

## Program Eligibility Criteria for the Screening for Life and Health Care Connection Programs

Eligibility is defined by the State of Delaware Department of Health and Social Services, Division of Public Health.

An Applicant must meet the following criteria to qualify for services from the Screening for Life and Health Care Connection Programs provided by the Delaware Division of Public Health:

- **Delaware Residency**
  - Definition: An individual who is a permanent resident of the state of Delaware and intends to remain in the state of Delaware.
- **Income**
  - The Federal Poverty Guidelines for 2024 which is based on the annual household income and the household size of the applicant. A household consists of the client, their spouse (if married), and all dependent children under 18 years of age.
  - Ineligible for Medicaid/Medicare and ineligible to purchase insurance or exempt from federal insurance mandate.
- **Insurance**
  - Services provided if meeting the following criteria:
    - **Medically Uninsured**
      - Has no medical insurance.
      - Not enrolled and ineligible for Medicaid as primary health coverage.
      - Not Eligible for or a beneficiary for Medicare.
      - Ineligible to purchase health insurance or exempt from federal insurance mandate.
    - **Medically Underinsured**
      - Has insurance but breast, cervical, colorectal, lung and/or prostate screening services are not covered.
      - Has insurance with a deductible that is equal to or more than 15% of their income
- **Age and Risk Factors (Screening for Life)**

Low income U.S. Citizens, U.S. Nationals and Lawfully Present Aliens (5 or more years of residency) may be required to first apply for Medicaid/Medicare and Marketplace before enrolling in Screening for Life and Health Care Connection.

## Acceptable Documentation for the Screening for Life and Health Care Connection Programs

- **Proof of Name and Date of Birth (must not be expired)**

**Note:** If the document provided expires during the enrollment period, a new document must be submitted within 10 days of the expiration, or the enrollment will be terminated.

  - Delaware Driver's License (marked as valid for identification purposes)
  - State of Delaware Identification Card
  - Passport
  - Permanent Resident Card
  - Employment Authorization Card
  - Visa
  - Consular Card (cannot be used for Proof of Residency)
  - Birth Certificate (Can only be used for Minors)
- **Proof of Ineligibility or Exemption from Health Care Market Place**
  - Client Self-Attestation Form (Using SFL Form Only)
  - Medicaid/Medicare Denial Letter (dated within 120 days of application date)
- **Proof of Household Income (dated within 30 days of application date)**
  - Pay Stubs that show gross pay and deductions from Client and Spouse (if married) and must have client's legal name included (no aliases). Cannot accept personal checks.
    - 4 Pay Stubs for Weekly Payment
    - 2 Pay Stubs for Bi-Weekly Payment
    - 1 Pay Stub for Monthly Payment
  - SFL Employment Verification Form (can only be used if client or spouse does not receive pay stubs. No other Employment Verification forms will be accepted.)
  - Additional Income Source (Award Letters)
    - Worker's Compensation
    - Social Security
    - Disability
    - Alimony
    - Temporary Assistance for Needy Families (TANF)
    - Child Support
    - Pension
    - Unemployment
  - If Client and Spouse (if married) are self-employed, Full Tax Return (All Pages and Schedules Included and must include client's and spouse's legal names, no aliases)
  - Letter of Support (Using SFL Form Only) from the individual who provides financial support to the client. (Letter of Support cannot be provided by the spouse. Parents cannot submit Letter of Support for minor children within their household).
- **Proof of Delaware Residency (must not be expired)**
  - Delaware Driver's License (must show current address and marked as valid for identification purposes)
  - State of Delaware Identification Card (must have current address listed)
  - Current Rental/Lease Agreement (cannot be expired and must have current address listed)
  - Utility Bills/Invoices with the client's and spouse's name and current address listed (no less than 30 days prior to application date)
  - Completed SFL Address Verification Form (No other Address Verification forms will be accepted)