

General Information

Medicaid

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What is Medicaid?

Medicaid is a state-administered health insurance program for low-income people, families and children, the elderly and people with disabilities. It can also lower your costs or cover more benefits if your other coverage is limited.

The Federal government provides a portion of the funding for Medicaid and sets guidelines for the program. States also have choices in how they design their program, so Medicaid varies state by state (and may have a different name your state).

Currently, not everyone with low incomes is eligible for Medicaid. Children, pregnant women, people over age 65 and people with disabilities are most likely to qualify. In most cases, children in a family of four with an income of about \$45,000 per year in 2010 are eligible for care through Medicaid or the [Children's Health Insurance Program \(CHIP\)](#).

Even if your family income is higher than this level, you should check to see if your child may be eligible for Medicaid or CHIP since many states cover children at higher income levels.

Beginning in 2014, Medicaid rules will be simpler and more people will be eligible. Virtually all adults under age 65 with individual incomes up to about \$15,000 per year will be eligible for coverage through Medicaid in every state.

Couples, pregnant women, and people with disabilities with somewhat higher incomes may also qualify. Children will qualify at much higher income levels.

The eligibility rules and benefits for Medicaid are different in each state. [Learn more about your state's Medicaid program.](#)

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Who should apply for Medicaid?

Medicaid offers health insurance for families and children, pregnant women, the elderly and people with disabilities. In some states, other people may also qualify.

The Medicaid program serves about 50 million Americans each year, many of whom are working but don't have health insurance coverage through their jobs. And beginning in 2014, many more people will become eligible to enroll in the program.

Medicaid covers a comprehensive set of benefits and is also designed to meet the needs of people who have more significant health care needs, including:

- [Pregnant women](#)
- [Children, especially those with special health care needs](#)
- [People with disabilities](#)
- [Elderly people, including those who need long-term care services and supports](#)

Medicaid and CHIP cover U.S. citizens as well as certain legal immigrants. States have the option of covering children and pregnant women who are lawfully residing in the United States but aren't citizens. Undocumented immigrants aren't eligible for Medicaid except for emergency care. [Learn more about your state's Medicaid program.](#)

Also, beginning in 2014, legal residents who aren't eligible for Medicaid may be eligible for insurance through a health insurance Exchange -- a new transparent and competitive insurance marketplace where individuals and small businesses can buy affordable and qualified health benefit plans. Exchanges will offer you a choice of health plans that meet certain benefits and cost standards. Starting in 2014, Members of Congress will be getting their health care insurance through Exchanges, and you will be able buy your insurance through Exchanges, too.

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What benefits are covered?

While Medicaid programs vary by state, there are benefits that all programs cover:

Doctor's services

- Laboratory and X-ray services
- Inpatient hospital services
- Outpatient hospital services
- Health screenings for children and treatment if medical problems are identified
- Comprehensive dental and vision services for children
- Family planning services and supplies
- Long-term care services and supports
- Medical and surgical dental services for adults
- Pediatric and family nurse practitioner services
- Services provided in health clinics
- Nurse-midwife services
- Nursing facility services for adults
- Home health care services for certain people
- Prescription drugs

There are other benefits that your state must cover for children and may also cover for adults:

- Physical, Occupational, or Speech Therapy
- Eye doctor visits, glasses
- Audiology, hearing aids
- Prosthetic devices
- Mental Health services
- Respite and other in-home long term care
- Case management
- Personal care services
- Hospice services

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How much does Medicaid cost?

Medicaid coverage is designed to be affordable for everyone who is eligible. Most states don't charge monthly premiums for coverage. The cost-sharing requirements for Medicaid vary by state, but co-payments are typically no more than \$5 per visit.

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