

WHAT DOES MEDICAID EXPANSION DO FOR ME?

A Fact Sheet for Consumers

June 2018

Here is some key information that consumers in the HCH Community might want to know about the Affordable Care Act's Medicaid expansion (sometimes called "Obamacare").

Most poor people are *eligible* for Medicaid, but not all states will offer it.

Medicaid is the main health insurance for low-income people in this country. Prior to January 1, 2014, you usually could only get Medicaid if you were very poor *and* had children OR if you were poor *and* disabled OR if you were poor *and* pregnant. **The federal law gives states the option to expand Medicaid to most non-disabled individuals who make less than 138% of the poverty limit (in 2018, that's \$16,753 a year for a household of one person).** If you have family members, you can have income higher than that and still be eligible because the benefit phases up for each person. While legal permanent residents (LPR) in the country more than five years are eligible, those who are in the country without documentation (or are an LPR here less than five years) will *not* be able to get Medicaid in most states.

Your State's decision about Medicaid is very important!

As of June 5, 2018, 33 states plus the District of Columbia have expanded Medicaid to the new group of people. The other states can change that decision at any time. (States that have not yet expanded include Alabama, Florida, Georgia, Idaho, Kansas, Mississippi, Missouri, Nebraska, North Carolina, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin and Wyoming.) In these states, people making less than \$12,140 will likely have no new options for health insurance. If you make over \$12,140 in these states, you might be able to purchase private insurance and get a subsidy to make it more affordable (see below). But for most low income people in states that did not expand Medicaid, little will likely change so the information in the rest of this fact sheet will not apply to you if you live in these areas.

All states will offer private insurance plans (with financial help) for those who earn more.

If you earn more than \$16,753 a year in states that do expand Medicaid, or earn more than \$12,140 a year in states that do not expand Medicaid, you can buy a private insurance plan. You will be able to get help paying for this plan, so it should be fairly inexpensive, but you may still have to pay something. All states will make different decisions on the amount you have to pay.

Signing up for Medicaid (or other insurance) will be easier than before.

You will need to know your full legal name, your date of birth, your Social Security number, how much you earn (if anything), and provide a mailing address but you will not need to prove a home address. Unless there's a problem matching your information, you won't need any paperwork at all. Workers at your local health clinic (or other places) will be able to help you sign up for Medicaid (or other insurance). Also remember: there is no deadline to sign up for Medicaid! Enrollment happens all year.

You will need to choose a health care provider or clinic for your regular care.

This provider or clinic will be your “medical home.” You will get your health care mainly from this place and the providers there will know you and understand your situation. Not all providers take Medicaid, but local health clinics do. Please consider choosing them when the time comes.

Important details will be different in different States.

Medicaid is different in every State. Many States don’t even call it Medicaid, but something like “TennCare” in Tennessee, “BadgerCare” in Wisconsin, or “HealthChoice” in Maryland. As States write new rules for the new law, there will be differences in things like:

- **The services offered.** Some States may cover services like dental care and eyeglasses, and other States may not. Some may pay for longer stays in alcohol and drug treatment programs, and some shorter. The basics – like doctor office visits, hospital care, lab tests and prescription medicine – will be covered everywhere.
- **The cost to you.** Medicaid is different in every state but there are guidelines that limit how much you will have to pay, if anything at all.

There is no longer a requirement to get insurance.

The law used to require most people to get insurance—you may have heard this called “the individual mandate.” Starting in 2018, there is no longer a requirement to have health insurance (though it is a really good idea to get it if you can!).

Other health programs still operate the same.

- **Veterans** still receive care through VA hospitals and TRICARE insurance. However, you might not be to get everything you need from the VA. Depending on your situation, you may be able to get some services at the VA and some through Medicaid.
- Elderly and disabled people who get **Medicare** will not have to pay anything for preventive services (like mammograms or blood pressure checks).
- **SSI** is still available for people with disabilities, but you no longer have to be disabled to get Medicaid. Because many people will now have regular doctors, it may be easier for them to prove a disability to Social Security, and they may get SSI income assistance more quickly.

What people without homes can do now:

- **Spread the word!** Share this information with your friends and family so they know the facts about Medicaid expansion.
- **Talk to your doctor, health care provider, or case manager about your future care.** Ask about any needed tests and procedures that you will be able to get with Medicaid. Ask about the best doctor for you who can meet your personal needs. Take full advantage of this new benefit.
- **For help with any of this,** talk to a case worker at your local health clinic.
- **Tell your story!** State planners need to know about the health services you need and your experiences with barriers getting help with health insurance. You could tell your story at a meeting, in an email, or in other ways. This information will help make the new system better.
- **Participate in your Consumer Advisory Board (CAB)** (or other group) for help telling your story or to get involved in other ways. *Advocate for Medicaid in states that don't have it yet!*