

OFFICE OF REFUGEE RESETTLEMENT

An Office of the Administration for Children & Families

Medical Assistance in the Unaccompanied Refugee Minors Program

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Topics: Health and Medical, Resettlement

TO: STATE REFUGEE COORDINATORS
STATE REFUGEE HEALTH COORDINATORS
NATIONAL VOLUNTARY AGENCIES
OTHER INTERESTED PARTIES

FROM: Eskinder Negash
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Office of Refugee Resettlement

SUBJECT: Medical Assistance in the Unaccompanied Refugee Minors Program

The purpose of this State Letter is to provide guidance to States regarding ORR's interpretation of regulations governing medical assistance for participants in the Unaccompanied Refugee Minors (URM) Program. As provided by the regulations at 45 CFR §400.116, participants in the URM program are required to receive medical assistance, and pursuant to 45 CFR §400.100(a)(1), only refugees ineligible for Medicaid and CHIP are eligible for such ORR-funded medical assistance.

Background

The goal of the URM Program is to help unaccompanied refugee minors develop appropriate skills to enter adulthood and achieve economic self-sufficiency. Access to health care is critical to achieving this self-sufficiency. Therefore, a State must ensure that participants in the URM program have access to medical assistance until termination of eligibility as described at 45 CFR §400.113.

Medicaid and CHIP Determination

A State must first determine Medicaid and CHIP eligibility under its Medicaid and CHIP State plans for each participant in the URM program, as required by 45 CFR §400.94. The State must provide medical assistance under its Medicaid or CHIP program to all refugees eligible under its State plans.

The regulations at 45 CFR §400.100(a)(1) limit eligibility for ORR-funded medical assistance to those found ineligible for Medicaid and CHIP. Thus, States cannot use ORR funding to finance or supplement medical assistance for participants in the URM program eligible for Medicaid or CHIP. In addition, ORR has longstanding policy that medical assistance is not available for the State share of Medicaid or CHIP (60 FR 33588, June 28, 1995).

Coverage for Participants in the URM Program Ineligible for Medicaid and CHIP

If a State determines a participant in the URM program ineligible for Medicaid and CHIP under its State plans, the State must find an alternative method to provide medical assistance. A State may assess a participant in the URM program for eligibility for state-funded medical assistance programs. A State may also develop a program or "workaround" arrangement to provide medical assistance through its Medicaid agency or other State office.

Coverage is also available through the Health Insurance Marketplace for immigrants who are lawfully present. To learn more about the immigration statuses eligible for Marketplace coverage, click here: <https://www.healthcare.gov/immigrants/immigration-status/> (<https://web.archive.org/web/20191114070731/https://www.healthcare.gov/immigrants/immigration-status/>).

A State must assist a participant in the URM program in applying for advanced premium tax credits and cost-sharing assistance, if eligible. ORR funding can be used to cover the cost of the unsubsidized portion of the premium and direct medical costs not covered by the plan. If the participant in the URM program has complex medical needs, the State should consult their URM State Analyst before choosing a Marketplace plan.

Participants in the URM program may become eligible for different health care coverage as their age, immigration status and placement participation changes. A State should periodically review coverage options and reassess eligibility when appropriate.

A State should report estimated and incurred costs related to providing medical assistance to participants in the URM program on the URM direct cost line item on the ORR-1 and ORR-2, respectively.

If you have questions regarding this State Letter, please contact Jennifer Schmalz at 202-260-5186, or by e-mail at **Jennifer.Schmalz@acf.hhs.gov** (<https://web.archive.org/web/20191114070731/mailto:Jennifer.Schmalz@acf.hhs.gov>).

Last Reviewed: March 19, 2019