

1.17 ILLEGAL ALIENS

A. APPLICATION FORMS

The **DFA-2** is always required.

B. COMPLETE APPLICATION

When the client or his representative signs a **DFA-2** which contains, at a minimum, his name and address the application is complete.

C. DATE OF APPLICATION

The date the client or his representative signs the **DFA-2** or **DFA-5** which contains, at a minimum, his name and address is the date of application.

NOTE: When the applicant has completed the interactive interview, and there is a technical failure that prevents the printing of the **DFA-2**, Form **DFA-5** must be signed by the applicant, attached and filed in the case record with the subsequently printed **DFA-2**. The **DFA-RR-1** must also be completed and signed. He must not be required to return to the office to sign the **DFA-2** when the **DFA-5** has been signed.

D. WHO MUST BE INTERVIEWED

The client or his representative must be interviewed.

E. WHO MUST SIGN

The client or his representative must sign the **DFA-2**.

F. CONTENT OF THE INTERVIEW

In addition to the interview requirements in Section 1.3, the following must be discussed in the interview:

- Use of the medical card
- That the illegal alien's medical coverage ends when the medical emergency ends.

G. DUE DATE OF ADDITIONAL INFORMATION

The Worker and the client agree on a reasonable period of time for the client to provide the information.

H. AGENCY TIME LIMITS

Agency time limits are as follows:

- Thirty (30) days, if based on a deprivation factor other than disability.
- Ninety (90) days, if disability must be established.

I. AGENCY DELAYS

When the Department fails to request necessary verification, the Worker must immediately send a verification checklist or form **DFA-6** to request it. He must inform the client that the application is being held pending. When the verification is received and the client is eligible, medical coverage is retroactive to the date of the medical emergency.

J. PAYEE

The client who is the illegal alien is the payee.

K. REPAYMENT AND PENALTIES

This does not apply.

L. BEGINNING DATE OF ELIGIBILITY

Eligibility begins the date the medical emergency is diagnosed.

M. REDETERMINATION SCHEDULE

The redetermination schedule is the same as for the coverage group for which the alien is approved. However, the case is opened when treatment for the medical emergency begins and closed at the end of the medical emergency, even if it is prior to the redetermination date.

When the client has an ongoing emergency, the Worker must check periodically to determine if the emergency has ended. **If a Medical Review Team decision was part of the client's eligibility determination, MRT redetermination requirements apply.**

N. EXPEDITED PROCESSING

There is no expedited processing requirement.

O. CLIENT NOTIFICATION

See Chapter 6.

P. DATA SYSTEM ACTION

Each application requires data system action to approve, deny or withdraw.

Q. REDETERMINATION VARIATIONS

When the emergency continues, and the case requires a redetermination, the process is the same as the application process.

R. THE BENEFIT

RAPIDS issues a medical card for the valid POE. See Chapter 16.

S. ENDING DATE OF ELIGIBILITY

Eligibility for emergency Medicaid coverage ends on the day that the medical emergency ends.