



## Ohio Administrative Code

### Rule 5160:1-5-08 Medicaid: state-funded medical assistance for non-citizen victims of trafficking.

Effective: November 1, 2023

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(A) This rule describes the eligibility requirements for state-funded medical assistance for a non-citizen victim of a severe form of human trafficking.

(B) For purposes of this rule the following definitions apply unless otherwise stated.

(1) "Labor trafficking" means recruiting, harboring, transporting, or obtaining of a person for labor or services through the use of force, fraud, or intimidation for the purpose of involuntary servitude, debt bondage, or slavery.

(2) "Severe form of human trafficking" means sex trafficking or labor trafficking.

(3) "Sex trafficking" means recruiting, harboring, transporting, or obtaining of a person for the purpose of a commercial sex act where the commercial sex act is induced by force, fraud, or intimidation, or the person being induced to perform such act is under eighteen years of age.

(4) "T non-immigration status" is also known as the T Visa and provides immigration protection to victims of a severe form of human trafficking.

(C) Eligibility criteria.

(1) To be eligible for medical assistance, the non-citizen victim of a severe form of human trafficking must:

(a) Have applied for, or be in the process of preparing to file an application with the United States citizenship and immigration services (USCIS) for, "T" non-immigration status; and

(b) Be an Ohio resident as described in rule 5160:1-2-10 of the Administrative Code; and



(c) Meet the financial requirements described in paragraph (D) of this rule.

(2) An individual under this program is not required to provide a social security number.

(D) Financial eligibility.

(1) To have eligibility under this program, the individual must have countable monthly income at or below one hundred per cent of the federal poverty level (FPL) as determined in accordance with rules 5160:1-3-03.1 and 5160:1-3-03.2 of the Administrative Code. Only the individual's income is compared to the income standard. The FPL is adjusted annually.

(2) The deeming provisions set forth in rules 5160:1-3-03.1 and 5160:1-3-03.3 of the Administrative Code do not apply to the eligibility determination for a non-citizen victim of a severe form of human trafficking.

(E) Resource eligibility. There is no resource limit for individuals described in this rule.

(F) Retroactive eligibility. Eligibility for retroactive coverage of medical assistance shall be determined in accordance with rule 5160:1-2-01 of the Administrative Code.

(G) County department of job and family services (CDJFS) responsibilities. The CDJFS shall:

(1) Verify the individual has applied for, or is preparing to apply for, "T" non-immigration status with the USCIS.

(a) The CDJFS must accept the following documentation when the individual claims to have already applied for a "T" non-immigration status:

(i) Form I-797, "Notice of Action", issued by the USCIS; or

(ii) Completed Form I-914, "Application for T Non-Immigration Status"; or

(iii) Completed Form I-914, Supplement B, "Declaration of Law Enforcement Officer for Victim of



Trafficking in Persons"; or

(iv) Printouts of case status queries from the USCIS website; or

(v) Other correspondence from USCIS regarding applications, such as appointment notices.

(b) When the individual is preparing to file for "T" non-immigration status, the CDJFS shall:

(i) Verify with a sworn written statement that the individual is a victim of a severe form of human trafficking and at least one item of additional credible evidence, including but not limited to any of the following:

(A) Police, government agency, or court records or files; or

(B) News articles; or

(C) Documentation from a social services agency, domestic violence center, rape crisis center, or a legal, clinical, or medical professional, or other professional to whom the individual has reported the crime; or

(D) A written statement from any other individual with knowledge of the circumstances that provided the basis for the claim; or

(E) Physical evidence; or

(F) A written notice from the federal agency of receipt of the visa application.

(ii) Determine whether the sworn statement is credible when the individual is unable to provide any of the additional evidence listed in this rule.

(2) Determine the individual does not qualify for another category of medical assistance.

(H) Individual responsibilities. The individual shall:



- (1) Cooperate with the CDJFS to determine financial eligibility for medical assistance.
- (2) Cooperate with the CDJFS to determine non-financial eligibility for medical assistance.
- (3) Provide verification of any third-party liability or coverage of medical expenses as defined in rule 5160:1-2-10 of the Administrative Code.
- (4) Cooperate with the child support enforcement agency (CSEA) in establishing the paternity of any medicaid eligible child and in obtaining medical support and payments as described in rule 5160:1-2-10 of the Administrative Code.
- (5) Report changes within ten days to the CDJFS in accordance with rule 5160:1-2-08 of the Administrative Code. Changes include but are not limited to the following:
  - (a) Approval or denial of the application for "T" non-immigration status.
  - (b) Immigration status.
  - (c) Contact information.
    - (i) Address; or
    - (ii) Phone number; or
    - (iii) Email address.
  - (d) Marital status.
  - (e) Income.
  - (f) Pregnancy status.



(6) File a formal application for "T" non-immigration status within one year of the application date for medical assistance. When the individual fails to file a formal application, eligibility for medical assistance will be discontinued, unless it can be determined that during the year the individual:

(a) Experienced a health crisis; or

(b) Has been unable, after reasonable attempts, to obtain the necessary information from a third party; or

(c) Has other extenuating circumstances that prevented the individual from completing his or her application.

(I) There is not a limitation on the amount of time the individual can receive coverage under this medical assistance category, provided the individual continues to meet all relevant eligibility criteria.