



## Which US Citizens Need to Document their Citizenship and Identity for Medicaid

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This chart is a quick reference guide about who is and is not affected by the new Medicaid citizenship documentation rule, which became effective on July 1, 2006. The documentation requirements vary by the type of applicant. For example, generally children and parents, who make up the largest segment of the Medicaid population, must provide documentation before enrollment. Some children and pregnant women can be enrolled right away and provide documentation later. And other groups, such as foster care children and children receiving adoption assistance, are exempt from the requirement. Also, seniors or persons with disabilities who receive Social Security (including Social Security Disability Insurance), SSI, or Medicare coverage are exempt from the new rule. The groups who will be most harmed by the new rule are children, pregnant women, parents, and other caretaker relatives, since they cannot receive Medicaid (HUSKY A) coverage until they provide citizenship documentation, and may experience delays in accessing health care. Applicants and enrollees only need to document their citizenship and identity once.

Category	Exempt or Must Document	Comment
Children, parents, and pregnant women <b>newly applying</b> for coverage	Must document citizenship & identity. New applicants will not get coverage until they supply documentation for each person who seeks coverage.	For children under 16 years old, identity documentation is less stringent than for those 16 and over, e.g., parent can fill out affidavit attesting to identity of child.
Children, parents, and pregnant women <b>renewing</b> coverage	Must document citizenship & identity. Will maintain coverage if making “good faith” effort to obtain documentation.	Federal regulations are unclear about whether or when enrollees should be denied coverage if they are unable to produce documents.
Children under age 19 with Presumptive Eligibility (PE)	Exempt during PE period (usually one to two months). Must document citizenship and identity when completing full application process. So long as cooperating with gathering information, child should remain enrolled.	PE provides temporary Medicaid by allowing certain “qualified entities” (QE), such as community health centers or hospitals, to determine initial eligibility. QE sites will be authorized to view original citizenship & identity documents. Other organizations may be allowed to view original documents in the near future. This will reduce the number of families that will need to bring their original documents to a DSS office.

Category	Exempt or Must Document	Comment
Foster care children and children receiving adoption assistance, applying for or renewing coverage	Exempt	These are children typically receiving care or services from DCF.
Newborns born to mothers on Medicaid	Exempt for one year from birth	At renewal, family will have to prove citizenship and identity of the infant. One-year exemption does not apply to newborns born to mothers who received emergency Medicaid coverage for labor and delivery of the baby. These women are often undocumented. However, their newborns are by definition US citizens, because they were born here. These babies should get immediate coverage through the presumptive eligibility (PE) process at hospitals, or at other qualified entity (QE) sites.
Pregnant women with Expedited Eligibility (EE)	Exempt during EE period. Must document citizenship and identity. So long as she is cooperating with gathering information, pregnant woman should remain enrolled.	EE expedites access to care by providing temporary Medicaid coverage for pregnant women (5 days to process application with minimal verification; 1 day for emergency need for care.)
Women with breast and cervical cancer	Exempt	These are women under age 65, who are not otherwise eligible for Medicaid, and are screened at a Centers for Disease Control and Prevention's National Breast Cancer & Cervical Cancer Early Detection Program
Medicare <i>applicants</i> or enrollees who are applying for or renewing Medicaid coverage.	Exempt	"Dual eligibles" (elderly and non-elderly disabled persons on Medicare and Medicaid)
Supplemental Security Income (SSI) recipients applying for or renewing Medicaid coverage	Exempt	

Category	Exempt or Must Document	Comment
Social Security Disability Insurance (SSDI) recipients; widows and adult children receiving Social Security (SS) benefits due to a disabling condition, applying for or renewing Medicaid coverage	Exempt	
State Supplementary Cash Assistance recipients	Must document both citizenship and identity but see next column. . .	State Supplement recipients typically receive SSI, or a low amount of Social Security or SSDI. State Supplement recipients <b>automatically</b> receive Medicaid. As a practical matter, most of them will be <b>exempt</b> due to receipt of SSI, Social Security or SSDI, and will receive Medicaid because Medicaid and State Supplement are linked in the DSS computer system.

### Groups who are *not affected* by the new Medicaid requirements

Category	Comments
HUSKY B, SAGA, Food Stamp, or TFA program applicants	Only Medicaid applicants are affected by the documentation rules.
Legal immigrants applying for Medicaid	The rules for legal immigrants have not changed. They were already required to document their immigrant status to obtain benefits.
Undocumented immigrants	Undocumented immigrants remain eligible for Medicaid coverage for emergencies only. For example, an undocumented pregnant woman could obtain emergency Medicaid coverage for labor and delivery, but not for pregnancy related or post-partum related medical care.

<sup>1</sup> State and federal policies on the implementation of the Medicaid citizenship and identity rules are changing frequently. CT Voices will update this and other fact sheets as new information becomes available. Please check the CT Voices Web site at [www.ctkidslink.org](http://www.ctkidslink.org) for updates.