

## **Waiver to Allow Refugee Medical Assistance Coverage for Full-Time Students** **Policy Letter 23-07**

*Published September 28, 2023*

ORR is issuing this policy letter (PL) pursuant to 45 CFR 400.300 to notify states<sup>1</sup> that ORR will waive, upon request, 45 CFR § 400.100(a)(5), thus authorizing the provision of Refugee Medical Assistance (RMA) to ORR-eligible individuals who are full-time students at institutions of higher education. This measure is consistent with refugee policy objectives and will allow ORR-eligible populations to receive critical services that will promote their health, well-being, and overall successful resettlement.

### **I. Background**

As per 45 CFR § 400.93, states must provide any individual wishing to do so an opportunity to apply for medical assistance and must determine the eligibility of each applicant. However, 45 CFR § 400.100(a)(5) limits RMA eligibility to individuals who are not full-time students in institutions of higher education, except where such enrollment is approved by the state as part of the individual employability plan (IEP) under § 400.79 or a plan for an unaccompanied minor under § 400.112.

Given that newly arriving ORR-eligible populations are at risk for significant health conditions related to the circumstances from which they fled or other stressors related to their migration, ORR acknowledges that a lack of healthcare coverage and access to healthcare services may negatively impact an individual's early and long-term self-sufficiency in the United States. As such, ORR will allow states to apply for a waiver of 45 CFR § 400.100(a)(5) to be able to offer RMA regardless of an individual's educational pursuits. This will allow refugees enrolled full-time in higher education and who are otherwise eligible for RMA, to access RMA.

In addition to promoting equity between full-time students and other refugees, this added flexibility also aligns RMA eligibility requirements with Medicaid and the Children's Health Insurance Program (CHIP) eligibility policies. These programs are typically administered by the state Medicaid agencies. Aligning eligibility requirements reduces burden on states by eliminating the need to determine whether enrollment in higher education is included in an individual's IEP plan or whether the RMA is for an unaccompanied minor.

### **II. Eligibility Determinations for Refugee Medical Assistance**

States must continue to ensure that ORR-eligible populations<sup>2</sup> can apply for RMA and that eligibility determinations for RMA, including for full-time students in institutions of higher education, are made pursuant to 45 CFR § 400.93-§400.104. All other RMA requirements under 45 CFR Subpart G still apply.

### **III. Applying for a Waiver**

A state can send an email titled "Full-Time Student RMA Waiver Request" to their Division of Refugee Health (DRH) Health Liaison, with copy to [DRHprograms@acf.hhs.gov](mailto:DRHprograms@acf.hhs.gov), stating that they are applying for a waiver of 45 CFR § 400.100(a)(5). If approved, the waiver will apply to all populations, rather than to an individual.

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<sup>1</sup> For the purposes of this PL, "states" refers to both states and replacement designees.

<sup>2</sup> Delineated within ORR PLs 16-01, 22-01, and 22-13

ORR will review all waiver applications for consistency with the allowances in this PL. If the request is in line with this guidance, states do not need to provide any other information or rationale in their email. ORR will notify a state as soon as possible, and no later than 130 days after its submission of the application, whether its application has been accepted or is inconsistent with the PL and therefore not accepted.

#### **IV. Time Limit of Waiver**

A waiver issued pursuant to this policy letter is effective through September 30, 2025, unless ORR announces an extension. A state may apply for the waiver any time before that date.

#### **V. Equity and Inclusion**

Within its Equity Action Plan, ORR stresses the importance of advancing equity in all its programming, consistent with the Executive Order (E.O.) on Advancing Racial Equity and Support for Underserved Communities Through the Federal Government (E.O. 13985), the E.O. on Further Advancing Racial Equity and Support for Underserved Communities Through The Federal Government (E.O. 14091), and the ACF Equity in Action Statement. ORR urges all states to commit to the following:

- Use an equity lens when developing new programming, to ensure that, unless otherwise specified<sup>3</sup>, all ORR-eligible populations, regardless of race, religion, gender identity, sexual orientation, disability, or other characteristic(s), receive fair treatment, access, and opportunity;
- Review existing programming with an equity lens; and
- Identify and eliminate barriers that may prevent the full participation in ORR programs.

ORR also strongly encourages states to practice inclusion, through purposeful collaboration and engagement with relevant communities to inform service design and delivery. ORR hopes to facilitate intentional programming that fully meets the needs of all populations; innovation and ingenuity in program design, outreach, and partnerships; and increased and equitable access to digital services and digital literacy. ORR requests that states dedicate focus to outcomes and data analysis to ensure that states and ORR can identify the impacts of this funding, enabling the adjustment of priorities to address gaps as needed.

#### **VI. Resources and Points of Contact**

For questions about this policy, contact the Refugee Policy Unit at [refugeepolicy@acf.hhs.gov](mailto:refugeepolicy@acf.hhs.gov). For programmatic questions or questions about the application of this policy, contact your DRH Health Liaison.

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<sup>3</sup> “Unless otherwise specified” is used to capture circumstances in which Congress may choose to specify the use of ORR funds, customarily in circumstances Congress deems emergent. For example, in the Afghan Supplemental Appropriations Act, 2022, Congress appropriated funds in support of citizens and nationals of Afghanistan.