Apr-June 2025 Summary of Changes

Chapter	Passage	Summary
200	0260.0100	Updated refugee cash and medical assistance
	0260.0103	language from eight to 4 months
600	0660.0100	Updated refugee cash and medical assistance
		language from eight to 4 months
800	0840.0800	Added new language on continuous Medicaid
		eligibility
4440	4.420.4.400	Deleted record
1410- 1420	1420.1400	Deleted passage
1420		
1430	1430.1400	Deleted passage
1400	1400.1400	Bolotoa passage
1440	1440.1400	Updated policy language on the requirement to file
		for other benefits
1450	1450.1400	Deleted passage
1460	1460.0000	Undated refugee each and medical assistance
1400	1460.0106.02	Updated refugee cash and medical assistance language from eight to 4 months
	1460.0106	language from eight to 4 months
	1460.0107	
	1460.0108	
	1460.0109	
	1460.0110	
	1460.0111	
	1460.0112	
1630-	1640.0307.04	Updated policy language to remove home equity
1640	1640.0314.01	limits as amounts are listed in Appendix A-9, SSI-

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		Related Medicaid Coverage Groups Financial Eligibility Standards
	1640.0314.01	Added language on institutional spouse's income allocation
	1640.0607	Updated reference language for determination
2000	2060.0401	Updated refugee cash and medical assistance
	2060.0702	language from eight to 4 months
3200	3220.0203.01	Updated expunged accounts to nine months.
	3260.0203.01	Added language for notifications

0260.0100 Refugee Assistance Program (RAP)

Refugees are individuals who have been forced to flee their native country due to a fear of persecution for reasons of race, religion, nationality, political opinion or membership in a social group. The Refugee Assistance Program provides financial and medical assistance to Refugees who do not otherwise qualify for TCA or Medicaid.

The purpose of RAP is to provide for the effective resettlement of refugees and to assist them to achieve economic self-sufficiency as quickly as possible. Refugee cash and medical assistance is limited to four eight months from a refugee's date of entry into the United States. Victims of Human Trafficking may also receive benefits under the RAP program.

0260.0103 Eligibility Criteria (RAP)

To be eligible for RAP, an individual must have been determined ineligible for TCA and or Medicaid. The individual must meet program requirements including residency, income, assets, employment registration, and have lived in the US for a period of less than four eight months. Eligibility for RAP is determined by the alien status document issued by the United States Citizenship & Immigration Services (USCIS).

0660.0100 Application for Assistance (RAP)

The Refugee Assistance Program (RAP) provides refugee cash assistance and refugee Medicaid coverage. Benefits are time limited to 4 12 months from the date of entry, date of status, or date asylum was granted. Evaluate all refugee applicants for potential TCA and/or other Medicaid coverage prior to approving RAP benefits. Refugees applying for TCA will have immunizations and learnfare requirements waived at initial application, if the initial application is within their 4 12 months from date of entry, status, or asylum; however, this information must be provided at recertification. Applicants who refuse to comply with TCA requirements are not eligible for RCA benefits.

Individuals may apply in person, by mail or by web-based or facsimile application. An acceptable application must have the applicant's name, address, and signature on the form. Upon request from an applicant, provide necessary assistance in completing the application.

Encourage the individual or the individual's authorized representative to exercise the right to file an application the same day the individual or authorized representative contacts the office and expresses interest in obtaining assistance. Only the PIP or authorized representative must sign the application. Unless signed in the presence of the eligibility specialist, an application signed with a mark must have two witness' signatures. If the eligibility specialist signs as the witness, no other witness is required.

An individual must complete an application form at initial application, reapplication, eligibility review and requests for additional types of assistance.

0840.0800 Continuous Medicaid Eligibility (MSSI)

When Medicaid eligibility has been established, children under age 19 who become ineligible for Medicaid must remain on Medicaid for up to twelve months from the last application, eligibility review or addition to Medicaid coverage. This policy does not apply to Medically Needy, Emergency Medicaid for Aliens or presumptive coverage.

1420.1400 REQUIREMENT TO FILE FOR OTHER BENEFITS (TCA)

Individuals must apply for and pursue an application for all other benefits for which they may be eligible as a condition of eligibility. Benefits that must be applied for include, but are not limited to:

- 1. pensions from local, state, or federal government,
- 2. retirement benefits,
- 3. disability,
- 4. Social Security benefits.
- 5. Veterans' benefits,
- 6. UC benefits.
- 7. Military benefits,
- 8. Railroad retirement benefits,
- 9. Workers' Compensation benefits, and
- 10. Health and accident insurance payments.

1430.1400 REQUIREMENT TO FILE FOR OTHER BENEFITS (MFAM)

Individuals must apply for and diligently pursue to conclusion an application for all other benefits for which they may be eligible as a condition of eligibility. Need cannot be established nor eligibility determined upon failure to do so. Benefits that must be applied for include, but are not limited to:

- 1. pensions from local, state, or federal government.
- 2. retirement benefits.
- disability.
- 4. Social Security benefits.
- Veteran's benefits,
- 6. UC benefits,
- 7. Military benefits.
- 8. Railroad retirement benefits,
- 9. Worker's Compensation benefits,
- 10. Health and accident insurance payments, and
- 11. Medicare Part A, Part B and Part D.

Individuals applying for Family-Related Medicaid are not required to apply for SSI as a condition of eligibility.

In some cases, individuals who are already receiving benefits may be eligible for increased benefits due to a change in their circumstances. Individuals are required to apply for all increased benefits for which they might qualify.

Exception: Individuals applying for Emergency Medicaid for Aliens (EMA), and children under age 18 (unless a parent is deceased, aged, or disabled) are not required to apply for Social Security Disability (SSDI) payments.

1440.1400 REQUIREMENT TO FILE FOR OTHER BENEFITS (MSSI, SFP)

Individuals must apply for and diligently pursue to conclusion an application for all other benefits for which they may be eligible as a condition of eligibility Individuals who apply for SFP must apply for SSI as a condition of eligibility and are required to apply for all increased benefits for which they might qualify.

Need cannot be established nor eligibility determined upon failure to do so. Benefits that must be applied for include, but are not limited to:

- 1. Pensions from local, state, or federal government,
- 2. Retirement benefits,
- 3. Disability,
- 4. Social Security benefits,
- 5. Veterans' benefits,
- 6. UC benefits,
- 7. Military benefits,
- 8. Railroad retirement benefits,
- 9. Workers' Compensation benefits,
- 10. Health and accident insurance payments, and
- 11. Medicare Part A, Part B and Part D.

Exception: Individuals applying for Emergency Medicaid for Aliens (EMA), and children under age 18 (unless a parent is deceased, aged, or disabled) are not required to apply for Social Security Disability (SSDI) payments.

Individuals applying for Medicaid on the basis of age (65 or older) or disability must apply for Medicare if the state will pay the Medicare premium, deductible or co-insurance. If the individual is not eligible for a Medicare Savings Program (MSP), there is no requirement to apply for Medicare.

The Medicare Enrollment Data Base (EDB) file received from the Center for Medicare and Medicaid Services (CMS) contains information on individuals receiving both Medicaid and Medicare. The information from the EDB file is used to automatically enroll individuals in Medicare.

The application for Social Security benefits based on age or disability is presumed to be an application for Medicare.

Individuals applying for SSI-Related Medicaid, HCDA, TCA, or Family-Related Medicaid are not required to apply for SSI as a condition of eligibility.

Individuals who apply for OSS and are potentially eligible for SSI must apply for SSI as a condition of eligibility.

Individuals are required to apply for all increased benefits for which they might qualify.

1450.1400 REQUIREMENT TO FILE FOR OTHER BENEFITS (CIC)

Individuals must apply for and diligently pursue to conclusion an application for all other benefits for which they may be eligible as a condition of eligibility. Need cannot be established nor eligibility determined upon failure to do so. Benefits that must be applied for include, but are not limited to:

- 1. pensions from local, state, or federal government,
- 2. retirement benefits,
- 3. disability,
- 4. Social Security benefits,
- 5. Veterans' benefits,

- 6. UC benefits,
- 7. Military benefits.
- 8. Railroad retirement benefits,
- 9. Workers' Compensation benefits, and
- 10. Health and accident insurance payments.

Individuals applying for SSI-Related Medicaid, HCDA, Temporary Cash Assistance, or Family-Related Medicaid are not required to apply for SSI as a condition of eligibility.

Individuals who apply for OSS and are potentially eligible for SSI must apply for SSI as a condition of eligibility.

In some cases, individuals who are already receiving benefits may be eligible for increased benefits due to a change in their circumstances. Individuals are required to apply for all increased benefits for which they might qualify.

1460.0000 Refugee Assistance Program (RAP)

Refugee cash and medical assistance programs provide cash assistance to those meeting income but not other requirements for Temporary Cash Assistance (TCA), and medical assistance to those meeting income but not other requirements for Medicaid. Single refugee adults, as well as intact families may apply, as deprivation is not a factor in determining eligibility for assistance, and benefits may be approved on the basis of need for single individuals and families.

Individuals are eligible for the Refugee Assistance Program only if determined ineligible for TCA and all other factors of eligibility are met.

Assistance under this coverage group is limited to the first 4 12 months refugees are in the United States if the date of entry/status was on or after 5/5/25 10/1/21. If the date of entry/status is prior to 5/5/25 10/1/21 assistance is limited to the first 12 8 months of entry. The 4-month 12-month or 12-month 8-month period begins with the date of entry/status into the United States.

The following noncitizens are eligible to receive refugee assistance based on their date of entry into the U.S. and if all other factors of eligibility are met:

- 1. Refugees admitted under Section 207 of the Immigration and Nationality Act (INA);
- 2. Cubans/Haitians paroled under Section 212(d)5 of the INA;
- 3. Cuban/Haitian asylum applicant;
- 4. Cubans/Haitians whose deportation is withheld or granted indefinite stay of Deportation under Section 243(h) or 241(b)3 of the INA as long as a final order of deportation has not been issued:
- 5. Cuban/Haitian entrants under Section 501(e) of the Refugee Assistance Act of 1980;
- 6. Amerasians from Vietnam;
- 7. Victims of Human Trafficking; and
- 8. Lawful permanent residents who were initially admitted in one of the categories listed above.

Asylees admitted under Section 208 of the INA are eligible to receive refugee assistance if they are within the 4-month 12-month or 12-month 8-month period of the date they obtained their asylee status.

Refugees eligible for refugee cash assistance are automatically eligible for Medicaid. However, the individuals may "opt not to receive" refugee cash assistance, but may continue to receive Medicaid for a period not to exceed the 4-month 12-month or 12-month 8-month limit depending on the date of arrival or entry as defined above.

1460.0106.02 Amerasians (RAP)

Individuals born in Vietnam between January 1, 1962, and before January 1, 1976, fathered by a U.S. citizen, or a spouse, child, parent, or guardian accompanying or following an Amerasian admitted under this program admitted to the U.S. as immigrants under Section 584 of the Foreign Operations, Export Financing and Related Programs Appropriations Act of 1988.

Verification of status includes:

- 1. Vietnamese exit visa with DHS stamp code AM1, AM2, or AM3,
- 2. unexpired temporary I-551 stamp in a foreign passport with code AM1, AM2, or AM3,
- 3. unexpired temporary I-551 stamp on I-94 with code AM1, AM2, or AM3, or
- 4. foreign passport, with code A11, A16, A41, A46, AM1, AM2, AM3, or ARI.

These individuals are eligible for the Refugee Assistance Program for four eight months from date of entry.

1460.0106 Lawful Permanent Resident (RAP)

A lawful permanent resident (LPR) is a noncitizen who lawfully immigrates to the United States and has permission to live and work in the U.S. Most LPR's entering after 8/22/96 are subject to the 5 year ban. However, certain LPR's may be eligible for the Refugee Assistance Program based of their noncitizen status without a 5 year ban if they entered the U.S. based upon a prior status as:

- 1. Refugee status under section 207 of the Immigration and Nationality Act (INA). Eligible for four eight months beginning with their date of entry into the U.S.
- 2. Asylee status under section 208 of the INA. Eligible if within first four eight months from the date asylum was granted.
- 3. Amerasian. Eligible if from Vietnam and within four eight months from date of entry.
- 4. Cuban/ Haitian Deportation Withheld status or granted an Indefinite Stay of Deportation. Eligible for four eight months from date Cuban/ Haitian status was granted.
- 5. Cuban/ Haitian Entrant status. Eligible for four eight months from date of entry.
- 6. Victim of Human Trafficking. Eligible for four eight months from the date of the certification letter.

1460.0107 Asylees (RAP)

Noncitizens granted asylum under Section 208, who have received permission to remain in the U.S. based on a "well-founded fear of persecution" should the individual return to the individual's native land, may be considered for asylum. A prospective asylee applies for asylum after entering the U.S., a U.S. territory or a U.S. embassy, unlike a refugee who applies from abroad.

Proof of this status include:

- 1. USCIS Form I-94 showing grant of asylum under Section 208,
- 2. USCIS Form I-688B (Employment Authorization Card) annotated 274a.12(a)(5),
- 3. USCIS Form I-766 (Employment Authorization Card) annotated A5,

- 4. grant of asylum letter from the Asylum Office of the Immigration and Naturalization Service indicating this status is granted,
- 5. an order of an immigration judge granting asylum, or
- 6. other conclusive documentation of this status.

When determining eligibility for the Refugee Assistance Program (RAP), the asylee's status date is used. Asylees whose date of application is within four eight months of their status date and are ineligible for Temporary Cash Assistance are eligible for RAP on the factor of noncitizen status. To determine eligibility for RAP, the eligibility specialist may only use for verification the USCIS Form I-94, USCIS Form I-551 coded AS1, AS2, AS3, AS6, AS7, or AS8, an order of an immigration judge, or letter from USCIS indicating this status has been granted.

1460.0108 Refugees (RAP)

Refugees are defined as those noncitizens given permission to enter the U.S. under Section 207 of the Immigration and Nationality Act. These noncitizens have applied to be admitted to the U.S. based upon a well-founded fear of persecution in their homeland. Persecution must be due to race, religion, nationality, social or political ties and cannot be economic in nature.

Proof of this status include:

- 1. USCIS Form I-94 or I-551 bearing Section 207,
- 2. USCIS Form I-688B (Employment Authorization Card) annotated 274a.12(a)(3),
- USCIS Form I-766 annotated A3,
- 4. USCIS Form I-571 (Refugee Travel Document), or
- 5. other conclusive documentation of this status.

Noncitizens admitted as refugees under this section are qualified noncitizens. Refugees within four eight months of their entry date are also eligible for the Refugee Assistance Program if ineligible for Temporary Cash Assistance and all other factors of eligibility are met.

Verification required for this status includes USCIS Form I-94 or I-551 bearing Section 207, USCIS Form I-571 or USCIS Form I-551 annotated with the following codes: CNP, CU0, CUP, C7P, RE1, RE2, RE3, RE6, RE7, RE8, R86 and Y64.

1460.0109 Victims of Human Trafficking (RAP)

Victims of severe forms of human trafficking are eligible for benefits to the same extent as an alien who is admitted to the United States as a refugee under section 207 of the Immigration and Nationality Act. The only exception is that the human trafficking victim will not provide USCIS documents. Adult victims will provide a certification letter from the Department of HHS. Children under 18 years old are not required to be certified and will instead be provided an eligibility letter. The agency will accept the certification letter for adults or the eligibility letter for children in place of USCIS documentation.

Before approving these individuals for benefits, the validity of the certification or eligibility letter must be confirmed by calling the HHS' Office of Refugee Resettlement (ORR) at (866) 401-5510. The call will advise ORR of the benefits for which the individual has applied and at the same time ORR will verify whether or not the individual is a trafficking victim.

Certain family members of victims of human trafficking are now potentially eligible for refugee assistance payments. This includes the spouse and children of a trafficking victim 21 years of age or older. If the severe trafficking victim is under 21 years of age, parents, spouses, children, and unmarried siblings under 18 on the date of the T Visa's application are eligible, if they meet all other program criteria. These family members will have a nonimmigrant T Visa, with no additional USCIS documentation. Trafficking victims and certain family members are potentially eligible for

refugee assistance payments for four eight months from the date of the trafficking certification letter.

Note: Do not use Verification Information System-Customer Processing System (VIS-CPS) for these individuals as VIS-CPS does not contain information about them.

Potential Child Trafficking Victims: Potential child trafficking victims are eligible for federally funded benefits and services for up to 90 days pending a final trafficking eligibility decision. An "Interim Assistance Letter" issued to potential child victims by the Department of HHS, Office of Refugee Services (ORR) will certify this status. These children are eligible for benefits beginning with the eligibility began date on the interim assistance letter. ORR will issue a final trafficking determination on the child within this interim period. If denied a final trafficking status, terminate benefits at the end of the month in which the 90th day falls.

Proof of this status includes:

- 1. ORR certification letter,
- 2. T-2, T-3, T-4, or T-5 visa, also called a "Derivative T Visa",
- 3. telephone call to verification line at (202) 401-5510, or

victims that are minors are eligible on the basis of a similar ORR letter of eligibility, which is not a certification letter.

1460.0110 Cuban/ Haitian Parolees (RAP)

Nationals of Cuba or Haiti paroled under Section 212(d)(5); Nationals of Cuba or Haiti granted parole status by the Attorney General under Section 212(d)(5) of the Immigration and Nationality Act are eligible for refugee assistance on the factor of noncitizen status if they are within four eight months of attaining their Cuban or Haitian Entrant status, and have been determined ineligible for Temporary Cash Assistance. Cuban/Haitian parolees are also defined as Cuban/Haitian Entrants.

Note: Only parolees from Cuba or Haiti are eligible for refugee assistance benefits based on their noncitizen status.

1460.0111 Cuban/ Haitian Deportation Withheld (RAP)

Nationals of Cuba or Haiti, within four eight months of their date of entry, whose deportation is being withheld or granted indefinite stay of deportation pursuant to Section 243(h) or 241(b) of the Immigration and Nationality Act are eligible Refugee Assistance Program (RAP) services as Cuban/Haitian Entrants. If they are ineligible for Temporary Cash Assistance, they can be eligible to receive benefits from RAP on the factor of noncitizen status.

Proof of this status includes:

- 1. an order from an immigration judge showing deportation has been withheld pursuant to Section 243(h) or 241 of the INA, or other USCIS documentation.
- 2. USCIS Form I-766 (Employment Authorization Card) annotated A-10. or
- 3. USCIS Form I-688B (Employment Authorization Card) annotated (a)(10).

The court will include the date deportation was withheld. If the applicant does not present a court order, do secondary verification.

These individuals are not subject to the five-year ban and may be eligible for RAP for four eight months from the date Cuban/ Haitian Status obtained.

Cubans and Haitians whose deportation is withheld or granted an indefinite stay of deportation are also defined as Cuban/Haitian Entrants.

Note: Only nationals from Cuba or Haiti whose deportation is withheld or who are granted an indefinite stay of deportation are eligible for RAP benefits based on their noncitizen status.

1460.0112 Cuban/Haitian Entrants (RAP)

Cuban/Haitian Entrants under Section 501(e) of the Refugee Education Assistance Act of 1980 are defined as any national of Cuba or Haiti who:

- was granted parole status as a Cuban/Haitian Entrant (status pending) or granted any
 other special status subsequently established under the immigration laws for nationals of
 Cuba or Haiti, regardless of the status of the individual at the time assistance or services
 are provided; or
- 2. any other national of Cuba or Haiti who:
 - a. was paroled into the United States and has not acquired any other status under the Immigration and Nationality Act (INA);
 - b. is the subject of exclusion or deportation proceedings under the INA; or
 - c. has an application for asylum pending with the U.S. Citizenship and Immigration Service (USCIS), and with respect to whom a final, nonappealable, and legally enforceable order of deportation or exclusion has not been entered.

Cuban/Haitian Entrants are considered qualified noncitizens. Refer to specific program criteria to determine if they qualify for benefits.

Verification of this status includes:

- 1. USCIS Form I-94, stamped paroled as "Cuban/Haitian Entrant, Status Pending",
- 2. USCIS Form I-55I with code CU6 or CH6,
- 3. unexpired temporary I-55I stamp in foreign passport,
- 4. USCIS Form I-94 with code CU6 or CH6, or
- other conclusive documentation of this status. Those persons with application for asylum pending will have "Form I-589 filed" or official USCIS receipt of USCIS Form I-589 along with an USCIS Form I-94 with this status.

Cuban/Haitian Entrants under this section who are ineligible for Temporary Cash Assistance are eligible to receive benefits from the Refugee Assistance Program on the factor of noncitizen status if their date of status is four eight months or less from the date of application.

1640.0307.04 Home Equity (MSSI, SFP)

Apply the following policy to individuals who file an initial application or reapplication for ICP, institutionalized MEDS-AD, Institutional Hospice, Home and Community Based Services Programs or PACE on or after November 1, 2007. Do not apply the policy to individuals who were determined eligible for the above programs prior to November 1, 2007 and have had no break in eligibility.

Individuals with an equity interest in their home greater than the home equity interest standard in Appendix A-9 are ineligible for nursing facility or other long-term care services, unless one of the following relatives of the institutionalized individual is residing in the home:

- 1. spouse;
- 2. child under age 21; or
- 3. blind or disabled child, regardless of age or marital status.

Home equity is not an asset test. This does not change the policy that excludes a home of any value from countable assets.

Individuals ineligible solely due to their home equity will not qualify for nursing home care or other long term care services but will be eligible for general Medicaid benefits.

If an individual shares ownership interest in the home with other persons, only consider the equity value of the individual's shared fractional interest.

The equity value of the home is the current market value minus any indebtedness. Current market value is the price for which the home can reasonably be expected to sell on the open market in the particular geographic area involved.

Unless questionable, accept the individual or designated representative's statement as to equity value of a home that is less than the current year's spousal impoverishment standards for the minimum home equity limit \$450,000. For equity value more than the current year's spousal impoverishment limit of \$450,000 or more, the individual or designated representative must provide verification of current market value and indebtedness. The home equity limit is posted on Appendix A-9, SSI-Related Medicaid Coverage Groups Financial Eligibility Standards.

Verification of the current market value must be obtained from a knowledgeable source commonly involved in the housing industry such as a real estate broker, mortgage broker, property appraiser, or builder. The statement must include:

- 1. the current market value,
- 2. the name of the person providing the estimate, and
- 3. contact information of the business or agency for whom the person providing the estimate works. The home equity provision may be waived when denial of long term care services would result in demonstrated hardship to the individual.

The home equity provision may be waived when denial of long term care services would result in demonstrated hardship to the individual.

1640.0314.01 Asset Available to Spouse (MSSI)

The following policy applies to ICP, ICP-MEDS, and ICP-Hospice individuals admitted to institutions on or after September 30, 1989. This includes SSI recipients applying for institutional services. (If the individual was institutionalized prior to September 30, 1989, refer to Chapter 2200).

Although the assets of a Medicaid recipient's spouse may not have been considered available to the individual in the community (e.g., when the couple is separated), when the individual applies for institutional services, the assets of both spouses must be considered in determining the individual's eligibility for institutional services.

The portion of a couple's assets available to the institutional spouse is the amount remaining after the community spouse's asset allowance is subtracted from the couple's total included assets. If this figure is over the program's allowable asset limit, the individual is ineligible until the assets are reduced to within the program's standard.

If after declaring and verifying his assets, the community spouse refuses to make them available to the individual, the institutionalized spouse may assign his rights of support to the state and obtain institutional care benefits (refer to passages 1640.0314.03 and 1640.0314.04 for policy). Community spouses who refuse to make their assets available to the institutionalized spouse are not entitled to a community spouse income allowance. The Institutional Spouse may allocate their income available to the community spouse.

If the couple has been separated for a long time and the community spouse cannot be located, there is no ""community spouse"" and the applicant must be considered an individual when

applying income and asset standards.

If either spouse can verify that the community spouse asset allowance determined by the agency is inadequate to generate income to raise the community spouse's income to the minimum monthly maintenance needs allowance, the asset allowance may be revised through the fair hearing process.

A spouse for these purposes is defined in Chapter 2200.

1640.0607 How to Determine if a Transfer Penalty Applies (MSSI)

If an individual, their spouse, a legally authorized representative or a joint owner of a jointly owned asset disposes of an asset or income without receiving fair compensation, the individual may be ineligible for Medicaid nursing home care services, Home and Community Based Services (HCBS), or Program for All-Inclusive Care for the Elderly (PACE) for a period of time. Refer to Appendix A-8 for determination steps. Refer to 1640.0613 Processing Transfer Cases (MSSI) and 1640.0618 Period of Ineligibility (MSSI) to develop the asset transfer.

2060.0401 Refugee Assistance Program (RAP)

Assistance through the Refugee Assistance Program (RAP) may be provided under this coverage group to refugee families and individuals who meet the eligibility criteria. Assistance under this coverage group is limited to the first four eight months refugees are in the United States. The four eight months period begins with the date of entry into the United States.

2060.0702 Extended Medicaid (RAP)

Medical coverage for the refugee assistance group and MAO under \$10 or refugee medical assistance AGs must be extended for up to the end of the four eight month time limit beginning with the month of ineligibility for RAP or medical assistance.

3220.0203.01 Expunged Status (TCA)

Expunged accounts are accounts that have not been accessed or had a debit transaction performed in the preceding 274 365 days (nine months one year).

When an account reaches expunged status any benefits contained in the account will begin to expunge individually as each benefit reaches 274 365 days of age from the date the last debit transaction was performed or from the date of deposit, if no debit transactions were performed against the benefit. Upon notification that all members of the SFU are deceased, benefits that have not been accessed will be expunged.

Due to expunged status accounts, an inquiry should be performed on all FLORIDA applications after a break in eligibility to determine if the person has an established account on the Electronic Benefits Transfer (EBT) system. If an account already exists in the EBT system for the person, the eligibility determination process should be completed in such a manner to direct any newly approved benefits to the account already on the EBT system. This is accomplished by approving the person using the same FLORIDA case/RFA number and short list member for the account already on the EBT system.

Note: Benefits deposited into expunged status accounts automatically reactivate the account. It is not necessary to manually reactivate an expunged account if a new benefit is being authorized for the account.

Exception: Very old accounts (pre 2003) may need to be manually reactivated using the account reactivation function on the EBT Administrative System if a new benefit deposit fails to reactivate the account.

3260.0203.01 Expunged Status (RAP)

Expunged accounts are accounts that have not been accessed or had a debit transaction performed in the preceding 274 365 days (nine months one year).

When an account reaches expunged status any benefits contained in the account will begin to expunge individually as each benefit reaches 274 365 days of age from the date the last debit transaction was performed or from the date of deposit, if no debit transactions were performed against the benefit. Upon notification that all members of the SFU are deceased, benefits that have not been accessed will be expunged.

Due to expunged status accounts, an inquiry should be performed on all FLORIDA applications after a break in eligibility to determine if the person has an established account on the Electronic Benefits Transfer (EBT) system. If an account already exists in the EBT system for the person, the eligibility determination process should be completed in such a manner to direct any newly approved benefits to the account already on the EBT system. This is accomplished by approving the person using the same FLORIDA case/RFA number and short list member for the account already on the EBT system.

Note: Benefits deposited into expunged status accounts automatically reactivate the account. It is not necessary to manually reactivate an expunged account if a new benefit is being authorized for the account.

Exception: Very old accounts (pre 2003) may need to be manually reactivated using the account reactivation function on the EBT Administrative System if a new benefit deposit fails to reactivate the account.