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Authorized Signature

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Topic: Medical Benefits

Subject: Procedure clarifications for citizenship and identity documentation

Applies to (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> All DHS employees
<input checked="" type="checkbox"/> Area Agencies on Aging
<input type="checkbox"/> Children, Adults and Families
<input checked="" type="checkbox"/> County DD Program Managers | <input type="checkbox"/> County Mental Health Directors
<input type="checkbox"/> Health Services
<input checked="" type="checkbox"/> Seniors and People with Disabilities
<input type="checkbox"/> Other (please specify): |
|--|---|

Message:

New requirements for citizenship and identity documentation were implemented effective September 1, 2006. Since implementation, there have been many questions and requests for clarification. This list of frequently asked questions has been compiled and provided as a response.

Additionally, a list of OMAP contracted outreach sites have been attached.

Citizenship Policy Update:

During training, we identified some areas of policy or procedure that have necessitated change. Please read the following carefully as the answers may have changed since the training was presented in August.

- If an applicant or recipient has a passport but does not have immediate access to it, and they have their birth certificate, birth information on BBCN or any other 2nd level documentation, we will use the 2nd level documentation instead of pending for a passport. Identity must also be verified with 2nd level citizenship documentation.
- In cases where reception staff has RACF update authority for data entry, they can view the original citizenship and identification documentation, make copies for the client file, and enter the information on the CI Person/Alias Update screen. Branches may set up their own processes.
- If the applicant or recipient meets the hardship criteria, we can make a payment for

citizenship documentation via special cash pay with a reason code of “30.” DHS cannot reimburse the client; the cash payment needs to go directly to the appropriate state’s vital records. To order a birth certificate for clients meeting the hardship criteria:

- Go to the CDC “Where to Write for Vital Records” website at: <http://www.cdc.gov/nchs/howto/w2w/w2welcom.htm>. The website has links to each state’s vital records for birth certificate requests.
- Follow the state’s instructions for ordering a birth certificate and complete the required letter or form. The requirements vary by state; for example, some states require the client or the client’s parent sign a statement authorizing the request for a birth certificate.
- Mail the required letter or form requesting the birth certificate. Enclose a revolving fund check in the correct amount with a pay reason code of 30.

Questions & Answers

Q1: If our office orders and pays for a birth certificate or other documentation needed, do we keep the original document in the client’s file, or do we copy the original and give the original to the client?

A1: We would copy the original, make a note on the copy that we viewed the original document, and give the original to the client.

Q2: Can we use an expired passport?

A2: Yes, as long as the picture is not so old that it no longer matches the applicant or recipient, or you determine it is otherwise questionable. The only stipulation for using a passport is there cannot be limitations on the passport. If there are limitations, the passport can only be used as identity documentation.

Q3: If we receive copies of citizenship and identity documentation from another DHS office or branch, and it is date stamped, can we take it as fact that they viewed the original copy or a certified copy from the issuing agency?

A3: Not necessarily. The staff worker who viewed the original documents should make a copy and indicate on the copy they viewed the original document before sending the copies to another office. In cases where another branch has indicated they saw the original documents, we will take it as fact. Some branches are creating a branch stamp that states they have viewed and copied the original documents.

Q4: If another state has already documented an individual’s U.S. citizenship and identity, can they send me a copy of what they have in their file so my applicant does not have to show it again?

A4: No. We cannot hold another state accountable if they didn’t really get the required verification. We must view the original documentation.

Q5: We have had clients who have an August date of request who moved to Oregon from another state and won't be eligible until September or October because they have medical benefits that must first end in the other state. We also have other applicants with an August date of request who for some reason were not eligible in August (maybe they were over income for the August budget month), but will be eligible in September (floating budget month). Do we require proof of citizenship and identity?

A5: Not if the date of request was in August, and they can meet all eligibility requirements within 45 days from the date of request.

Q6: Does the [DHS 0695](#) need to be notarized?

A6: No.

Q7: Does a client with only a PIF qualify for hardship (NF or CBC)?

A7: They must have indicated that they have a hardship and then meet the hardship criteria.

Q8: How will we pay for documentation after February 2007?

A8: DHS will not pay for documentation after February 2007. Staff can help the client locate other resources that may assist with payment.

Q9: If an individual stops receiving SSI, do we have to document citizenship and identity?

A9: If the Client Information (CI) screen indicates that there is a data match with acceptable documentation, no further documentation is necessary. If the CI screen indicates that there is not a data match, verification must be obtained.

Q10: Do we update CI when they receive SSI or Medicare?

A10: No. Receipt of SSI or Medicare does not always mean someone is a citizen. If the system has an acceptable data match with SSA, CI will update. If not, verification of the federal benefits and narration of the exclusion from the requirement is sufficient.

Q11: On a home visit, do I need to obtain a copy of the documentation or is narration and CI coding enough?

A11: If the client is on SSI or is receiving Medicare than CI coding and narration will be sufficient. If the person is an applicant and does not meet the exclusions, than you will need to get copies for the file.

Q12: To prove citizenship, can we use the hospital record of birth, the one with the little footprints?

A12: These documents are commonly referred to as 'souvenir' documents and are not acceptable verification for citizenship.

- Q13:** We do not require proof of citizenship and identity for Medicare or SSI recipients, but what about those who are receiving SSDI but who are not Medicare recipients? They have to meet the same eligibility requirements as those receiving SSI, right?
- A13:** Although the eligibility requirements are the same for SSI and SSDI recipients, we must require proof of citizenship and identity for those recipients of SSDI. The federal decision to give an exemption to SSI or Medicare recipients did not include SSDI recipients without Medicare.
- Q14:** I have sent for birth certificates from other states in the past. There were many times that I did not receive the birth certificate within 45 days. Because DHS sent and paid for the document, we exercised some flexibility and did not automatically deny benefits as this was beyond the client's control. Is this an acceptable practice?
- A14:** If you were waiting for the necessary citizenship and identity documentation from another state, you would extend the 'reasonable opportunity period' for a new applicant, but would not open medical benefits until you had determined they met all eligibility criteria including proof of citizenship and identity. Narrate why you are extending this 45-day period, but do not open medical assistance until you have the necessary documentation. For a current recipient, you would extend the 'reasonable opportunity period', and they would continue to receive medical assistance while waiting to get the necessary documentation.
- Q15:** Would we pay for a passport?
- A15:** No, we would not pay for a passport, naturalization papers, or a driver's license. We would pay for out of state birth certificates or Oregon ID, if necessary.
- Q16:** What about births assisted by midwives?
- A16:** The document or written statement by a mid-wife falls in 4th level documentation. It must have been created at least 5 years prior to the Medicaid application, and must give date and place of birth.
- Q17:** If a client has a passport at home, but they were born in Oregon and have information available on BBCN, do we have to pend their application for the passport?
- A17:** No. If we can access the information on BBCN, and they can provide an acceptable form of ID, we will not pend for the passport. (This was one of our policy clarifications.)
- Q18:** What about those governmental documents that state, "Do not copy"?
- A18:** We had clarification from Vital Statistics. As long as it is for purposes of providing a benefit for a recipient or applicant, we can make a copy for our file. However, if the client comes in at a later date and states they need a copy because they lost the original, we cannot make a copy for them.

Q19: What level of documentation does the Social Security card fall under?

A19: The Social Security card is not included as acceptable documentation of citizenship or identity.

Q20: If a client cannot provide the required documentation for citizenship and identity, can we give them CAWEM if they are otherwise eligible?

A20: No, we cannot give them CAWEM benefits when they cannot provide citizenship and identity documentation. If they declare citizenship on their application, we cannot consider them for CAWEM. The CAWEM program is for non-citizens.

Q21: I understand there is going to be a form the OMAP outreach facilities can use to attest they have viewed the original citizenship and identity documents. How will we know if it is as an OMAP contracted outreach site (many places state they are) and how will we know if they really have seen the original documents?

A21: The form is the OHP 7203. OMAP developed it for use by the contracted outreach centers. We will accept this form when it is date stamped by the outreach center and bears the outreach facility's identification code. For questions on these forms, email Nancy Horn or contact one of the medical policy analysts. A copy of the contracted outreach sites is attached, as is a copy of the OHP 7203.

Q22: Can we use the Child Support screens to verify a child's identity?

A22: No. When Child Support creates the screen, they do not verify the child's birth date or place of birth.

Q23: What happens if a client cannot provide Citizenship documentation and we need to deny their application?

A23: Local offices will need to set up guidelines for review of potential denials and contact Central Office (Jennifer DeJong or Jeff Miller) for final review prior to issuing a denial based on citizenship documentation.

Data Matches with other Agencies

After careful review, we believe the Department of Motor Vehicles (DMV) data provided on the WVIR screen meets the federal guidelines for acceptable documentation for a client's identity (not citizenship). Make a copy of the WVIR screen (provides client's name, birth date, height, weight, and gender) for the client's file, or copy and paste the screen-print into Oregon ACCESS.

No Wrong Door

There are concerns about the differing processes between branches to document citizenship and identity. DHS has committed that there will be no wrong door for clients when they submit their documentation. If an individual brings original documents to any DHS office or branch, even when the client's case is in another branch, the following

steps must be taken:

- Accept whatever original documents or certified copies from issuing agencies the client brings in.
- Copy and return the original documents to the client.
- Date stamp the copies, make a note on them that we have viewed the original documents (some branches have a date stamp that already says this), and sign or initial.
- Some branches are taking the initiative to review the documents provided, and if the documents meet the requirements of citizenship and identity for this provision, they are updating the CI Person/Alias Update screen before they send the copies to the appropriate branch. This is a decision that can be made on the branch level.
- Narrate in Oregon ACCESS that the client brought in documentation, state what the documentation was, and what branch it is being sent to if it is going to another branch.

It is important that reception staff understand the procedures outlined above. DHS is developing a NetLink specifically for reception staff and it should be delivered in the next few weeks.

Keep us posted on questions and concerns, and we will continue to work together to resolve them. Thank you all for your hard work and dedication as we implement this challenging provision.

If you have any questions about this information, contact:

Contact(s):	Jennifer de Jong		
Phone:	503.945.5856	Fax:	503.373.7902
E-mail:	Jennifer.d.dejong@state.or.us		

OMAP CONTRACTED OUTREACH SITES

August 2006

Disproportionate Share Hospitals: (5)

Harney District Hospital
Silverton Hospital
Adventist Medical Center
Legacy Emanuel
Oregon Health Sciences University

Federally Qualified Health Centers in Oregon: (146)

Asher Community Health Center (1)
Benton County Health Department (3)
Central City Concern (7)
Clackamas County Health Services (3)
Columbia River Community Health Services (1)
Coastal Family Health Center (1)
Community Health Center, Inc. (3)
Community Health Centers of Lane County (3)
Klamath Health Partnership (2)
La Clinica del Carino (2)
La Clinica del Valle (6)
Lincoln County Health Services (6)
Multnomah County Health Department (56)
Native American Rehabilitation Association (4)
Northwest Human Services (9)
Ochoco Health Systems (3)
Outside In (1)
Siskiyou Community Health Center (4)
Tillamook County Health Department (4)
Umpqua Community Health Center (4)
Valley Family Health Care (5)
Virginia Garcia Memorial Health Center (5)
White Bird Clinic (3)
Yakima Valley Farm Workers Clinic (6)

FQHC Look-Alike (1)

OHSW Richmond Clinic (1)

Federally Qualified Health Centers – IHS Clinics (3)

Grande Ronde Health Center
Siletz Community Clinic
Coquille Indian Tribe

HIS/Tribal (18)

Chemawa Indian School
Confederated Tribes of the Coos, Lower Umpqua and Siuslaw
Confederated Tribes of Siletz (5)
Coquille Indian Tribal Community Health Center
Cow Creek Health and Wellness
Grande Ronde Health and Wellness Center
Klamath Tribal Health and Family Services
Native American Rehabilitation Center (NARA) (4)
Wadatika Health Center
Warm Springs Health and Wellness
Yellowhawk Tribal Health Center

Other Contracted Outreach Sites: (105)

Ashland Community Hospital
Baker County Health Dept
Best Care Treatment
Buckley Center
Center for Human Development
Chiloquin Family Practice
Clatskanie Family Health Clinic
Clatsop County Health Department
CODA, Inc
Columbia Health Department
Columbia Memorial Hospital
Community Outreach Clinic
Coos County Public Health
Crook County Health Department
Curry County Public Health
Curry County Public Health
Deer Creek Adolescent-ADAPT
DePaul Youth Services
Deschutes County Health Department
Deschutes HD/Becky Johnson Center
Douglas County Health Department

Good Samaritan Regional Med Center
Good Shepherd Med Center
Grande Ronde Hospital
Grant County Health Department
Head Start of Yamhill County
Hermiston Community Health Clinic
Hood River County Health Department
Jackson County Hazel Center
Jackson County Public Health
Jackson County/Mental Health
Jefferson County Health Department
Josephine County Health Department
Kaiser / Sunnyside
Klamath County Health Department
Klamath County Mental Health
Klamath Tribal Health & Family Services
Lake County Public Health
Lakeside Clinic
LaPine Community Clinic
Legacy Emanuel
Legacy Good Samaritan
Legacy Meridian Park Hospital
Legacy Mt Hood Hospital
Linn County Department of Health Services
Linn County Department of Health Services
Linn County Dept of Health
Lower Umpqua Hospital District
Malheur County Health Department
Marion County Health Department
McKenzie-Willamette Medical Center
Mercy Medical Center
Morrow County Health Department
Mountain View Hospital
New Directions NW
OHSU/EOU School of Nursing (Advocacy Group)
On Track Inc
Oregon Health Access Project (Advocacy Group)
Peace Harbor Health
Peace Health Medical Group
Pine Eagle Health Clinic
Pioneer Memorial Hospital
PMSI - A Pacific Medicaid Services
PMSI - McKenzie Willamette Hosp

PMSI - Portland Adventist Hosp
PMSI - Salem Hosp Birthing Center
PMSI - Salem Hosp/ ER Dept
Polk County Public Health
Providence McClaine St Clinic
Providence Medford Medical Center
Providence Milwaukie Hospital
Providence Newberg Hospital
Providence Portland Medical Center
Providence Seaside Hospital
Providence St Vincent Medical Center
Providence St. Vincent-Prenatal
Rimrock Trails ATC
Rogue Valley Medical Center
Rosewood Family Clinic
Sacred Heart Med Center
Salem Hospital
Salud Medical Center
Samaritan Albany General Hosp
Samaritan Lebanon Comm Hosp
Samaritan North Lincoln Hosp
Samaritan Pacific Health Services
Santiam Memorial Hospital
South Lane Medical Group
Southern Coos Hospital
St Charles Medical Center
Three Rivers Community Hospital (Asante)
Tillamook County General Hosp
Tuality Health Care
Umatilla County Public Health
Village Clinic
Wallowa County Health Department
Wasco County Public Health
Washington County Dept of Health & Human Services
West Valley Hospital
Wheeler County Health Office (Asher)
Yachats Community Health Center
Yamhill County Public Health

Beginning September 1, 2006, a new federal law requires most people who are applying for medical benefits to show proof of U.S. citizenship **and** proof of identity.

This requirement does not apply to people who are:

- Not U.S. citizens (current requirements still apply)
- Receiving Medicare or Supplemental Security Income (SSI)
- Not applying for medical benefits (i.e., a family asking for benefits for the children would only need to provide the children's proof of citizenship and identity)

Only the documents listed on the Documents Accepted as Proof of U.S. Citizenship and Identity (OHP 7205) can be used to prove U.S. citizenship and identity.

Documents must be originals or copies certified by the issuing agency. Each applicant's documentation must be viewed and copied by either:

- A DHS field office, or
- An Office of Medical Assistance Programs (OMAP) contracted Outreach Facility.

OMAP contracted Outreach Facilities

If the applicant's documents are viewed at an OMAP contracted Outreach Facility, the Facility must:

- Complete this form, and
- Attach copies of the documents that were viewed.

This form and copies of documents can be mailed to DHS by the Outreach Facility or the applicant.

<p>① Outreach Facility Information:</p> <p>Name: _____</p> <p>Address: _____</p> <p>Phone: _____</p>	<p>② Date Stamp – stamp must include facility code</p>
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③ Name and address of person signing the OHP Application:

Name: _____

Address: _____

④ List of proof viewed

Full Name (Last, First, MI)	Date of Birth	Name/type of proof provided for:	
		U.S. Citizenship	Identity

⑤ Authorized signature

By signing this form I attest under penalty of perjury that:

- I have read and understand the Terms and Conditions of the OMAP Outreach Facility contract, and
- The documents that I listed for each applicant were either originals or copies certified by the issuing agency.

Signature _____ Date _____

Print Name and Title _____