

DMA ADMINISTRATIVE LETTER NO: 11-08, GUIDANCE REGARDING IMMIGRATION STATUS, UNDOCUMENTED IMMIGRANTS WITH MULTIPLE NAMES AND SOCIAL SECURITY NUMBERS

DATE: August 27, 2008

SUBJECT: Guidance Regarding Immigration Status, Undocumented Immigrants with Multiple Names and Social Security Numbers

DISTRIBUTION: County Directors of Social Services
All Medicaid Eligibility Staff

I. BACKGROUND

The purpose of this letter is to provide policy clarification to county departments of social services (DSS) on the procedures for addressing the use of multiple names and/or social security numbers based on citizenship and immigration status when applying for Medicaid. Regulations which support this administrative letter can be found in the Aged, Blind, and Disabled and the Family and Children's Medicaid Eligibility Policy Manual (MA-3330/2504, Citizen/Alien Requirements) and in state and federal laws, including the Code of Federal Regulations (42 CFR Chapter IV., sections 431.306, 435.350, 435.407, 435.910) and the North Carolina Administrative Code (10A NCAC 21A.0403).

II. POLICY PROCEDURES

It is the responsibility of the DSS to determine Medicaid eligibility for all applicants and recipients. Undocumented aliens or qualified aliens who have been in the country less than five years are eligible for Medicaid to cover emergency medical services if they meet all eligibility requirements other than citizenship.

A. Duplicate Names and/or Social Security Numbers

During the course of the interview/application process, it may be disclosed that alternative names and/or social security numbers are being used for employment purposes. The applicant/recipient (a/r) and all responsible persons are required to report all income available to the budget unit. An individual is required to provide all Social Security numbers they have used. Medicaid policy requires that the agency include income and resources of all individuals in the budget unit regardless of their citizenship or immigration status. The agency has a responsibility to pursue all verification of income under all names and social

security numbers provided during the application/review process. The methods used to calculate benefits must be based upon data that will yield the most accurate financial information for determination of benefits.

B. Reporting of Illegal Presence in the United States

Individuals who apply for Medicaid to cover emergency medical services are not subject to any USCIS reporting requirements and should not be reported to the USCIS. These are non-qualified aliens and status is not verified using Systematic Alien Verification Entitlement (SAVE).

Qualified status is verified using SAVE. When an a/r states he has a legal presence in the U.S., the individual should provide documents that show his current immigration status. The information returned from a SAVE inquiry should verify what is shown on the document the individual provided to the county. (See MA-3330/2504, Citizen/Alien Requirements, XII.)

If the document cannot be verified, a Secondary Verification is required from the SAVE system. If the Secondary Verification is returned stating the document appears false, the immigration status cannot be determined. The individual is considered an unqualified immigrant and is eligible only to apply for emergency Medicaid benefits.

The SAVE response may indicate no record for an individual or an immigration status that makes the individual ineligible for Medicaid benefits as a qualified alien. This response is not considered evidence that an individual is in the United States illegally and is used only to determine potential eligibility for full or emergency Medicaid coverage.

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. Documents can only be released with permission of the a/r or with a court issued subpoena requesting specific information and signed by a judge.

C. Program Integrity Referrals

Referrals to local program integrity units must be completed only if an individual has willfully and knowingly misstated, provided incorrect or misleading information to obtain or attempt to obtain benefits for which the individual is not eligible. Reporting income, whether earned under the individual's or another person's name, is not a basis for a referral.

III. EFFECTIVE DATE AND IMPLEMENTATION

This policy is effective upon receipt.

If you have any questions regarding this information, please contact your Medicaid Program Representative. For any other issues that are not able to be handled through that venue, Mrs. Angela Floyd, Assistant Director for Recipient and Provider Services, will be your point of contact and can be reached at (919) 855-4000.

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Acting Director

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