

Emergency Medicaid Overview: Emergency Services for Certain Non-Citizens



This handout is for assisters working directly with clients to help explain and support applications for Emergency Medicaid. Updated November 2022.



Talking points to share with clients

- Emergency Medicaid pays for emergency health care services received in the past three months. Emergency Medicaid does not pay for not routine health care services.
- People who meet all eligibility criteria for Health First Colorado except immigration status are generally eligible for Emergency Medicaid.
- Under Federal law all hospitals are required to provide emergency services regardless of a person's immigration status, nationality, or ability to pay.
- Applications for Emergency Medicaid can be completed at the hospital while receiving treatment, or via typical methods (paper application, online via PEAK, over the phone, and in person).
- The use of Emergency Medicaid is not considered in a public charge test. For more information about speaking to clients about public charge, see CKF's [Key Points for Assisters to Help Clients Understand the Final Public Charge Rule](#).
- Information clients share on an application is confidential and cannot be shared with any Federal agency, including U.S. Citizenship and Immigration Services
- HCPF encourages all uninsured people to apply for Health First Colorado to see if they qualify, even if they are unsure of their immigration status
- *New* General information about Emergency Medicaid is available on HCPF's [Emergency Medicaid webpage \(Spanish version\)](#)



Program Overview

What is Emergency Medicaid?

Emergency Medicaid, also known as Emergency Health First Colorado or Emergency Medical Services, is a program run by the Colorado Department of Health Care Policy and Financing (HCPF). Emergency Medicaid provides short-term health coverage, through Medicaid, for emergency care for eligible uninsured non-citizens.

Who is eligible for Emergency Medicaid?

Uninsured non-citizens who meet all the criteria (e.g., income, age, residency) for any Health First Colorado (Colorado's Medicaid Program) program (e.g., MAGI or non-MAGI programs), except for citizenship and immigration status, are eligible for Emergency Medicaid.

This includes but is not limited to:

- People without documentation
- Adult legal permanent residents ('Green Card' holders) who have not reached the 5-year bar of lawful presence (children and pregnant people in this category are eligible for Medicaid with full benefits)
- Deferred Action for Childhood Arrivals (DACA) recipients
- Nonimmigrant visa holders such as tourists and students
- Individuals granted Temporary Protected Status

For a complete list of eligibility by immigration status, see CKF's [Immigration Status and Eligibility for Health Coverage Programs](#).

What services does Emergency Medicaid cover?

Covered services

Emergency Medicaid only covers emergency care received in the past three months that is described as treatment for "life or limb-threatening emergencies" in which "the absence of immediate medical attention could reasonably be expected to result in:

1. placing the patient's health in serious jeopardy;
2. serious impairment of bodily function; or
3. serious dysfunction of any bodily organ or part."¹

Examples of covered services include but are not limited to:

- Severe symptoms from COVID-19
- Labor and delivery (not including prenatal or post-natal care)
- Dialysis for End-Stage Renal Disease at home, an inpatient or freestanding dialysis center
- Life-threatening symptoms, like chest pains
- Life-threatening illnesses, like heart attacks
- Life-threatening accidents

Services must be determined as emergency treatment by the residing physician to be covered.

Emergency Medicaid will not cover physician appointments, prenatal or other routine care, or care that is not certified by the physician as emergency care.

¹ 10 CCR 2505-10 8.100

<https://www.sos.state.co.us/CCR/GenerateRulePdf.do?ruleVersionId=6868&fileName=10>



Applying for Emergency Medicaid

People can apply for Emergency Medicaid at the hospital at the time of the emergency care or after for care received in the past three months. Pregnant people seeking coverage for an upcoming labor and delivery can apply at any time throughout the pregnancy or after the labor and delivery. Applications must include a full Medical Assistance application, either on paper, by phone, or via PEAK.

Applicants are enrolled in Emergency Medicaid for a year following their initial application and approval. This means that do not need to reapply for each 'instance of care,' as was the previous practice. For example, an individual who has Emergency Medicaid in December for a heart attack and then requires emergency treatment for COVID-19 in the same month or for a car accident 6 months later, does not need to reapply for coverage.

Income eligibility for Emergency Medicaid is generally calculated retroactively based on the applicant's income during the month the emergency occurred. For pregnancy, income from the month of application or the prior month will be considered.

Recent Changes of Note:

- As of August 2021, applicants are not required to submit a physician's statement or county form attesting that their treatment was for a medical emergency.
- As of August 2022, applicants were enrolled in Emergency Medicaid for a year after their enrollment date. This means that members do not need to reapply for each 'instance of care,' as was the previous practice.

Applying for Emergency Medicaid at the hospital

While at the hospital receiving emergency treatment, clients can:

- Ask the patient advocate or benefits navigator for a Medical Assistance application to apply for Emergency Medicaid and submit the application.
- Remind the physician of the need to code the treatment as a medical emergency when submitting the claims for billing. This ensures that services will be covered under Emergency Medicaid.

Applying for retroactive coverage (or prospective coverage for pregnancy)

Individuals can apply for Emergency Medicaid through all the methods available for other Medical Assistance programs and must complete a full application.



Paper/Mail

- Local County Office
- Application Assistance Sites



In Person

- Local County Office
- Application Assistance Sites



Phone

- Medical Assistance:
State Call Center
800-221-3943



Online

- Anywhere
- Anytime

While Medical Assistance applicants are asked to provide a social security number, individuals do not need a social security number to receive emergency services under Emergency Medicaid.

The Reproductive Benefits program and Emergency Medicaid are both eligible to non-citizens who are not eligible for full Medicaid benefits, and are grouped together in one application question. Answering yes to this question does not mean that the person must also want to access reproductive benefits.

Applicants should complete the full application and answer yes to the following question:

“Applicants who are not a U.S. citizen, or legal resident for at least 5 years, cannot receive full Medicaid benefits, but they may qualify for Emergency Medicaid and Reproductive Benefits. Emergency Medicaid and Reproductive Benefits can cover life-threatening emergencies, labor and delivery for pregnant people, and birth control. Does this person want to apply for Emergency Medicaid and Reproductive Benefits?”

Tips for applying for Emergency Medicaid on PEAK

- *People in the Household* page: Applicants should indicate that they are seeking retroactive coverage and for which months. If the applicant does not indicate they have retroactive medical bills, they will not see the questions about *Other Bills* and *Medical Costs*.
- *Citizenship* page: Applicants should enter all the applicable information about their immigration status.
- Applicants should choose the relevant non-citizenship status and answer the following question: “Does [applicant name] want to apply for Emergency Medicaid and/or Reproductive Benefits”?

Application Next Steps

Following the application, individuals will receive:

- A Verification Check List with a request to submit verification for income, if not submitted with the application. Clients have 10 days to respond to this verification request and 90 days to respond to a request about citizenship and identity if this is requested.

- A Notice of Action (NOA) letting them know of their eligibility determination. Appeal rights apply if the applicant disagrees with the eligibility determination. No additional action is required for applicants with a NOA of approval.



Frequently Asked Questions

Application questions:

Do clients need to complete a new application if they applied for Emergency Medicaid before?

Clients only need to complete the application every 12 months. Clients will receive a renewal packet to complete in their regular renewal month.

My client is being billed for emergency care they recently received. Can I help them apply for Emergency Medicaid retroactively?

Yes, Emergency Medicaid is available for emergency care received in the past three months. Your client will need to submit a full Health First Colorado application, indicating their non-citizenship status and that they have medical bills from the past three months.

My client applied for Emergency Medicaid but has not received a request for additional information or NOA of approval or denial. How can I help?

The best practice is to call your client's County Human/Social Services Department and ask for an eligibility technician. You will need your client's case number and your client present or a signed consent form from your client to speak on their behalf.

Benefits questions:

What information should I know for clients with End-Stage Renal Disease?

Dialysis is covered for an individual diagnosed with End-Stage Renal Disease (ESRD) at either an inpatient facility or free-standing dialysis center. However, dialysis is not covered in the hospital-based outpatient setting or at the individual's home. To apply for Emergency Medicaid coverage for ESRD, individuals must submit a full Health First Colorado application (see process described above). Since Emergency Medicaid only provides coverage for one-month at a time, clients must re-apply for Emergency Medicaid each month in which they need coverage for dialysis. More information is available in HCPF's [Frequency Asked Questions: Emergency Medicaid & End-Stage Renal Disease Policy](#) resource.

Is chemotherapy for cancer covered by Emergency Medicaid?

No, chemotherapy treatment is not covered by Emergency Medicaid because chemotherapy is generally not considered emergency medical treatment. If an individual's cancer progresses to the point that their symptoms require emergency treatment, care will be covered at that point. Routine care and care prior to the emergency, such as chemotherapy, is not be covered.

Does Emergency Medicaid cover any follow-up treatment after emergency care?

No, Emergency Medicaid does not cover follow-up treatment after care for the emergency medical condition is completed. In addition, Emergency Medicaid will only cover treatment that is designated by a physician as necessary to treat the emergency. Therefore, if a physician decides that a CT scan, for example, is necessary to treat the emergency medical condition, then the scan will be covered. However, if a client receives a CT scan separately from the emergency treatment, then it will not be covered.

Questions about pregnancy related services:

Can pregnant people apply for Emergency Medicaid in advance?

Yes, pregnant people may apply for Emergency Medicaid as early as when they find out they are pregnant. They may also apply retroactively after giving birth.

Will Emergency Medicaid cover miscarriage?

Yes, if a miscarriage is considered an emergency by the physician, then it will be covered under the labor and delivery provision of Emergency Medicaid.

My client has Emergency Medicaid for their pregnancy but was hospitalized for a separate emergency condition. Do they need to reapply for Emergency Medicaid to have that treatment covered?

No, individuals do not need to reapply if they were approved for Emergency Medicaid in the past 12 months.

I still have questions about Emergency Medicaid and/or need help in supporting my clients in applying for EM. Who can I contact with specific questions about Emergency Medicaid?

General information and frequently asked questions are available on HCPF's [Emergency Medicaid webpage \(Spanish version\)](#). Additional information is available in HCPF's [Operational Memo 21-056, Emergency Medicaid](#). Send questions to the HCPF's Medicaid Eligibility inbox at hcpf_medicaid.eligibility@state.co.us.