the 5-year mandatory disqualification period (bar) and may receive full Medicaid if otherwise eligible. SEE VIII.**

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C. Lawful Permanent Resident (LPR)

1. An LPR is an alien who is legally admitted to the U.S. by the USCIS to live and work on a permanent basis. The majority of qualified aliens are LPR's and often are referred to as a "resident aliens". USCIS issues each LPR an I-551. This is known as a "green card", even though it is not green. Aliens recently admitted to the U.S. as a LPR, or who have applied for a replacement I-551 may only have the I-94 with a temporary I-551 stamp. Other documents issued by USCIS for "resident aliens," include the I-155 or I-94 stamped with AM-1, AM-2, AM-3, AM-6, AM-7, and AM-8.
2. LPR's are potentially eligible for full Medicaid. Refer to [Figure 2](#) to determine if the 5-year mandatory disqualification period applies.

Refer to [E](#). for documentation of LPR status.

D. Exempt Aliens Who Adjust Status to LPR

1. Aliens who entered the U.S. in a status exempt from the 5-year bar remain exempt after they adjust to LPR status. These include: refugees, asylees, Cuban and Haitian entrants, Amerasian immigrants, persons granted withholding of deportation, victims of trafficking, veterans and active duty military personnel and their spouses and children, as well as certain Native Americans. They remain potentially eligible for full Medicaid without the 5-year bar.
2. Aliens can be legally admitted to the U.S. by the USCIS for many different reasons. For example, an individual may be admitted to the U.S. because he is fleeing persecution in his own country, or USCIS determines it is in the public interest for him to be admitted. Additionally, refugees who adjust their status to LPR and were originally admitted as a political admission, remain potentially eligible for Medicaid based on the original status when admitted. This is verified when the I-551 indicates a code of RE-6, RE-7, RE-8, or RE-9.

Example: An individual is admitted as refugee in January 1997. He adjusts his status to LPR in 1998. Regardless, he remains potentially eligible for full Medicaid based on being admitted as a refugee/asylee.

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E. Procedures to Verify and Document Qualified Alien Status

Below are the procedures for verifying and documenting qualified alien status for applicants requesting medical assistance (applicants/recipients) **except trafficking victims and battered aliens**. See **H. and I.** below for trafficking victims and battered aliens procedures.

1. Verify the alien's current status.
 - a. Request the alien's original USCIS documents (not copies) for current status. Verification of citizenship/alien status is required only for applicants for whom benefits are being requested.
 - b. Use documents listed in [Figure 2](#) to verify the alien's status. If the alien does not have one of these documents, he cannot be considered a qualified alien for Medicaid purposes.
 - c. If an applicant presents an expired document or is unable to present any immigration documentation evidencing his alien status, refer the applicant to the local USCIS Office to obtain documentation of his immigration status **listed below**:

United States Citizenship and Immigration Services
Charlotte Sub Office
6130 Tyvola Center Dr.
Charlotte, NC 28217
Telephone (800) 375-5283

- d. Verify the authenticity of the alien document, and the date of admission using SAVE, Systematic Alien Verification for Entitlement Program. Follow procedures in [EIS 1108](#), SAVE Verification Information System.

NOTE: DO NOT use SAVE as verification for trafficking victims.
Follow procedures in **H.** to verify trafficking victims.

- e. Under most circumstances, an automated check of SAVE records is the first step in the verification process. However, there are circumstances that require you to perform secondary verification immediately instead of checking SAVE. Refer to **X.** for a list of these circumstances.

While you are waiting on a response from the secondary verification, treat the applicant as a non-qualified alien and process for emergency medical services only. Proceed to **IX.**

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- f. Document his current alien status on the application/ redetermination form. Attach a copy of the USCIS documentation to the a/r's permanent record and return original document(s) to the a/r. Explain that when the person signs the form he certifies alien status for the applicant(s).
- g. If the current documents verify he is a qualified alien as defined above, continue with these procedures.

2. Verify the date the alien entered the U.S.

A qualified alien who entered the U.S. before 8/22/96, and whose current alien status was granted after 8/22/96, may be able to provide a document (for example, a passport with an I-94 stamp) that shows that he was in an earlier status and the status was granted before 8/22/96. You must establish that he was continuously present in the U.S. until obtaining qualified alien status.

Potential sources of verification are tax returns, bills, rent receipts, or a letter from an employer. Any single absence from the U.S. of more than 30 days or a total of aggregate absences of more than 90 days should be considered to interrupt 'continuous presence.'

NOTE: "Continuous presence" is measured between the alien's last date of entry into the U.S. prior to 8/22/96 and the date qualified alien status is obtained. Therefore, if an alien entered the country on May 1, 1995, left on October 1, 1995, and returned on July 1, 1996, continuous presence is measured from July 1, 1996. The period between October 1, 1995, and July 1, 1996, is not counted as an absence.

If the individual is unable to provide a document, accept a written statement from a sponsor, family member, or as a last resort, the alien as verification. The statement must include when the alien entered the U.S., prior alien status, and the date that status was granted.

3. Determine whether the 5-year disqualification period applies or whether the qualified alien is exempt from the disqualification period. See [Figure 2](#).
4. Determine the appropriate citizenship/identity code 60-66 for refugee or alien status for immigrants. Refer to [EIS 4000, Codes Appendix](#).
5. Reverify alien status when the alien status is subject to change.

Examples of when alien status is subject to change include:

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- a. An individual admitted under a temporary status may change to lawful permanent resident status.
- b. An individual admitted under a temporary status that has expired may have updated his status.
- c. A refugee may change his alien status to lawful permanent resident status.
- d. An individual may meet the requirements as a battered alien or some other type of qualified alien status.
- e. An illegal alien may change to a legal status.

Note: This is not an all-inclusive list. There may be other times when an individual's alien status may change.

6. Reporting to USCIS

Individuals who apply for any Medicaid program or service are not subject to any USCIS reporting requirements and should not be reported to the USCIS.

Declining to provide documentation of alien status is not a valid reason for USCIS referral. The a/r who declines to present documentation of alien status or a SSN will only be able to receive emergency Medicaid, if otherwise eligible. Therefore, there is no reason to seek further verification of his alien status.

7. Confidentiality of Alien Status

All rules of confidentiality must be applied in regard to alien status. It is a breach of confidentiality to discuss the alien status of an individual with employers, landlords, etc.

F. Immigrants - Refugee Code, Date, Alien ID and Citizenship/Identity Codes

1. Enter a Refugee Code to designate the immigrant's country of origin, date the individual entered the United States or the date the individual was assigned the immigrant/refugee status as applicable and an Alien ID number for each immigrant whose citizenship/identity code is 60-66. Key only the numeric parts of the Alien ID. Do not key the alpha "A." Refer to [EIS 4000, Codes Appendix](#).

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2. For Lawful Permanent Residents (LPRs), other than Iraqi/Afghan Special Immigrants, key only citizenship/identity code 51. Alien ID and Refugee Codes, date the individual entered the United States or the date the individual was assigned the immigrant/refugee status are not required for LPRs. Refer to EIS Manual Section 4000, Codes Appendix.

G. Iraqi and Afghanistan Special Immigrants

The Department of Defense Appropriations Act, P.L. 111-118 signed into law on December 19, 2009, granted Iraqi and Afghan Special Immigrants (SIV's) eligibility for resettlement assistance, federal benefits, and entitlements for the same time period as refugees. Like refugees, Iraqi/Afghan SIV's are considered to be qualified aliens who are not subject to the 5-year bar, and they are no longer limited to an 8 month eligibility period following date of entry.

1. A Special Immigrant must meet all other Medicaid eligibility requirements. Follow all policy rules regarding eligibility, including the 3-month retroactive period. If he is found ineligible for Medicaid, he is automatically eligible to apply for Refugee Medical Assistance (RMA).
2. The Special Immigrant may apply for all Medicaid Programs/NCHC, including Medicaid for Pregnant Women (MPW). Automatic newborn coverage applies if the mother is authorized for Medicaid on the date of birth, or the mother is approved after the child's birth and Medicaid authorization is effective no later than the date of birth. Continuous eligibility does not apply for children who receive Medicaid/NCHC under Special Immigrant status.

NOTE: The individual may also apply for TANF benefits and/or Maintenance of Effort (MOE) funded public benefits as well as Refugee Cash Assistance (RRF).

3. Refer to [Figure 2](#) to determine Iraqi/Afghan Special Immigrant status of an individual. Refer to [EIS 4000, Codes Appendix](#) for citizen/identity code.

H. Trafficking Victims

A victim of a severe form of trafficking is an alien who has been forced into the international sex trade, prostitution, slavery and forced labor through coercion, threats of physical violence, psychological abuse, torture, and imprisonment.

An alien whose status as a trafficking victim has been verified with the Office of Refugee Resettlement (ORR) is potentially eligible for full Medicaid to the same extent as refugees. The five-year disqualification period does not apply.

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1. Verify and document the alien's status as a trafficking victim. ORR issues a certification letter for an adult who has been subjected to a severe form of trafficking and meets statutory certification requirements. In addition, ORR issues similar eligibility letters for children who have been found to be victims of a severe form of trafficking.

NOTE: Other agencies, such as the USCIS, may issue letters or other documents to victims of severe forms of trafficking. However, only the original ORR letter may be accepted as proof of certification. Do not require a victim of severe trafficking to provide any USCIS documentation.

2. To verify the status of trafficking victims:
 - a. Obtain the original certification letter for adults or eligibility letter for children issued by the ORR from the a/r. Place a copy of the letter in the file; **and**
 - b. Call the trafficking verification line at (202) 401-5510 to confirm the validity of the certification letter or eligibility letter for children and to inform ORR of the type of benefits for which the individual has applied.

NOTE: At this time, SAVE does not contain information about victims of severe forms of trafficking. Until further notice, do not contact SAVE concerning victims of severe forms of trafficking.

3. Contact the North Carolina State Refugee Office at (919) 733-7650 if you believe an adult or child may have been subjected to a severe form of trafficking and they have not applied for certification under the Trafficking Victims Protection Act

I. Battered Alien (Violence Against Women Act)

An alien who has been battered or subjected to extreme cruelty and meets the requirements below is considered a qualified alien. The battered alien must be the spouse, former spouse, widow, child, or parent of a child of a U.S. citizen or LPR alien.

NOTE: If a parent is a battered alien, his child who lives with him also meets the criteria as a battered alien. If a child is a battered alien, his parent who lives with him also meets the criteria as a battered alien as long as the parent did not actively participate in the battery or extreme cruelty.

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1. Battered aliens are potentially eligible for full Medicaid. The 5-year disqualification period applies if the battered alien was admitted on or after August 22, 1996. It does not apply to anyone who entered the U.S. before 8/22/96.
2. Verify and document the alien’s status as a battered alien. Refer to [Figure 2](#) and [Figure 3](#) for a list of documents and actions to take when an individual claims to be a battered alien and either has or does not have verification.
3. Verification of battered alien status consists of either an order granted by USCIS (such as an approval letter or prima facie determination) or a bona fide copy of a petition or application filed with USCIS or the Executive Office of Immigration Review (EOIR). EOIR is the office in the Department of Justice that oversees the Board of Immigration Appeals.
4. Confirm that:
 - a. USCIS or EOIR has either granted a petition of the applicant filed under the Violence Against Women Act (VAWA) or family-based petition, or
 - b. There is prima facie approval under the VAWA or a family-based petition.
5. Document the client’s current alien status in the case file.

NOTE: “Battered or subject to extreme cruelty” includes, but is not limited to, any act or threatened act of violence, including any forceful detention, which results or threatens to result in physical or mental injury. Psychological or sexual abuse or exploitation, including rape, molestation, incest (if the victim is a minor), or forced prostitution are considered acts of violence.

6. Verify that the alien or alien’s child has been battered or subject to extreme cruelty in the United States by a:
 - a. Spouse;
 - b. Parent of the alien; or
 - c. Member of the spouse’s or parent’s family residing in the same household.

“Member of the spouse or parent’s family” means any person related by blood, marriage, or adoption to the spouse or parent of the alien.

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7. Corroborate, if possible, the claim of abuse, and document the corroboration used:
 - a. If the alien has a pending or approved petition filed under VAWA, there is no need to request additional proof. The USCIS or EOIR has already made a determination that the alien or the alien's child has been battered and/or subject to extreme cruelty. There is no need to request additional proof to corroborate the claim of abuse.
 - b. If the alien has a pending or approved petition as a widow(er) of a U.S. citizen or petition for immediate relative status, attempt to corroborate the claim of abuse through one of the following documents:
 - (1) Reports or affidavits from police, judges and other court officials, medical personnel, school officials, clergy, Child Protective Services' staff, or counseling, or mental health personnel;
 - (2) Any legal documents that document the abuse (protection orders, police reports, etc.);
 - (3) Evidence that indicates that the alien sought safe haven in a shelter for battered individuals or similar refuge because of battery;
 - (4) Statements by other people knowledgeable of the applicant's circumstances; or
 - (5) Signed statement by the applicant.
8. In cases where an applicant's child has been battered, the applicant must submit his statement indicating that he did not actively participate in the battery or extreme cruelty.
9. A substantial connection between battery (or extreme cruelty) and the need for Medicaid must exist. Any of the following circumstances may be considered to determine whether a substantial connection exists:
 - a. To enable the individual to become self-sufficient following separation from the abuser;
 - b. To obtain medical attention or mental health counseling caused by abuse;
 - c. To provide medical care during a pregnancy resulting from the abuser's sexual assault or abuse of, or relationship with, the individual; or

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- d. To replace medical coverage and/or health care services lost when the individual separated from the abuser.

This list is not intended to be all-inclusive. There may be other circumstances that could be considered reasonable for determining that this requirement is met.

- 10. In order to be a qualified alien based on battery or extreme cruelty, the battered individual must no longer be physically residing in the same household as the individual responsible for the battery or extreme cruelty. (See below if the alien is still living with the batterer.) Accept any of the following as verification:
 - a. Reports or affidavits from police, judges or other court officials, medical personnel, school officials, clergy, Child Protective Services' staff, or counseling, or mental health personnel,
 - b. Signed statement from a staff member at a shelter for battered individuals or homeless persons,
 - c. Rental records or utility receipts in the battered alien's name,
 - d. School records,
 - e. Statement by family member, friend, or other person knowledgeable of the battered alien's circumstances; or
 - f. Signed statement by the battered alien.
- 11. If the battered individual resumes living with the batterer, he no longer meets the requirements as a battered alien beginning the month after the month in which they resume living together.
- 12. In cases where the a/r's child or the a/r's parent has been battered, the a/r and the battered individual must BOTH be residing in the same household apart from the batterer.

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13. Applicants who still reside with the batterer may need the assurance of the availability of benefits in order to leave their batterer and survive independently. If this is the case, complete the eligibility determination and allow the alien up to the 45th day processing deadline to verify that he has left the batterer. See I.10. above for potential sources of verification. If on the 45th day the applicant has not left, do not allow any exemption as a battered alien.

IV. Public Charge

Aliens who seek admission to the U.S. must establish that they will not become ‘public charges.’ Many aliens establish that they will not become public charges by having ‘sponsors’ who pledge to support them. See [MA-2262](#), Sponsor Deeming.

Aliens may ask staff about the consequences of becoming a public charge by applying for assistance. This is of concern to aliens who want to become a Legal Permanent Resident (obtaining a Green Card). A “public charge” is an alien who has become (for deportation purposes) or who is likely to become (for admission/adjustment purposes) **solely** dependent on government assistance as demonstrated by either:

- The receipt of public cash assistance for income maintenance (including Work First or SSI), or
- The institutionalization for long-term care at government expense (institutionalization for short periods of rehabilitation does not constitute primary dependence).

Refugees and persons granted asylum may receive any benefit, including Work First, without affecting their chances of becoming a Legal Permanent Resident (LPR) or a U.S. citizen.

NOTE: “Income Maintenance” does **not** include one-time cash payments for emergency assistance or Benefit Diversion. The receipt of public cash assistance for income maintenance for a child does **not** create a public charge problem for the parent **unless** that cash assistance is the only source of income for the family.

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Long term institutionalized care under Medicaid may result in a public charge determination; however, it does not include short-term rehabilitation stays in long-term care facilities. Being institutionalized for long-term care does not automatically make an individual inadmissible to the U.S., ineligible for legal permanent resident status, or deportable on public charge grounds. The law requires that USCIS officials consider several additional issues. Each determination is made on a case-by-case basis. The county is not involved in this determination. Determine eligibility for this person following all requirements in Medicaid.

V. Sponsor deeming

Legal permanent residents (LPR's) whose sponsor signed the I-864 Affidavit of Support are subject to alien sponsor deeming rules. See [MA-2262](#), Sponsor Deeming, for the policy and procedures on sponsor deeming.

VI. Verifying 40 qualifying Quarters

A. Definitions

Quarter -- A quarter means a period of three calendar months ending on March 31, June 30, September 30, or December 31 of any year. The quarters credited may be worked by the alien himself, the parent while the alien was under age 18, or by a spouse during the marriage if the alien remains married to the spouse or the marriage ended by the death of the spouse.

Any quarter of coverage, beginning after December 31, 1996, in which the alien or spouse or parent of the alien applicant received Work First, SSI, or Medicaid cannot be credited to the alien for purposes of meeting the 40-quarter requirement.

Quarter of Coverage (AC) --Credit for a requisite amount of covered earnings assigned a calendar quarter. This information is shown in IEVS.

Covered earnings --Wages or self-employment income that requires payment of FICA (social security) taxes.

QC History (QCH) --A display of Quarters of Coverage (QC's) by quarter and year. This displays in IEVS.

TPQY – Third Party Query in IEVS which is the system that will be used to request QC Histories.

Lag Quarters – Current year quarters and proceeding year quarters that may not appear in the QC history because SSA has not processed the employer report. This could be up to seven quarters depending on when a request for QC history is processed.

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B. Verification of Quarters of Coverage

If the a/r receives Food Stamps, you may use verification in the food stamp record. If the food stamp record shows that the a/r has met the 40 qualifying quarters requirement, no further verification is needed. If the food stamp record shows verification for less than 40 quarters, you must verify whether additional quarters have been worked since the food stamp verification was obtained.

Most quarters of employment will be verified through IEVS. Detailed instructions regarding the use of IEVS are found in the [EIS-1107](#), State Online Query/Third Party Query. As explained previously, the alien's work and work by his parents and /or spouses can all be combined to attain the 40 quarters required. The following steps are used in applying the 40 quarters of coverage provisions.

1. Determine who can be included in the quarter coverage count. Question the applicant to determine that proper relationships exist, the date of birth of the applicant, and request social security numbers for each individual included.
2. Determine if it is possible for the applicant to meet the requirement. Ask how many years the applicant and each of the individuals to be included in the quarter coverage calculation have lived in the U.S. The total number of years for all of the individuals must equal at least ten years (40 quarters). If the total is less than ten years, the applicant cannot meet the 40 quarters coverage requirement.
3. Determine how many years in the total from step 2 included earnings. Always determine the applicant's own quarters first. Many applicants may have sufficient quarters on their own record and it will not be necessary to request earnings history for other individuals. If verification of quarters for individuals other than the applicant is needed, a consent for Release of Information from each individual other than the applicant must be obtained or the applicant must obtain verification of coverage for the others.
4. Request a quarter coverage history using the 40 QC History query in IEVS when the interview shows:
 - a. The alien individual may meet the 40 quarter requirement with lag quarters.
 - b. The alien individual will not meet the 40 quarter requirement, but the alien still believes he meets the requirement.
 - c. Earnings by a qualifying parent, current or former spouse which must be verified.
5. Follow instructions in [EIS-1107](#), State Online Query/Third Party Query to access the QC History in IEVS.

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VII. Non-Qualified Aliens

An alien who does not meet the specific requirements of a qualified alien is a non-qualified alien for Medicaid purposes. A non-qualified alien who meets the N.C. residency requirement (living in N.C. with the intent to remain) and who meets all other Medicaid eligibility factors can receive Medicaid for emergency medical services only. **A non-qualified special alien pregnant woman or child under age 19 lawfully residing in the US, who meets N.C. residency requirements (living in N.C. with the intent to remain), and who meets all other eligibility requirements may receive full Medicaid. Refer to [Figure 2](#).**

A. Illegal (undocumented) alien

An illegal (undocumented) alien is:

1. An alien who entered the U.S. without knowledge of USCIS, or
2. A person lawfully admitted as a non-immigrant for a limited period of time, but violated the terms of the status or did not leave the U.S. when the period of time expired.

B. An alien admitted legally to the U.S., but he does not fall into one of the specific categories of qualified aliens listed in [Figure 2](#).

This includes individuals who have PRUCOL status and Legal Temporary Residents (LTR). This also includes individuals who are given temporary administrative statuses (i.e. stay of deportation, voluntary departure) until they can formalize permanent status, or individuals paroled for less than one year, or individuals under deportation procedures.

C. Procedures to Establish and Document Non-qualified Alien Status of A/R's

1. Ask the a/r alien his status with USCIS. Record in the case record the a/r's verbal statement of his status. For example, "unknown to USCIS" or "papers have expired."
2. If the a/r alien does not know his status, request any documentation he has from USCIS. If his documents indicate he may be a qualified alien, evaluate under **III** above.
3. The a/r alien does not have to:
 - a. Make a written declaration of alien status, or
 - b. Provide USCIS documentation.
4. The IMC does not have to verify non-qualified alien status through SAVE.

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5. Ask the alien whether he is a N.C. resident. This is a separate determination from his USCIS status. Refer to MA-2220, State Residence, to establish state residence.
6. Explain to the alien that if he meets all the eligibility requirements for this program, including disability if it is a disability application, he will only be eligible for Medicaid for the dates he received emergency medical services. Refer to **IX**.
7. Non-qualified aliens who are legally admitted must meet the enumeration requirement. Illegal aliens do not have to be enumerated. Refer to [MA-2450](#), Enumeration Procedures.

8. Reporting to USCIS

A/r's identified as illegally in the U.S. because they are applying for Medicaid/NCHC are not subject to any USCIS reporting requirements and should not be reported to the USCIS. Also, persons who apply for benefits on behalf of others (for example, an ineligible mother applying for her eligible child) are not subject to any USCIS reporting requirements themselves.

Declining to provide documentation of immigration status is not a valid reason for USCIS referral. The a/r who declines to present documentation of alien status or a SSN will only be able to receive emergency Medicaid, if otherwise eligible. Therefore, there is no reason to seek further verification of their alien status.

9. Confidentiality of Alien Status

All rules of confidentiality must be applied in regard to alien status. It is a breach of confidentiality to discuss the alien status of an individual with employers, landlords, etc.

Note: To determine if an applicant is a qualified alien refer to III. If the alien is a pregnant woman or child under age 19, refer to MA-2504 Figure 2 to see if the individual's specific immigration status makes him/her eligible for full Medicaid.

D. Non-immigrants (temporary residents)

Non-immigrants may be legally admitted to the U.S., but only for a temporary or specified period of time. These aliens are INELIGIBLE for full Medicaid or emergency medical services because they do not meet the N.C. residency requirement unless they are admitted for employment purposes. Refer to [MA-2220](#), State Residence.

An alien admitted for a limited period of time who does not leave the U.S. when the period of time expires becomes an illegal alien. If he then establishes N.C. residency, he may be eligible for emergency Medicaid only. Refer to MA-2220, State Residence, for procedures for establishing state residency.

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Examples of legal non-immigrants include, but are not limited to, the following:

1. Foreign government representatives on official business and their families and servants,
2. Visitors for business or pleasure, including exchange visitors,
3. Aliens in travel status while traveling directly through the U.S.,
4. Crewmen on shore leave,
5. Treaty traders and investors and their families,
6. Foreign students,
7. International organization representatives and personnel and their families and servants,
8. Temporary workers including agricultural contract workers, and
9. Members of foreign press, radio, film, or other information media and their families.

VIII. Pregnant Women and Children Under Age 19 Lawfully Residing in the US

A. Qualified Alien Lawfully Residing in the US

Qualified alien children under the age of 19 lawfully residing in the United States, and qualified alien pregnant women lawfully residing in the United States are exempt from the 5-year mandatory disqualification period and may receive full Medicaid if otherwise eligible. Refer to III.E for procedures to verify and document qualified alien status and EIS 4000 Codes Appendix for citizenship/identity codes for refugees or other immigrants. See Figure 2.

B. Special Aliens Lawfully Residing in the US

Other wise eligible special aliens lawfully residing in the US who are under the age of 19 or other wise eligible pregnant women who are special aliens lawfully residing in the US may receive full Medicaid. These special aliens include, but are not limited to, specified Amnesty beneficiaries, specified Family Unity beneficiaries, specified individuals under Deferred Enforced Departure, and specified special non-immigrant classifications. Refer to [Figure 2](#) for individuals included under the 12 categories of the special alien classification.

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C. Procedures to Authorize Qualified Alien or Special Alien Pregnant Women Lawfully Residing in the US

When authorizing otherwise eligible pregnant woman who fall into this category of qualified aliens for whom the 5 year bar does not apply or special aliens, an Individual Special Use Code is required.

1. Enter into EIS on the DSS-8125 an Individual Special Use Code of P1, P2, P3, P4, P5, P6, with a begin date and an end date to identify pregnant women who fall into this category of qualified aliens for whom the 5 year bar does not apply and/or special aliens. The dates indicate the time period the exemption applies.
 - a. The Individual Special Use Code of P1 – P6 identifies the individual is pregnant and the pregnancy is the 1st – 6th pregnancy covered by Medicaid during the exempt period.
 - b. The begin date is the first month of the individual’s eligibility. The date is entered in mmccyy format.
 - c. The end date is the month the individual’s post partum period ends. The date is entered in mmccyy format.

For example, the individual applies August 10, 2010. She is exempt from the 5 year bar. This is her first pregnancy covered by Medicaid during the 5 year bar exempt period. Her Individual Special Use Code is P1 with a begin date of 082010 and an end date of 062011. The individual applies again in June 2013. This is her second pregnancy covered by Medicaid during the 5 year bar exempt period and her Individual Special Use Code is P2 with a begin date of 062013 and an end date of 052014.

2. Once the woman is no longer pregnant and her post partum period ends, or if the pregnancy ends due to miscarriage:
 - a. A qualified alien woman is no longer exempt from the 5 year bar because she is no longer a pregnant woman.
 - (1) If the pregnancy or post partum period ends within the 5 year disqualification (bar) period, the recipient is no longer eligible for Medicaid. Terminate the case.
 - (2) If the pregnancy or post partum period ends beyond the 5 year disqualification (bar) period, evaluate for eligibility in all other programs.

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- b. A special alien woman is no longer eligible because she is no longer a pregnant woman. Terminate the case. These individuals are eligible for Medicaid for emergency medical services only as a non qualified alien.

D. Procedures to Authorize Qualified Alien or Special Alien Children Under Age 19 Lawfully Residing in the US

When authorizing otherwise eligible children under age 19 who fall into this category of qualified aliens for whom the 5 year bar does not apply or special aliens, an Individual Special Use Code is required.

1. Enter into EIS on the DSS-8125 an Individual Special Use Code of CH with a begin date and an end date to identify children under age 19 who fall into this category of qualified aliens for whom the 5 year bar does not apply and/or special aliens. The dates indicate the time period the exemption applies.
 - a. The begin date is the first month of the individual’s eligibility. The date is entered in mmccyy format.
 - b. The end date is the month the individual turns 19. The date is entered in mmccyy format.
2. Once the child turns age 19:
 - a. A qualified child is no longer exempt from the 5 year bar because he/she is no longer under age 19.
 - (1) If the child turns 19 with in the 5 year disqualification (bar) period, the recipient is no longer eligible for Medicaid. Terminate the case.
 - (2) If the child turns 19 beyond the 5 year disqualification (bar) period, evaluate for eligibility in all other programs.
 - b. A special alien child who turns is no longer eligible because he/she is no longer a child under age 19. Terminate the case. These individuals are eligible for Medicaid for emergency medical services only as a non qualified alien.

E. Identifying Recipients that have Individual Special Used Codes

A NCXPTR report titled “DHRWDB 5 YEAR BAN LIFTED” is available to identify recipients (active and inactive) in EIS that have Individual Special Use Codes of P1- P6 and CH. This report is cumulative and list all individuals with these codes as well as begin and end dates.

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IX. COVERAGE FOR EMERGENCY MEDICAL SERVICES

A. Principle

1. Non-qualified aliens are eligible for Medicaid for emergency medical services only. Also, qualified aliens during the 5-year disqualification period are eligible for Medicaid for emergency medical services only.
2. Evaluate the applicant who does not have citizenship and identity documentation after the 6 month pending period for emergency medical services if he states he has had an emergency.
3. This means the applicant who does not provide citizenship/identity documentation, the qualified alien who is not eligible for full coverage during the 5 year period from date of entry, and the non-qualified alien can only be authorized for Medicaid for the actual days he received an emergency medical service. An emergency medical service is defined in B.
4. The county departments of social services (DSS) determine the dates of coverage when the emergency service is labor and regular delivery or Caesarean delivery. The Carolinas Center for Medical Excellence (CCME) determines for the Division of Medical Assistance (DMA) the dates of coverage for all other emergency services, including miscarriages and other pregnancy terminations.

Medicaid may not be authorized until after the emergency service has occurred. Follow procedures in this section to determine whether a non-qualified alien or qualified alien with a 5-year disqualification period is authorized for Medicaid and the dates of coverage.

B. Definition of Emergency Services

1. Labor and delivery, including delivery by Caesarean section, or

NOTE: For miscarriages and pregnancy terminations, follow procedures in D. to determine if and when an emergency existed.
2. Treatment after the sudden onset of 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:
 - a. Placing the patient's health in serious jeopardy, or
 - b. Serious impairment to bodily functions, or
 - c. Serious dysfunction of any bodily organ or part.

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NOTE: Once the medical condition is stabilized, even if it remains serious or results in death, it is no longer an emergency.

C. Procedures to Establish Authorization Dates for Labor and Delivery, including Delivery by Caesarean Section

1. When the IMC is notified that labor and delivery or a Caesarean section has occurred:
 - a. Contact the hospital and obtain information regarding the day of admission and delivery, and
 - b. Document the record with the information obtained from the hospital.
2. Vaginal Deliveries
 - a. Authorize one day if the day of admission and the day of delivery are the same day. Authorize one postpartum day. (2 total days)
 - b. Authorize two days if the day of admission and the day of delivery are consecutive days. Authorize one postpartum day. (3 total days)

Authorize one day if the day of admission and the day of delivery are **not** the same day and are not consecutive, authorize the day of delivery. Authorize one postpartum day. (2 total days)
3. Caesarean Section --Authorize a Caesarean section delivery for a maximum of 5 days beginning with the day the section is performed, i.e. day of Caesarean section plus 4 days maximum.
4. Determine other eligibility factors, including state residence. When all other eligibility requirements have been met, process the case as open/shut M-PW using the appropriate classification code according to EIS instructions.

NOTE: Regular delivery and Caesarean section do not include prenatal care, postpartum care, or the 60 days continuation period.
5. If the pregnant woman alleges other emergency medical services relating to her pregnancy, the days must be approved by DMA through The Carolinas Center for Medical Excellence (CCME). Follow instructions below.
6. If the due date is not within the 45 day processing period or the pregnant woman has not delivered by the 45th day, deny the application.

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D. Procedures to Establish Authorization Dates for Other Emergency Medical Services

IT IS VERY IMPORTANT TO FOLLOW THESE PROCEDURES TO ASSURE CCME HAS THE MEDICAL INFORMATION REQUIRED TO DETERMINE EMERGENCY STATUS OF A NON QUALIFIED ALIEN

1. If the applicant does not allege an emergency service, deny the application.
2. For an applicant eligible only under the Medicaid for the Disabled Program and disability is not established, follow instructions in [MA-2525](#), Disability, in the Aged, Blind, and Disabled Medicaid Manual, to determine disability. The determination of emergency medical treatment by CCME is a separate determination from the disability determination made by Disability Determination Services (DDS). Continue to process the application while awaiting a disability decision or approval of emergency dates from CCME.
3. Approval or denial of date(s) of emergency medical services is made by The Carolinas Center for Medical Excellence (CCME) for the Division of Medical Assistance (DMA), and is based on medical evidence submitted by the IMC.
4. When the request is for approval of an inpatient hospital admission, the following medical evidence is required:
 - a. Physician's order sheets,
 - b. Physician's progress notes,
 - c. Admitting history and physical,
 - d. Death summary, discharge summary, or interim summary:

However, if a discharge summary or interim summary is not readily available, send information in. The reviewer will determine if it is needed.

If the applicant has been hospitalized more than 60 days, the attending physician may submit an "interim summary" in lieu of the official discharge summary.

 - (1) It must be clearly marked as "interim."
 - (2) The decision rendered will cover only the admission date through the interim summary cut-off date.
5. When the request is for approval for an emergency room, clinic, or doctor's office visit (there is no inpatient hospitalization), the following medical evidence is required:
 - a. Entire medical record for the date requested, and

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- b. Statement indicating "Emergency Room [or Clinic/Doctor's Office] Record Only - No Other Documentation."
6. Request the required evidence from the appropriate provider using [Figure 6A](#).
7. **The county must review information submitted by the hospital, clinic, and doctor. Ensure that the information received includes all required information for the dates requested. Check to see if the copies are legible. Faxed copies may not be clear. Ensure that the medical records received from the provider belong to the applicant. Do not send to CCME unless all necessary information is included for all dates requested.**
8. When it is verified that all the necessary information has been received, attach it to the completed [Figure 7](#), and forward the medical records by CD, DVD, paper, or fax to The Carolinas Center for Medical Excellence (CCME). :

CCME
100 Regency Forest Drive
Suite 200
Cary, NC. 27518-8598
ATTN: Alien Emergency Services Review
Fax: (866) 932-5926

When completing [Figure 7](#):

- Please type or print legibly.
- Fill form out completely with specific dates requested.
- Include the Medicaid Identification Number (MID) for the applicant the review is for (patient). This may be different from the case head. (e.g. A child is the patient but the mother is the case head. Use the child's MID number.)
- Include a county contact person, contact phone, fax number and e-mail address.
- Provide complete review dates. If it is for a period of time, provide a beginning date and an ending date to be reviewed.
- Do not request a review for dates that have previously been reviewed unless a hearing decision requires the re-submittal for a new decision.
- Do not request a review for labor and delivery unless the days exceed the number allowed per XIII.C. above.
- Submit medical records for each day being requested. Bills are not needed. Do not send medical records for dates you did not list on Figure 7.

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9. Information Submitted to CCME
 - a. If during the initial review, CCME determines that the information attached to Figure 7 is incomplete or inaccurate, the entire package will be returned to the county DSS indicating what is missing or inaccurate on [Figure 6B](#).
 - (1) Request the missing, or correct information from the provider. Write on [Figure 6A](#): "Additional Request for Information" and note items that are needed.
 - (2) Upon receipt of the missing, or correct information, re-submit the entire package to CCME as soon as possible.
 - b. If during the medical review, CCME determines that additional information is needed Figure 6B noting what is needed will be faxed to the county.
 - (1) Request the additional information from the provider. Write on [Figure 6A](#): "Additional Request for Information" and note items that are needed.
 - (2) Upon receipt of the additional information, send the information and Figure 6B to CCME as soon as possible.
10. When the provider states on the request that there is no additional information in the record, write on Figure 7 or Figure 6B "No additional information can be obtained," and re-submit to CCME. This applies to this additional request only.
11. When the county DSS forwards the information to CCME for a decision regarding a request for emergency services, the county DSS will receive from CCME an acknowledgement of receipt. If acknowledgement is not received within 14 calendar days, call CCME at 1-800-682-2650.
12. Do NOT have the hospital or other medical provider send the information directly to CCME. Submission of all information goes through the county DSS.
13. When sending information requested by CCME, do not send a new [Figure 7](#). When a second one is completed and returned with the requested information, it appears to be a new request and can slow the review process.
14. When the required medical evidence has not been received from the provider or you have not received a decision from CCME by the 45th day, deny the application for missing information following procedures in [MA-2304](#), Processing the Application. However, if it is a MAD-90 application and disability is not established, continue to pend the application until you receive the disability determination or 6 months, whichever comes first.

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15. If you receive notification from CCME that date(s) have been approved as an emergency after you have denied the application, reopen following instructions in MA-2304, Processing the Application. Ensure the applicant meets all other eligibility requirements.

E. Approval and Authorization in EIS

1. The Carolinas Center for Medical Excellence (CCME) will transmit the determination for emergency coverage with the dates of approval/denial indicated to the appropriate county DSS as a password protected attachment to an e-mail or via secure fax, depending on the capabilities and preferences of each county DSS office. Upon receipt, take appropriate action immediately.
2. The completed and signed Figure 7 is mailed to the appropriate DSS within a week of CCME's faxed decision. The medical records are NOT returned.
3. Determine other eligibility factors, including establishing disability and/or state residence. When all other eligibility requirements have been met, process the case as open/shut in the appropriate aid program/category and the appropriate classification code. Refer to EIS instructions.
 4. Authorize only the dates approved by CCME. If multiple dates in a month are approved, but they are not consecutive, contact the EIS unit for assistance in keying.

NOTE: Inappropriate Medicaid authorization for this group of aliens will result in claims being charged to the county DSS.

5. If no days are approved by CCME, deny the application.

F. Procedures to Establish Authorization Dates for Ongoing Hemodialysis

1. Follow procedures in D. and E. for the initial determination of emergency services for hemodialysis.
2. Once it is determined that the individual is eligible for hemodialysis, CCME issues a blanket approval by stating "...all on-going hemodialysis ..." on the faxed decision and [Figure 7](#) you receive. For future applications for this individual, do not submit medical information for hemodialysis. The individual meets the emergency service's criteria for each hemodialysis treatment. The approval of emergency services for hemodialysis is indefinite
3. Verify with the provider of hemodialysis the dates that the applicant received dialysis in the retroactive months and in the month of application.

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4. Include in the approval letter the dates approved. Remind the individual when he needs to apply again by giving the month in which he next needs to apply.
5. Notify the applicant to reapply at least every four months. Each application is for the month of application and three months of retroactive coverage. After the initial application, further applications are administrative.
6. Do not issue Medicaid cards. Inform the client that NO Medicaid cards will be issued.
7. Because there are so many dates that a patient with renal disease must have dialysis, and because MMIS can accommodate only so much data before it begins to “drop” eligible dates, be conscientious to handle these cases timely.
8. To authorize multiple dates in months that are not consecutive, contact the EIS Unit at 919-855-4000 for assistance.

NOTE: Inappropriate Medicaid authorization for this group of aliens will result in claims being charged to the county DSS.

- a. Emergencies other than hemodialysis must be handled as any other request for emergency services, including a situation connected with the dialysis that results in a hospitalization or other need for emergency services.

NOTE: This procedure does not apply to peritoneal dialysis. Follow instructions in D. and E. for each application that includes peritoneal dialysis.

X. PROCEDURES TO OBTAIN USCIS VERIFICATION

The IMC must verify the alien status for all qualified aliens through the Systematic Alien Verification for Entitlements (SAVE) Program. This requirement does not apply to non-qualified aliens.

A. Initial Verification Procedures

The U.S. Department of Homeland Security Systematic Alien Verification for Entitlements (SAVE) system is used for verifying the status of an alien in order to determine eligibility for Medicaid. This web-based system is used to verify the authenticity of the alien's USCIS documents, the date of admission, and his current immigration status. This is the primary automated procedure for verifying alien status. Instructions for accessing and using this web-based system are found in [EIS 1108](#), SAVE Verification Information System.

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B. Secondary Verification Procedures: Form G-845S and G-845 Supplement

1. Require secondary verification using Form G-845S ([Figure 8](#)) and G-845 Supplement ([Figure 9](#)) any time:
 - a. A document appears to be counterfeit or altered. Characteristics of suspect documentation include photograph substitution and ink discoloration.
 - b. A non-citizen presents unfamiliar documentation, or a document that indicates immigration status, but does not contain an A-number.
 - c. A non-citizen presents immigration documentation with an A-number in the 60,000,000 or 80,000,000 series.
 - d. The non-citizen has no immigration documentation and is hospitalized, medically disabled, or who can otherwise show good cause for his inability to present documentation. Good cause may be defined as hospitalized or disabled as shown by receipt of Social Security benefits.
 - e. The non-citizen presents a foreign passport and/or Form I-94 and the “Admission for Permanent Residence” endorsement is more than 1 year old.
2. Obtaining Secondary Verification
 - a. To initiate secondary verification, complete and mail form G-845S (Figure 8) and G-845 Supplement (Figure 9) to USCIS with fully readable photocopies of original immigration documents.
 - b. Complete a separate G-845S and G-845 Supplement for each alien requesting Medicaid. Attach a photocopy of all applicable printed pages of each piece of immigration documentation presented for that person only. If a family unit has applied for a benefit, each a.u. member with alien status will require a separate G-845S and G-845 Supplement.
 - A G-845S and G-845 Supplement sent to USCIS without photocopies showing front and back of original documents will be returned without a status determination.
 - Although a USCIS document is all the identification required to complete the secondary verification process, the attachments should include identification bearing a photograph of the a/r whenever possible. If the alien has presented another pertinent document, such as a marriage record or court order, it should be included as well. Examples of USCIS documentation must be returned to the alien a/r.

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- c. Retain a copy of every alien a/r's immigration documentation in his file. Return the original documentation to the alien.

3. Completing Form G-845S (Figure 8)

Complete the G-845S as fully as possible. It is essential that the form contain enough information to identify the alien. Complete the G-845S as follows:

- a. Alien Registration or I-94 Number:

- Enter the A-Number as the letter "A" followed by a series of seven or eight digits.
- Include the Admission Number if available. The Admission Number is found on Form I-94 and in the Alternate ID field.

- b. Applicant's Name: Enter last, first, and middle names of the a/r. If user documentation indicates more than one variation of the name, enter all versions.

- c. Nationality: Enter the foreign nation or country to which the applicant owes legal allegiance. This is normally, but not always, the country of birth.

- d. Date of Birth: Enter the birth date using the format MM/DD/CCYY. If the complete date of birth is not known, give available information.

- e. Social Security Number: Enter the alien's nine-digit Social Security Number, if known. Copy the number directly from the alien's Social Security Card whenever possible.

- f. Verification Number: Enter the Verification Number assigned during the automated query, if applicable.

- g. Photocopy of Document Attached/Other Information Attached: Indicate that USCIS documentation is attached by checking the top box. Use the bottom box if other information has been included in support or in lieu of USCIS documents.

- h. Benefit/Your Case Number: Mark the blocks showing the entitlement benefit program(s) for which this alien has applied. Show applicable county case numbers for the appropriate block.

- i. The submitting IMC should provide his name, title, telephone number, and the current date. The name and address of the DSS should be typed or stamped in the block labeled "From."

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4. Completing Form G-845 Supplement ([figure 9](#))

The G-845 Supplement may only be used in conjunction with the G-845S, not separately. It should also be completed as fully as possible. The following information should be provided on the G-845 Supplement:

- Non-citizen applicant's last, first, and middle name;
- Social Security Number (if available);
- Alien Registration Number (A-Number) and/or I-94 Number;
- Typed or stamped name and address of submitting agency;
- Current date;

- Submitting agency's telephone number.

You must indicate what status information is required from USCIS by checking off the appropriate numbered blocks in the "Complete the following items:" section on the top portion of the Form G-845 Supplement. It is very important that you complete this section, so that USCIS can provide all appropriate USCIS status information required to make a determination regarding the applicant's eligibility for benefits. The following USCIS information can be obtained by submitting the G-845 Supplement:

- a. immigration status;
- b. date alien entered the United States;
- c. date status was granted;
- d. date status expires;
- e. citizen status;
- f. special benefit provisions for certain victims of abuse; and
- g. affidavit of support.

5. Mailing Form G-845S and G-845 Supplement to USCIS

- a. Copies of USCIS documentation should be stapled to the G-845S and G-845 Supplement with a single staple in the upper left-hand corner. The form(s) and documents should then be folded and placed in a window envelope so that the block labeled "To" will appear in the address area. More than one G-845S and G-845 Supplement may be mailed in a single envelope; however, USCIS discourages collecting forms over an extended period of time in order to mail them in bulk.

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- b. Mail the document verification requests to the USCIS office listed below. Additional supplies of the G-845S and G-845 Supplement may be ordered through the USCIS Forms Request Line: 1-800-870-3676 (Due to the high volume of calls to this line, the best time to call is early mornings.); however, users may duplicate the blank Form G-845S ([Figure 8](#)) and G-845 Supplement ([Figure 9](#)) to meet immediate needs.

U.S. Citizenship and Immigration Services
10 Fountain Plaza, 3rd Floor
Buffalo, NY 14202
Attention: Immigration Status Verification Unit

6. G-845S Response From USCIS

- a. The Immigration Status Verifiers (ISV) at the USCIS will research the alien's records in USCIS files, complete the response portion of Form G-845S, and return both the form and the attached photocopies to the DSS within ten working days of receipt by the USCIS Office.
- b. The G-845S is a self-reply form. The ISV will check all appropriate statements on the lower half and the back of the form to indicate the a/r's immigration status and work eligibility.
- c. Statements on the front of the form are interpreted as follows:

- (1) This document appears valid and relates to a **Lawful Permanent Resident alien** of the United States: Checked where the documentation submitted is determined to be a valid I-551, I-181, or I-94, with the notation "Processed for I-551, Temporary Evidence of Lawful Admission for Permanent Residence." Immigration law allows this person to live and work in the U. S. on a permanent basis. The term "temporary" used here refers to documentary evidence. It does not mean the immigration status itself is temporary.

This person is a qualified alien. The IMC must determine whether the alien is under the five-year disqualification period.

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(IX.B.6.c.)

- (2) This document appears valid and relates to a **Conditional Resident alien** of the United States: Checked when the documentation submitted is determined to be a valid I-551, I-181, or I-94 stamped with the notation "Processed for I-551, Temporary Evidence of Lawful Admission for Permanent Residence." Under the law, this person is allowed to live and work in the U.S.; however, USCIS will re-evaluate his status within two years. Conditional resident alien status normally is granted to aliens that marry U.S. citizens or nationals, or permanent resident aliens.

This individual is ineligible for full Medicaid coverage unless he has a valid I-551 showing he is admitted as an LPR and has met the disqualification period.

- (3) This document appears valid and relates to an alien **authorized employment** as indicated below: Checked to indicate whether the authorization covers full time or part-time employment and when, if applicable, the period of employment will expire. "Indefinite" will be indicated if there is no specific expiration date for employment eligibility. This individual is not a qualified alien.
- (4) This document appears valid and relates to an alien who has an application pending for: Checked when an alien is pending a new immigration status or change of status is pending, the appropriate block indicating the current status also will be checked. This individual is not a qualified alien.
- (5) This document relates to an alien having been granted **asylum/refugee** status in United States: Checked when an alien has been granted asylee or refugee status in the U.S. because of persecution or a well-founded fear of persecution in his country of nationality. Documentation presented may include Form I-94, stamped with "Section 207-Refugee" or "Section 208 - Asylee," or a Form I-571. This individual is a qualified alien.

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- (6) This document appears valid and relates to an alien **paroled** into the United States pursuant to Section 212 of the I&N Act: Checked for an alien allowed to enter the United States under emergency conditions or when his entry has been determined to be in the public interest. This status is temporary. Documentation presented may include Form I-94, stamped with "Section 212(d)(5) - Parolee." This individual is a qualified alien if the record shows he has been paroled for the duration of at least one year. You must determine whether the alien is under the five-year disqualification period.
- (7) This document appears valid and relates to an alien who is a **Cuban/Haitian entrant**: Checked for Cubans who entered the United States between April 15, 1980, and October 10, 1980, and Haitians who entered the country before January 1, 1981. Documentation presented may include Form I-94, stamped "Cuban/Haitian Entrant." This status is covered by section 502(e) of I&N Act. This individual is a qualified alien.
- (8) This document appears valid and relates to an alien who is a **conditional entrant**: Checked to indicate a refugee who entered the United States or adjusted his status to lawful permanent resident alien under the seventh preference category of Public Law 89-236. Documentation presented may include Form I-94, stamped with "Section 203(a)(7)." This status was defined by section 203(a)(7) of I&N Act, but was abolished by the Refugee Act of 1980. This individual is a qualified alien.
- (9) This document appears valid and relates to an alien who is a **non-immigrant**: Checked to indicate an alien who is temporarily in the U.S. for a specific purpose. This category includes students, visitors, and foreign government officials. Documentation presented may include Form I-94. This individual is not a qualified alien.
- (10) This document appears valid and relates to an alien **not authorized employment** in the United States: Checked when an alien's status prohibits employment in the United States. Several immigration statuses do not allow gainful employment. This individual is not a qualified alien.

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- (11) Continue to process as legal alien. USCIS is searching indices for further information: Checked if USCIS will withhold judgment regarding the status or validity of documentation pending further investigation. This statement does not imply that the applicant is an illegal alien or the holder of fraudulent documentation. Benefits should not be denied on the basis of this statement. The alien should be presumed legal until USCIS sends a final notification regarding immigration status. This individual is not a qualified alien.
 - (12) This document is **not valid** because it appears to be: Checked for expired documentation or when an item appears to be counterfeit or altered. The ISV will use the back of Form G-845S to elaborate on this entry. When the entries for counterfeit or altered documents are checked, the DSS should follow its own guidelines for investigating and prosecuting cases of fraudulent documentation. This individual is not a qualified alien.
- d. The "Comments" block on the second page is used to give the IMC further instructions. It includes the following statements:
- (1) No determination can be made from the information submitted. Please obtain a copy of the **original** alien registration documentation and resubmit. This individual is not a qualified alien unless additional documentation is received and verified.
 - (2) No determination can be made without seeing **both** sides of the document submitted: Resubmit the G-845S with copies of all sides of each document. This individual is not a qualified alien.
 - (3) Copy of document is not readable: Resubmit the G-845S with higher quality copies of the original alien documentation. This individual is not a qualified alien.
 - (4) Items 16 and 17 on the G-845S are designed to assist benefit issuing agencies and institutions in determining when an alien applicant is permanently residing in the United States under color of law (PRUCOL). This information is only provided to the Social Security Administration. Any additional comments will be included in item 18. This individual is not a qualified alien.
- e. ISV will initial and stamp the front of the form in the block labeled "USCIS Stamp."

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7. G-845S Supplement Response From USCIS

Following is an explanation of the USCIS information that will be returned on the G-845 Supplement.

- a. **Immigration Status.** The USCIS will provide the non-citizen applicant's current immigration status by conducting a thorough search of USCIS automated databases and paper files.
- b. **Date alien entered the United States.** The USCIS will provide the original date the non-citizen applicant entered the United States. (This date is not always the same as what is provided through the SAVE Verification Information System. It may be different if a non-citizen adjusts his immigration status. In most cases, the date of entry changes in SAVE Verification Information System to reflect the date the non-citizen obtained his Lawful Permanent Resident status.)
- c. **Date status was granted.** The USCIS will provide the date the non-citizen obtained his current immigration status as noted in paragraph a. above.
- d. **Date status expires.** The USCIS will provide the date the non-citizen's immigration status expires. If the non-citizen's immigration status is indefinite, USCIS will provide this information in the response.
- e. **Citizen status.** The USCIS will confirm whether a prior non-citizen is naturalized and is a United States citizen.
- f. **Special Benefit Provision for Certain Victims of Abuse.** The USCIS will confirm whether or not a non-citizen obtained his Lawful Permanent (or Conditional) Resident status because he was a battered alien or a parent of a battered child or a victim of domestic violence.
- g. **Affidavit of Support.** The USCIS will confirm whether or not the non-citizen was sponsored on Form I-864, Affidavit of Support, and if so, USCIS will provide sponsorship information.

The ISV will initial and stamp the back of the form in the block labeled "Stamp."

8. When the G-845S and G-845 Supplement are returned, the IMC must refer to Medicaid eligibility requirements and [Figure 2](#) to determine whether the a/r qualifies for Medicaid and the level of coverage.