

Applicant Eligibility Checklist

Applicant Name: _____

Residency: Verified on _____

- Parent/Guardian statement for a minor child
- current Texas driver license
- utility receipts
- voter registration card
- Texas Department of Public Safety identification card
- Social Security Administration award letter
- State On-Line Query (SOLQ) system or Wire Third Party Query (TPQY) system reports
- bank statements

Document Attached: Yes **No**

Citizenship: Verified on _____

- U.S. birth certificate
- valid U.S. passport
- certificate of naturalization (N-550 or N-570)
- certificate of U.S. citizenship (N-560 or N-561)
- Your Texas Benefits Medicaid card
- certification of birth abroad (Form FS-545 or Form DS-1350)
- report of birth abroad of a citizen of the U.S. (Form FS-240)
- U.S. Citizen Identification Card (Form I-197)
- American Indian Card issued by the Department of Homeland Security with the classification code "KIC"
- Northern Mariana Identification Card
- hospital record of birth in one of the 50 states, District of Columbia, Puerto Rico, Guam, the U.S. Virgin Islands, America Samoa, Swain's Island, or Northern Mariana Islands
- religious record of birth recorded in the U.S. or its territories within three months of birth, which indicates a U.S. place of birth showing either the date of birth or the individual's age at the time the record was made
- applicant statement of citizenship
- INS documentation regarding the status of a qualified alien under 8 USC §1641(b) or (c); or 8 USC §1612(b) and §1613

Document Attached: Yes **No**

Monthly Need for Services: Does the applicant need Medically Dependent Children Program (MDCP) services monthly?

Yes **No**

Age: Date of Birth: _____

Document Reviewed on _____

- medical records, such as immunization records
- birth certificate
- Texas Department of Public Safety identification card
- school records
- other official records that establish age

Document Attached: Yes **No**

Financial Eligibility: Document Reviewed on _____

- Texas Integrated Eligibility Redesign System (TIERS) verification
- Medicaid for the Elderly and People with Disabilities (MEPD) verification of Medicaid eligibility

Document Attached: Yes **No**

Disability: Verified on _____

- State On-Line Query (SOLQ) system or Wire Third Party Query (TPQY) system reports
- Supplemental Security Income (SSI) documentation
- Retirement Survivor and Disability Insurance (RSDI) benefits documentation
- Railroad Retirement benefits documentation
- Health and Human Services Commission (HHSC) Disability Determination Unit Documentation
- MEPD ME-Waivers (MAO) Certification
- Medicaid Buy-In (MBI) or Medicaid Buy-In for Children (MBIC) Documentation

Document Attached: Yes **No**

Medical Necessity: Document Reviewed on _____

- written notification from the MDCP nurse
- inquiry through the Form Status Inquiry (FSI) feature of the Long Term Care (LTC) Texas Medicaid & Healthcare Partnership (TMHP) Portal
- Service Authorization System (SAS) inquiry

Document Attached: Yes **No**

Living Arrangement: Is individual under 18? Yes **No**
If Yes, Verified on _____

- Applicant resides with a family member/review of guardianship documentation or statement from the applicant or family member regarding relation
- Applicant resides with a foster family that includes no more than four other unrelated children

Document Attached: Yes **No**