# Health Programs for Immigrants in Washington State as of 7-1-20

### **Introductory Notes**

The state and federal health coverage programs listed here have no or limited immigration status requirements. They consist of programs operated by the state Health Care Authority (HCA), the Washington Health Benefit Exchange, and smaller programs in other agencies.

HCA programs listed here are ones that do not require individuals to be citizens or "qualified" immigrants. See WAC 182-503-0535(1) for the definition of "qualified." Certain qualified immigrants including Lawful Permanent Residents are subject to a 5-year bar before they can qualify for federal Medicaid; limited exemptions are listed in subsection (3). "Nonqualified" immigrants and those within the 5-year bar may qualify for programs below.

HCA has a Citizenship and Alien Status Guide that lists some, but not all, of these programs: <a href="https://www.hca.wa.gov/assets/free-or-low-cost/citizenship\_alien\_status\_guide.pdf">https://www.hca.wa.gov/assets/free-or-low-cost/citizenship\_alien\_status\_guide.pdf</a>

Financial standards for HCA health coverage programs: HCA Income and Resource Standards charts are available through a link on this page: <a href="http://www.hca.wa.gov/free-or-low-cost-health-care/program-administration/program-standard-income-and-resources">http://www.hca.wa.gov/free-or-low-cost-health-care/program-administration/program-standard-income-and-resources</a>; for Apple Health children, pregnant women, and adult (Medicaid expansion) groups, charts that include the 5% income "disregard" are at <a href="http://www.hca.wa.gov/assets/free-or-low-cost/19-003.pdf">http://www.hca.wa.gov/assets/free-or-low-cost/19-003.pdf</a>. Long Term Care Standards are available at <a href="http://www.hca.wa.gov/free-or-low-cost-health-care/program-administration/standards-ltc">http://www.hca.wa.gov/free-or-low-cost-health-care/program-administration/standards-ltc</a>. Use caution as these charts may not describe whether gross or countable income is applied to the relevant standard. See program rules for details.

**HCA interpretive materials:** The Apple Health (Medicaid) Manual contains instructions to state agency staff on implementing the regulations: <a href="http://www.hca.wa.gov/medicaid/manual/Pages/index.aspx">http://www.hca.wa.gov/medicaid/manual/Pages/index.aspx</a>. The manual includes detailed instructions regarding WAH eligibility issues. Provider guides, instructions and other resources can be found on the HCA website: <a href="https://www.hca.wa.gov/health-care-services-supports/apple-health-medicaid-coverage">https://www.hca.wa.gov/health-care-services-supports/apple-health-medicaid-coverage</a>.

Northwest Justice Project's immigrant public benefits advocate with the Medical-Legal Partnership is available for consultation regarding immigrants' medical eligibility (phone 206-464-1519).



**CATEGORY** 

## **BASIC REQUIREMENTS**

**WAC REFERENCES** 

D ( ) 1 1 1	Defended for the first Consent to the constitution of the consent to the consent	102 507 0120
Refugee Medical Assistance (CN)	Refugees, for the first 8 months they are in the U.S., with countable income up to 200% of poverty and countable resources < \$1,000.	182-507-0130
	Note: During the COVID-19 Public Health Emergency, Refugee Cash Assistance and Refugee Medical Assistance are automatically extended through 9/30/20 for eligible individuals who reach their 8-month time limit between 4/1/20 and 8/30/20. Also, refugees who arrived in the US or received their immigration status between 4/1/19 and 1/31/20 and have stopped receiving RCA/RMA benefits may be eligible for an extension and can reapply. For details, see https://www.dshs.wa.gov/sites/default/files/ESA/oria/documents/DSHS-ORIA-Extension-of-RCA-RMA-Benefits-Final.pdf	
Certain Aged, Blind,	Medical Care Services is available to ABD recipients and HEN	182-508-0005,
or Disabled	Referral recipients who are lawfully present in the U.S. but	-0150
Immigrants (ABD,	ineligible for WAH Adult program due to its immigration status requirements (the 5-year bar or other non-qualifying status).	
HEN Referral clients)		182-505-
Children's Apple Health	Child under 19 with countable family income up to 317% of poverty (312% plus automatic 5% income disregard), residing in Washington. No immigration status requirement; no resource limit. 12-month continuous eligibility. If family income exceeds 215% of	0210(1),(3),(4) 182-505-0215
	poverty, child must be uninsured and premiums are required. Premiums for 215-260% of poverty are \$20/month per child up to \$40 per household. Premiums for 260%-317% of poverty are \$30/month per child up to \$60 per household.	182-505-0225 182-504-0125(6)
	Note: Categorically Needy (federal) Medicaid has citizenship/immigration status, entry date, and Social Security Number requirements but noncitizen children qualify for WAH without meeting these.	
Pregnant women	Countable family income below 198% of poverty (193% plus automatic 5% income disregard). No immigration status requirement for non-citizens. Unborn is counted as member of assistance unit. Eligibility continues through pregnancy and 2 months postpartum regardless of changes in income or living situation. No income standards for pregnant minors.	182-505-0115 182-503-0535(2) 182-506- 0010(2)(b) 182-505-0117(7) 182-505-0117
Family planning only  – Pregnancy related	Family planning services only, for 12 months after pregnancy coverage ends.	182-505-0115(5), 182-532-510
Family planning only	Women and men with income below 260% FPL may receive family planning coverage if uninsured for family planning (exemptions for those with insurance under certain circumstances). <i>This program became available to immigrants regardless of status as of January</i> 1, 2020.	182-532-510, 182-532-570; proposed rules pending (Emergency rule: WSR 20-10-20)

CATEGORY	BASIC REQUIREMENTS WA	AC REFERENCES
Emergency medical	Immigrants with certain emergency medical conditions, who meet	182-507-0110;
programs for	Categorically Needy (CN) or Medically Needy (MN) Medicaid	
immigrants (called	eligibility requirements except immigration status, qualify	182-505-0210(5)
"Alien Medical	regardless of date of arrival in U.S.	
Programs")	CN groups include (in addition to children and pregnant women):	
i rograms j	<ul> <li>Adults age 19-64, with countable income below 138% FPL</li> </ul>	
	(133% plus automatic 5% income disregard), no resource	
	limit.	182-505-0250
	SSI-related: Individuals with disabilities, blind, or over 65	
	(varying income and resource limits)	
	Current or former foster youth under age 26	182-508-0001
	MN groups* include:	
	• Children	182-505-0211
	Pregnant Women	
	SSI-related: Individuals with disabilities, blind, or over 65	
	*These individuals must spend down income if above Medically	
	Needy Income Level. Resource limits apply.	
	Treedy meanic zeven nessairee mines appry.	
	Three types of coverage:	
	1. Alien Emergency Medicaid. Covers only services necessary to	
	treat an emergency condition that are provided in a hospital setting	182-507-0115
	(inpatient admission, emergency room, or outpatient surgery) or by	(Emergency rule
	a physician immediately prior to a hospital admission.	at WSR 20-15-
	Note: During the COVID-19 Public Health Emergency, AEM coverage	069 7/13/20)
	includes COVID-19 testing and specified treatment and related	
	services including in <i>non-hospital</i> settings as specified in emergency	
	rule and agency policy at https://hca.wa.gov/assets/billers-and-	
	providers/alien-emergency-medical-COVID19-policy.pdf.	
	2. Alien Medical for Dialysis and Cancer Treatment, and Treatment	182-507-0120
	of Life-threatening Benign Tumors. Covers only services related to	
	a previously diagnosed condition – renal disease, cancer, and organ	
	transplant anti-rejection medications.	
		182-507-0125
	3. State-Funded Long-Term Care Services Program. Provides CN	
	scope of care to individuals residing in their own homes, or in an	
	adult family home, assisted living facility, enhanced adult	
	residential care facility, adult residential care facility, or nursing	
	facility. Requires pre-authorization by Aging & Disability Services	
	Administration. Program has a very limited number of slots.	
	Many information of and ANAD	
	More information about AMP programs:	
	https://www.hca.wa.gov/health-care-services-supports/program-	
Vidnov Disassa	<u>administration/apple-health-alien-emergency-medical</u> Dialysis, medications and other services for End Stage Renal Disease	182-540-015
Kidney Disease	(ESRD) after other funding exhausted; nonexempt countable	through
Program (KDP)	resources below \$1,041 for individual, \$1,409 for couple; countable	-065
	income under 220% FPL.	-003
	income unuer 220% FFL.	

## CATEGORY BASIC REQUIREMENTS WAC REFERENCES

<b>COFA Islander Health</b>	HCA pays premiums and out-of-pocket costs for a silver level	182-524
Care	Qualified Health Plan, described below, for low-income citizens of	
	the COFA (Compact of Free Association) states – the Federated	
	States of Micronesia, the Republic of the Marshall Islands, and the	
	Republic of Palau. Income must be below 133% FPL.	

### WASHINGTON HEALTH BENEFIT EXCHANGE: QUALIFIED HEALTH PLANS WITH SUBSIDIES

The Washington Health Benefit Exchange offers individual health insurance through Qualified Health Plans (QHPs). These insurance products are available by applying through Washington Healthplanfinder, <a href="www.wahealthplanfinder.org">www.wahealthplanfinder.org</a>, as is Washington Apple Health. (The Affordable Care Act prohibits undocumented individuals from enrolling in QHPs.)

Immigrants eligible for premium tax credits and cost-sharing reductions: Immigrants who are lawfully present in the US may enroll in QHPs and may qualify for subsidies (described in next paragraph), including those who do not meet the Medicaid requirements for immigration status or the 5-year bar for green card holders (Lawful Permanent Residents). For more information, see <a href="https://www.wahbexchange.org/new-customers/who-can-sign-up/immigrants">https://www.wahbexchange.org/new-customers/who-can-sign-up/immigrants</a> and a chart of statuses at <a href="https://www.wahbexchange.org/wp-content/uploads/2013/05/HBE">https://www.wahbexchange.org/wp-content/uploads/2013/05/HBE</a> SN 160328 Citizenship Immigration Toolkit.pdf.

Insurance affordability programs: Persons with household income under 400% FPL based on MAGI methodology may be eligible for health insurance premium tax credits to partially offset the cost of QHP premiums. Persons with household income under 250% FPL may also qualify for cost-sharing reductions if a "silver" level plan is purchased. These QHP subsidies, along with WAH, are called "insurance affordability programs." Applicants for insurance affordability programs are considered for both WAH coverage and QHP subsidies. Applicants denied WAH are reviewed for the above QHP subsidies.

Overview at WAC 182-503-0001. Additional information available at

 $\frac{www.wahbexchange.org}{\text{and}}$ 

https://www.wahealthplanfinder.org/.

### WASHINGTON STATE HEALTH INSURANCE POOL (WSHIP)

Residents who had not been accepted by private individual health insurance plans because of their medical conditions have been be able to purchase coverage through WSHIP, also called the "high risk pool." Effective 12/31/13, WSHIP closed its enrollment to non-Medicare-supplement enrollees with the following exceptions:

284-91-001

WAC

- Residents enrolled in WSHIP before 12/31/13 can remain enrolled through 12/31/22
- Residents ineligible for Medicaid/Medicare, who live in a county where a noncatastrophic health plan is unavailable in the private market/Exchange during open or special enrollment periods, who applies for coverage prior to 12/31/22.

WSHIP is partially funded through assessments on commercial health plans but enrollee premiums can be costly. Premium discounts based on income may be available. RCW 48.41.200. Information: <a href="www.wship.org">www.wship.org</a>, 1-800-877-5187. Assistance: Statewide Health Insurance Benefits Advisor (SHIBA), 1-800-562-6900.

## CATEGORY BASIC REQUIREMENTS WAC REFERENCES

BREAST, CERVICAL, AND COLON CANCER SCREENING	
The Breast, Cervical, and Colon Health Program provides free breast, cervical, and colon cancer screenings and diagnostics. To qualify, clients must be below 250% FPL (300% FPL in some counties for breast health screening), uninsured or underinsured, and meet certain age and/or risk criteria. More information:  https://www.doh.wa.gov/portals/1/Documents/Pubs/342-031_BCCHPEligibilityCriteria.pdf, http://www.doh.wa.gov/YouandYourFamily/IllnessandDisease/Cancer/BreastCervicalandColonHealth/Eligibility	182-505-0120
HIV/AIDS EARLY INTERVENTION PROGRAM (EIP)	
HIV/AIDS EARLY INTERVENTION PROGRAM (EIP): Dept. of Health offers assistance for clients with HIV/AIDS with income below 425% FPL. The program helps with insurance premium payments, including Qualified Health Plans in the Exchange, and covers some costs of care and meeting Medicaid spenddown. Phone 360-236-3426 or 877-376-9316. More information:  http://www.doh.wa.gov/YouandYourFamily/IllnessandDisease/HIVAIDS/HIVCareClientServices/AD APandEIP/ApplicationandEligibility	WAC 246-130
EVERGREEN HEALTH INSURANCE PROGRAM: Evergreen pays health insurance premiums and COBRA for clients with HIV/AIDS, with certain income and asset limits. To qualify, clients must first enroll in the EIP. Phone 206-323-2834 or 800-945-4256. More information: <a href="www.ehip.org">www.ehip.org</a> , info on combined EIP/Evergreen application: <a href="https://www.doh.wa.gov/YouandYourFamily/IllnessandDisease/HIV/ClientServices">https://www.doh.wa.gov/YouandYourFamily/IllnessandDisease/HIV/ClientServices</a>	RCW 43.70.670
The EIP program also provides <b>Pre-Exposure Prophylaxis Drug Assistance Program (PrEP DAP) for HIV-negative people</b> at very high risk for HIV infection. The program pays for medications to reduce a person's risk of becoming infected. For more info: <a href="https://www.doh.wa.gov/YouandYourFamily/IllnessandDisease/HIV/ClientServices">https://www.doh.wa.gov/YouandYourFamily/IllnessandDisease/HIV/ClientServices</a> And <a href="http://www.doh.wa.gov/Portals/1/Documents/Pubs/150-055-PrEPDAPBrochure.pdf">http://www.doh.wa.gov/Portals/1/Documents/Pubs/150-055-PrEPDAPBrochure.pdf</a>	