North Dakota Department of Human Services North Dakota Medicaid Health Coverage Summary

- Medicaid is a joint state/federal funded program that pays for the health care of certain low-income citizens and eligible legal immigrants (refugees, naturalized citizens, etc.)
- The Federal government requires states to cover certain "groups" of people under their state Medicaid plans. * Indicates federally-mandated coverage groups.
- NOTE: All foster children, children who qualify for subsidized adoption, and some caretakers automatically qualify for Medicaid (categorically eligible).
- This chart also does not include the low-income people who qualify for the **Medicare Savings Program.** Medicaid pays for their Medicare premiums, and for some with lower incomes, it also pays for their deductibles and co-insurance.

COVERAGE GROUP	*Family Coverage Group	Medically Needy Coverage Group	*Supplemental Security Income (SSI) Coverage Group (Aged Blind & Disabled)	* Children Age 6 to19 Coverage Group	*Children Age Birth to 6 Yrs & Pregnant Women Coverage Group	*Transitional Medicaid Coverage Group	Medicaid Buy-in for Children Coverage Group and Breast and Cervical Cancer Early Detection	Workers with Disabilities Coverage Group
Description of Coverage Group	Households with children and adult caretakers where deprivation exists because of a parent's absence, incapacity, unemployment, or under-employment. Assets do <u>not</u> affect eligibility. Some income deduc- tions are allowed; families can earn more and qualify.	Aged, blind and disabled individuals; parents of deprived children, and Children age 0-21. Assets affect eligibility for aged, blind, or disabled individuals.	Covers some individuals who qualify for SSI because they are aged, blind or disabled. Assets affect eligibility.	Children who live in low- income households with qualifying incomes. Assets do <u>not</u> affect eligibility.	Children and pregnant women who live in low- income households with qualifying incomes. Assets do <u>not</u> affect eligibility.	Households who were in the Family Coverage Group, but whose earned income increased so they no longer qualify. The federal government requires transitional Medicaid coverage for up to 12 months if income does not exceed 185% FPL. Assets do <u>not</u> affect eligibility.	Children who meet the Social Security Administration's definition of disability. Family's pay a monthly premium up to 5% of their gross income. Women who qualify through the Women's Way program. Assets do <u>not</u> affect eligibility.	Individuals age 16-64 who are considered disabled and who are employed. Individual pays a monthly premium up to 5% of the individual's gross income. Assets affect eligibility.
People Covered (October 2009)	18,631	9,263	7,473	6,240	6,606 (CH 2,983/PW 3,623)	6,430	59 (CWD 12/WW 47)	534
Qualifying Income: Percent Federal Poverty Level	Specific dollar amount listed in State Medicaid Plan –is <u>about 34%</u> <u>FPL</u> (net income)	83% FPL (net income) Increased in 2009 Session from about 55% FPL	Set by Social Security Admin. at specific dollar amounts (net income)	100% FPL (net income)	133% FPL (net income)	185% FPL (gross income less childcare expenses)	200% FPL (net income)	225% FPL (net income)
Family Size	Aa : :	A	A a - i	.	A (- (• • • • • •	A ·	A
1	\$311	\$750	\$ 674 (about 75% FPL)	\$903	\$1,201	\$1,670	\$1,805	\$2,031
2	\$417	\$1,008	\$1,011 (about 83% FPL)	\$1,215	\$1,615	\$2,247	\$2,429	\$2,732
3	\$523 \$629	\$1,267 \$1,526	NA NA	\$1,526 \$1,838	\$2,030 \$2,444	\$2,823 \$3,400	\$3, 052 \$3,675	\$3,434 \$4,135

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