

Medical Coverage for Refugees; REFM

- (1) Benefits in the Refugee Assistance Medical (REFM) program are the same medical coverage as any Medicaid or CHIP program, except the Qualified Medicare Beneficiaries (QMB) program.
- (2) An individual is not required to meet the financial eligibility criteria for the REFM program if the individual meets all the non-financial eligibility criteria for the REFM program and the requirements of at least one of the following subsections:
 - (a) The individual loses eligibility for any Medicaid or CHIP program, except the QMB program, due to income from employment.
 - (b) The individual loses eligibility for any Medicaid or CHIP program, except the QMB program, and is currently receiving benefits in the Refugee Assistance (REF) program.
 - (c) The individual had medical assistance established in another state based on refugee status granted by the United States Citizenship and Immigration Services, and:
 - (A) Moved to Oregon and is still within the individual's first twelve months in the United States; and
 - (B) Was found not eligible for any Medicaid or CHIP program other than the QMB program.
- (3) An individual who is determined eligible for the REFM program will maintain eligibility for the REFM program for the remainder of their eligibility period, as per OAR [461-135-0900](#)(4), even if the individual loses eligibility for the REF program due to having income equal to or over the *countable* (see OAR [461-001-0000](#)) income and *adjusted income* (see OAR [461-001-0000](#)) limits (see OAR [461-155-0030](#)).
- (4) An individual applying for the REFM program is not required to apply for or receive benefits in the REF program.

- (5) Except for the QMB program, *eligibility* for all Medicaid and CHIP programs must be determined prior to determining *eligibility* for the REFM program.
- (6) When a newborn is born to a member of a REFM program *benefit group* (see OAR [461-110-0750](#)):
 - (a) Members of the *benefit group*, may continue to receive REFM program benefits for the remainder of the twelve months, as stated in OAR [461-135-0900](#)(4), if the member is determined ineligible for all Medicaid and CHIP programs.
 - (b) The newborn may receive REFM program benefits for the remainder of the twelve months of the *benefit group*, if the newborn is determined ineligible for all Medicaid and CHIP programs.
- (7) To be eligible for the REFM program, an individual may not be enrolled in Medicare.

Statutory/Other Authority: ORS [409.050](#), [411.060](#), [411.404](#), [413.085](#), [414.685](#)

Statutes/Other Implemented: ORS [409.010](#), [411.060](#), [411.404](#), 45 CFR 400

[Previous Rules](#)

This website displays unofficial previous administrative rule versions with an effective date of January 1, 2014 and after. For earlier administrative rule versions, submit a public records request to the [Secretary of State public records request website](#).