In Alabama, 110,000 mothers lack health insurance coverage. Of these uninsured mothers, 89,000 are in low-income families, defined here as families that are below 200 percent of the poverty line ($29,260 a year for a family of three).

One in three low-income mothers in Alabama — 34 percent — lack health insurance coverage.

Most of these mothers are uninsured because they lack access to affordable employer-based coverage and also are ineligible for public programs. Currently, a mother with two children in Alabama applying for coverage must make less than $254 per month ($3,048 per year) to qualify for Medicaid. This income level represents 21 percent of the federal poverty line for a family of three.

If a mother with two children works at a job that pays $7 an hour, she will be ineligible for Medicaid in Alabama if she works more than 8 hours a week.

Information on the earnings threshold applied to a mother with two children who is applying for Medicaid is based on a CBPP survey of state officials, and is current as of early 2001. The earnings threshold takes into account a state’s earnings disregards, but not other disregards or deductions (e.g., child care deductions). Once enrolled in Medicaid, mothers may be able to retain coverage at higher earnings thresholds than presented here. Also, pregnant and disabled mothers may be eligible for coverage at higher earnings thresholds.
ALASKA

- In Alaska, 12,000 mothers lack health insurance coverage. Of these uninsured mothers, 5,000 are in low-income families, defined here as families that are below 200 percent of the poverty line ($36,580 a year for a family of three).

- One in five low-income mothers in Alaska — 22 percent — lack health insurance coverage.

- Most of these mothers are uninsured because they lack access to affordable employer-based coverage and also are ineligible for public programs. Currently, a mother with two children in Alaska applying for coverage must make less than $1,208 per month ($14,496 per year) to qualify for Medicaid. This income level represents 79 percent of the poverty line in Alaska for a family of three.

Sources: Data on the number of uninsured women are based on a CBPP analysis of the March 2000 CPS, which provides information on people’s health insurance status during 1999. The analysis considers women aged 19 to 64 who are classified by the Census Bureau as a head of household or as the spouse of a head of household and who are living with a child aged 18 or under.

Information on the earnings threshold applied to a mother with two children who is applying for Medicaid is based on a CBPP survey of state officials, and is current as of early 2001. The earnings threshold takes into account a state’s earnings disregards, but not other disregards or deductions (e.g., child care deductions). Once enrolled in Medicaid, mothers may be able to retain coverage at higher earnings thresholds than presented here. Also, pregnant and disabled mothers may be eligible for coverage at higher earnings thresholds.
In Arizona, 148,000 mothers lack health insurance coverage. Of these uninsured mothers, 129,000 are in low-income families, defined here as families that are below 200 percent of the poverty line ($29,260 a year for a family of three).

Two in five low-income mothers in Arizona — 41 percent — lack health insurance coverage.

Nine of ten of these low-income, uninsured mothers — 89 percent — live in working families.

Most of these mothers are uninsured because they lack access to affordable employer-based coverage and also are ineligible for public programs. Currently, a mother with two children in Arizona applying for coverage must make less than $437 per month ($5,244 per year) to qualify for Medicaid. This income level represents 36 percent of the federal poverty line for a family of three.

Special Note: Arizona recently secured a waiver from the federal government to expand Medicaid coverage for mothers (and other adults) to 100 percent of the federal poverty line. The expansion is slated to go into effect later this year.

Sources: Data on the number of uninsured women are based on a CBPP analysis of the March 2000 CPS, which provides information on people’s health insurance status during 1999. The analysis considers women aged 19 to 64 who are classified by the Census Bureau as a head of household or as the spouse of a head of household and who are living with a child aged 18 or under.

Information on the earnings threshold applied to a mother with two children who is applying for Medicaid is based on a CBPP survey of state officials, and is current as of early 2001. The earnings threshold takes into account a state’s earnings disregards, but not other disregards or deductions (e.g., child care deductions). Once enrolled in Medicaid, mothers may be able to retain coverage at higher earnings thresholds than presented here. Also, pregnant and disabled mothers may be eligible for coverage at higher earnings thresholds.
ARKANSAS

- In Arkansas, 64,000 mothers lack health insurance coverage. Of these uninsured mothers, 49,000 are in low-income families, defined here as families that are below 200 percent of the poverty line ($29,260 a year for a family of three).

- One in three low-income mothers in Arkansas — 34 percent — lack health insurance coverage.

- Most of these mothers are uninsured because they lack access to affordable employer-based coverage and also are ineligible for public programs. Currently, a mother with two children in Arkansas applying for coverage must make less than $365 per month ($4,380 per year) to qualify for Medicaid. This income level represents 30 percent of the federal poverty line for a family of three.

- If a mother with two children works at a job that pays $7 an hour, she will be ineligible for Medicaid in Arkansas if she works more than 12 hours a week.

Sources: Data on the number of uninsured women are based on a CBPP analysis of the March 2000 CPS, which provides information on people’s health insurance status during 1999. The analysis considers women aged 19 to 64 who are classified by the Census Bureau as a head of household or as the spouse of a head of household and who are living with a child aged 18 or under.

Information on the earnings threshold applied to a mother with two children who is applying for Medicaid is based on a CBPP survey of state officials, and is current as of early 2001. The earnings threshold takes into account a state’s earnings disregards, but not other disregards or deductions (e.g., child care deductions). Once enrolled in Medicaid, mothers may be able to retain coverage at higher earnings thresholds than presented here. Also, pregnant and disabled mothers may be eligible for coverage at higher earnings thresholds.
In California, 976,000 mothers lack health insurance coverage. Of these uninsured mothers, 713,000 are in low-income families, defined here as families that are below 200 percent of the poverty line ($29,260 a year for a family of three).

One in three low-income mothers in California — 36 percent — lack health insurance coverage.

Nearly nine in ten of these low-income, uninsured mothers — 87 percent — live in working families.

Most of these mothers are uninsured because they lack access to affordable employer-based coverage and also are ineligible for public programs. Currently, a mother with two children in California applying for coverage must make less than $1,309 per month ($15,708 per year) to qualify for Medicaid. This income level represents 107 percent of the federal poverty line for a family of three.

Special Note: California currently has a waiver application pending before the federal government that would allow it to use some of its unspent SCHIP funds to expand coverage for parents to 200 percent of the federal poverty line.

Sources: Data on the number of uninsured women are based on a CBPP analysis of the March 2000 CPS, which provides information on people’s health insurance status during 1999. The analysis considers women aged 19 to 64 who are classified by the Census Bureau as a head of household or as the spouse of a head of household and who are living with a child aged 18 or under. Information on the earnings threshold applied to a mother with two children who is applying for Medicaid is based on a CBPP survey of state officials, and is current as of early 2001. The earnings threshold takes into account a state’s earnings disregards, but not other disregards or deductions (e.g., child care deductions). Once enrolled in Medicaid, mothers may be able to retain coverage at higher earnings thresholds than presented here. Also, pregnant and disabled mothers may be eligible for coverage at higher earnings thresholds.
In Colorado, 82,000 mothers lack health insurance coverage. Of these uninsured mothers, 57,000 are in low-income families, defined here as families that are below 200 percent of the poverty line ($29,260 a year for a family of three).

Four in ten low-income mothers in Colorado — 40 percent — lack health insurance coverage.

Most of these mothers are uninsured because they lack access to affordable employer-based coverage and also are ineligible for public programs. Currently, a mother with two children in Colorado applying for coverage must make less than $511 per month ($6,132 per year) to qualify for Medicaid. This income level represents 42 percent of the federal poverty line for a family of three.

If a mother with two children works at a job that pays $7 an hour, she will be ineligible for Medicaid in Colorado if she works more than 17 hours a week.

Sources: Data on the number of uninsured women are based on a CBPP analysis of the March 2000 CPS, which provides information on people’s health insurance status during 1999. The analysis considers women aged 19 to 64 who are classified by the Census Bureau as a head of household or as the spouse of a head of household and who are living with a child aged 18 or under.

Information on the earnings threshold applied to a mother with two children who is applying for Medicaid is based on a CBPP survey of state officials, and is current as of early 2001. The earnings threshold takes into account a state’s earnings disregards, but not other disregards or deductions (e.g., child care deductions). Once enrolled in Medicaid, mothers may be able to retain coverage at higher earnings thresholds than presented here. Also, pregnant and disabled mothers may be eligible for coverage at higher earnings thresholds.
CONNECTICUT

• In Connecticut, 42,000 mothers lack health insurance coverage. Of these uninsured mothers, 33,000 are in low-income families, defined here as families that are below 200 percent of the poverty line ($29,260 a year for a family of three).

• One in three low-income mothers in Connecticut — 34 percent — lack health insurance coverage.

• Many of these uninsured mothers are likely already eligible for coverage under an expansion in coverage for parents that Connecticut implemented in January of 2001. (In fact, as explained below, some of these uninsured mothers may already be enrolled in coverage.) Connecticut is one of a handful of states that has expanded coverage to a significant portion of low-income uninsured mothers in working families. A mother with two children in Connecticut applying for coverage can earn up to $1,919 a month ($23,025 a year) and be found eligible for Medicaid. This income level represents 157 percent of the federal poverty line for a family of three.

Special Note: Connecticut expanded coverage for parents to 157 percent of the poverty line since the latest Census Bureau survey. As a result, it is likely that the state now has fewer uninsured mothers than presented here.

One in Three Low-Income Mothers (33,000) in Connecticut Are Uninsured

Sources: Data on the number of uninsured women are based on a CBPP analysis of the March 2000 CPS, which provides information on people’s health insurance status during 1999. The analysis considers women aged 19 to 64 who are classified by the Census Bureau as a head of household or as the spouse of a head of household and who are living with a child aged 18 or under. Information on the earnings threshold applied to a mother with two children who is applying for Medicaid is based on a CBPP survey of state officials, and is current as of early 2001. The earnings threshold takes into account a state’s earnings disregards, but not other disregards or deductions (e.g., child care deductions). Once enrolled in Medicaid, mothers may be able to retain coverage at higher earnings thresholds than presented here. Also, pregnant and disabled mothers may be eligible for coverage at higher earnings thresholds.
DELAWARE

• In Delaware, 11,000 mothers lack health insurance coverage. Of these uninsured mothers, 8,000 are in low-income families, defined here as families that are below 200 percent of the poverty line ($29,260 a year for a family of three).

• More than one in five low-income mothers in Delaware — 23 percent — lack health insurance coverage.

• Most of these mothers are uninsured because they lack access to affordable employer-based coverage and also are ineligible for public programs. Currently, a mother with two children in Delaware applying for coverage must make less than $1,309 per month ($15,708 per year) to qualify for Medicaid. This income level represents 107 percent of the federal poverty line for a family of three.

Sources: Data on the number of uninsured women are based on a CBPP analysis of the March 2000 CPS, which provides information on people’s health insurance status during 1999. The analysis considers women aged 19 to 64 who are classified by the Census Bureau as a head of household or as the spouse of a head of household and who are living with a child aged 18 or under.

Information on the earnings threshold applied to a mother with two children who is applying for Medicaid is based on a CBPP survey of state officials, and is current as of early 2001. The earnings threshold takes into account a state’s earnings disregards, but not other disregards or deductions (e.g., child care deductions). Once enrolled in Medicaid, mothers may be able to retain coverage at higher earnings thresholds than presented here. Also, pregnant and disabled mothers may be eligible for coverage at higher earnings thresholds.
In the District of Columbia, 9,000 mothers lack health insurance coverage. Of these uninsured mothers, 5,000 are in low-income families, defined here as families that are below 200 percent of the poverty line ($29,260 a year for a family of three).

One in five low-income mothers in the District of Columbia — 20 percent — lack health insurance coverage.

Many of these uninsured mothers are likely already eligible for coverage under the District of Columbia’s Medicaid program, but are not yet enrolled. The District is one of a handful of jurisdictions that has expanded Medicaid to a significant portion of low-income uninsured mothers in working families. A mother with two children in the District applying for coverage can earn up to $2,438 a month ($29,260 a year) and be found eligible for Medicaid. This income level represents 200 percent of the federal poverty line for a family of three.

Sources: Data on the number of uninsured women are based on a CBPP analysis of the March 2000 CPS, which provides information on people’s health insurance status during 1999. The analysis considers women aged 19 to 64 who are classified by the Census Bureau as a head of household or as the spouse of a head of household and who are living with a child aged 18 or under.

Information on the earnings threshold applied to a mother with two children who is applying for Medicaid is based on a CBPP survey of state officials, and is current as of early 2001. The earnings threshold takes into account a state’s earnings disregards, but not other disregards or deductions (e.g., child care deductions). Once enrolled in Medicaid, mothers may be able to retain coverage at higher earnings thresholds than presented here. Also, pregnant and disabled mothers may be eligible for coverage at higher earnings thresholds.
Millions of Mothers Lack Health Insurance Coverage

FLORIDA

- In Florida, 363,000 mothers lack health insurance coverage. Of these uninsured mothers, 276,000 are in low-income families, defined here as families that are below 200 percent of the poverty line ($29,260 a year for a family of three).

- Nearly four in ten low-income mothers in Florida — 37 percent — lack health insurance coverage.

- Nearly nine in ten of these low-income, uninsured mothers — 89 percent — live in working families.

- Most of these mothers are uninsured because they lack access to affordable employer-based coverage and also are ineligible for public programs. Currently, a mother with two children in Florida applying for coverage must make less than $806 per month ($9,672 per year) to qualify for Medicaid. This income level represents 66 percent of the federal poverty line for a family of three.

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Sources: Data on the number of uninsured women are based on a CBPP analysis of the March 2000 CPS, which provides information on people’s health insurance status during 1999. The analysis considers women aged 19 to 64 who are classified by the Census Bureau as a head of household or as the spouse of a head of household and who are living with a child aged 18 or under.

Information on the earnings threshold applied to a mother with two children who is applying for Medicaid is based on a CBPP survey of state officials, and is current as of early 2001. The earnings threshold takes into account a state’s earnings disregards, but not other disregards or deductions (e.g., child care deductions). Once enrolled in Medicaid, mothers may be able to retain coverage at higher earnings thresholds than presented here. Also, pregnant and disabled mothers may be eligible for coverage at higher earnings thresholds.
Millions of Mothers Lack Health Insurance Coverage

GEORGIA

- In Georgia, 201,000 mothers lack health insurance coverage. Of these uninsured mothers, 132,000 are in low-income families, defined here as families that are below 200 percent of the poverty line ($29,260 a year for a family of three).

- More than one in four low-income mother in Georgia — 27 percent — lack health insurance coverage.

- Most of these mothers are uninsured because they lack access to affordable employer-based coverage and also are ineligible for public programs. Currently, a mother with two children in Georgia applying for coverage must make less than $514 per month ($6,168 per year) to qualify for Medicaid. This income level represents 42 percent of the federal poverty line for a family of three.

- If a mother with two children works at a job that pays $7 an hour, she will be ineligible for Medicaid in Georgia if she works more than 17 hours a week.

Sources: Data on the number of uninsured women are based on a CBPP analysis of the March 2000 CPS, which provides information on people’s health insurance status during 1999. The analysis considers women aged 19 to 64 who are classified by the Census Bureau as a head of household or as the spouse of a head of household and who are living with a child aged 18 or under.

Information on the earnings threshold applied to a mother with two children who is applying for Medicaid is based on a CBPP survey of state officials, and is current as of early 2001. The earnings threshold takes into account a state’s earnings disregards, but not other disregards or deductions (e.g., child care deductions). Once enrolled in Medicaid, mothers may be able to retain coverage at higher earnings thresholds than presented here. Also, pregnant and disabled mothers may be eligible for coverage at higher earnings thresholds.
HAWAII

• In Hawaii, 9,000 mothers lack health insurance coverage. Of these uninsured mothers, 7,000 are in low-income families, defined here as families that are below 200 percent of the poverty line ($33,672 a year for a family of three).

• More than one in ten low-income mothers in Hawaii — 12 percent — lack health insurance coverage.

• Most of these mothers are uninsured because they are ineligible for employer-based coverage and also are ineligible for public programs. Currently, a mother with two children in Hawaii applying for coverage must make less than $1,403 per month ($16,836 per year) to qualify for Medicaid. This income level represents 100 percent of the poverty line in Hawaii for a family of three.

Special Note: Hawaii is the only state in the country where employers are required to offer health insurance, but not all dependents and part-time workers are covered.

More than One in Ten Low-Income Mothers (7,000) in Hawaii Are Uninsured

Sources: Data on the number of uninsured women are based on a CBPP analysis of the March 2000 CPS, which provides information on people’s health insurance status during 1999. The analysis considers women aged 19 to 64 who are classified by the Census Bureau as a head of household or as the spouse of a head of household and who are living with a child aged 18 or under. Information on the earnings threshold applied to a mother with two children who is applying for Medicaid is based on a CBPP survey of state officials, and is current as of early 2001. The earnings threshold takes into account a state’s earnings disregards, but not other disregards or deductions (e.g., child care deductions). Once enrolled in Medicaid, mothers may be able to retain coverage at higher earnings thresholds than presented here. Also, pregnant and disabled mothers may be eligible for coverage at higher earnings thresholds.
IDaho

- In Idaho, 37,000 mothers lack health insurance coverage. Of these uninsured mothers, 26,000 are in low-income families, defined here as families that are below 200 percent of the poverty line ($29,260 a year for a family of three).

- Nearly four in ten low-income mothers in Idaho — 38 percent — lack health insurance coverage.

- More than nine in ten of these low-income, uninsured mothers — 92 percent — live in working families.

- Most of these mothers are uninsured because they lack access to affordable employer-based coverage and also are ineligible for public programs. Currently, a mother with two children in Idaho applying for coverage must make less than $407 per month ($4,884 per year) to qualify for Medicaid. This income level represents 33 percent of the federal poverty line for a family of three.

- If a mother with two children works at a job that pays $7 an hour, she will be ineligible for Medicaid in Idaho if she works more than 13 hours a week.

Sources: Data on the number of uninsured women are based on a CBPP analysis of the March 2000 CPS, which provides information on people’s health insurance status during 1999. The analysis considers women aged 19 to 64 who are classified by the Census Bureau as a head of household or as the spouse of a head of household and who are living with a child aged 18 or under.

Information on the earnings threshold applied to a mother with two children who is applying for Medicaid is based on a CBPP survey of state officials, and is current as of early 2001. The earnings threshold takes into account a state’s earnings disregards, but not other disregards or deductions (e.g., child care deductions). Once enrolled in Medicaid, mothers may be able to retain coverage at higher earnings thresholds than presented here. Also, pregnant and disabled mothers may be eligible for coverage at higher earnings thresholds.
ILLINOIS

- In Illinois, 215,000 mothers lack health insurance coverage. Of these uninsured mothers, 150,000 are in low-income families, defined here as families that are below 200 percent of the poverty line ($29,260 a year for a family of three).

- Nearly one in three low-income mothers in Illinois — 30 percent — lack health insurance coverage.

- Nearly nine in ten of these low-income, uninsured mothers — 86 percent — live in working families.

- Most of these mothers are uninsured because they lack access to affordable employer-based coverage and also are ineligible for public programs. Currently, a mother with two children in Illinois applying for coverage must make less than $882 per month ($10,584 per year) to qualify for Medicaid. This income level represents 72 percent of the federal poverty line for a family of three.

Sources: Data on the number of uninsured women are based on a CBPP analysis of the March 2000 CPS, which provides information on people’s health insurance status during 1999. The analysis considers women aged 19 to 64 who are classified by the Census Bureau as a head of household or as the spouse of a head of household and who are living with a child aged 18 or under.

Information on the earnings threshold applied to a mother with two children who is applying for Medicaid is based on a CBPP survey of state officials, and is current as of early 2001. The earnings threshold takes into account a state’s earnings disregards, but not other disregards or deductions (e.g., child care deductions). Once enrolled in Medicaid, mothers may be able to retain coverage at higher earnings thresholds than presented here. Also, pregnant and disabled mothers may be eligible for coverage at higher earnings thresholds.
INDIANA

• In Indiana, 92,000 mothers lack health insurance coverage. Of these uninsured mothers, 64,000 are in low-income families, defined here as families that are below 200 percent of the poverty line ($29,260 a year for a family of three).

• More than one in four low-income mothers in Indiana — 27 percent — lack health insurance coverage.

• Most of these mothers are uninsured because they lack access to affordable employer-based coverage and also are ineligible for public programs. Currently, a mother with two children in Indiana applying for coverage must make less than $378 per month ($4,536 per year) to qualify for Medicaid. This income level represents 31 percent of the federal poverty line for a family of three.

• If a mother with two children works at a job that pays $7 an hour, she will be ineligible for Medicaid in Indiana if she works more than 12 hours a week.

More than One in Four Low-Income Mothers (64,000) in Indiana Are Uninsured

Sources: Data on the number of uninsured women are based on a CBPP analysis of the March 2000 CPS, which provides information on people’s health insurance status during 1999. The analysis considers women aged 19 to 64 who are classified by the Census Bureau as a head of household or as the spouse of a head of household and who are living with a child aged 18 or under.

Information on the earnings threshold applied to a mother with two children who is applying for Medicaid is based on a CBPP survey of state officials, and is current as of early 2001. The earnings threshold takes into account a state’s earnings disregards, but not other disregards or deductions (e.g., child care deductions). Once enrolled in Medicaid, mothers may be able to retain coverage at higher earnings thresholds than presented here. Also, pregnant and disabled mothers may be eligible for coverage at higher earnings thresholds.
IOWA

- In Iowa, 24,000 mothers lack health insurance coverage. Of these uninsured mothers, 18,000 are in low-income families, defined here as families that are below 200 percent of the poverty line ($29,260 a year for a family of three).

- More than one in six low-income mothers in Iowa — 16 percent — lack health insurance coverage.

- Most of these mothers are uninsured because they lack access to affordable employer-based coverage and also are ineligible for public programs. Currently, a mother with two children in Iowa applying for coverage must make less than $1,060 per month ($12,720 per year) to qualify for Medicaid. This income level represents 87 percent of the federal poverty line for a family of three.

Sources: Data on the number of uninsured women are based on a CBPP analysis of the March 2000 CPS, which provides information on people’s health insurance status during 1999. The analysis considers women aged 19 to 64 who are classified by the Census Bureau as a head of household or as the spouse of a head of household and who are living with a child aged 18 or under.

Information on the earnings threshold applied to a mother with two children who is applying for Medicaid is based on a CBPP survey of state officials, and is current as of early 2001. The earnings threshold takes into account a state’s earnings disregards, but not other disregards or deductions (e.g., child care deductions). Once enrolled in Medicaid, mothers may be able to retain coverage at higher earnings thresholds than presented here. Also, pregnant and disabled mothers may be eligible for coverage at higher earnings thresholds.
In Kansas, 39,000 mothers lack health insurance coverage. All of these uninsured mothers are in low-income families, defined here as families that are below 200 percent of the poverty line ($29,260 a year for a family of three).

Nearly one in three low-income mothers in Kansas — 33 percent — lack health insurance coverage.

Most of these mothers are uninsured because they lack access to affordable employer-based coverage and also are ineligible for public programs. Currently, a mother with two children in Kansas applying for coverage must make less than $493 per month ($5,916 per year) to qualify for Medicaid. This income level represents 40 percent of the federal poverty line for a family of three.

If a mother with two children works at a job that pays $7 an hour, she will be ineligible for Medicaid in Kansas if she works more than 16 hours a week.

Sources: Data on the number of uninsured women are based on a CBPP analysis of the March 2000 CPS, which provides information on people’s health insurance status during 1999. The analysis considers women aged 19 to 64 who are classified by the Census Bureau as a head of household or as the spouse of a head of household and who are living with a child aged 18 or under.

Information on the earnings threshold applied to a mother with two children who is applying for Medicaid is based on a CBPP survey of state officials, and is current as of early 2001. The earnings threshold takes into account a state’s earnings disregards, but not other disregards or deductions (e.g., child care deductions). Once enrolled in Medicaid, mothers may be able to retain coverage at higher earnings thresholds than presented here. Also, pregnant and disabled mothers may be eligible for coverage at higher earnings thresholds.