

Table A
Where Do States Stand: Eligibility, Enrollment and Renewal Procedures and Cost-Sharing Rules
(January 2008)

Eligibility

Children

- 45 states, including DC, cover children in families with income 200% FPL or higher
- 20 states, including DC, have authorized or implemented coverage for children in families with income 300% FPL or higher
- 46 states, including DC, disregard assets in determining children's eligibility for health coverage
- 14 states, including DC, do not require children to be uninsured for a period of time before they can enroll in Medicaid or SCHIP

Pregnant Women

- 40 states, including DC, cover pregnant women with income at 185% FPL or higher
- 44 states, including DC, disregard assets in determining eligibility for a pregnant woman
- 30 states, including DC, have adopted presumptive eligibility for pregnant women
- 13 states have adopted the option to cover unborn children using SCHIP funds

Parents

- 18 states, including DC, cover working parents in families with income at 100% FPL or higher
- 22 states, including DC, disregard assets in determining Medicaid eligibility for parents

Simplified Procedures

Children

- 46 states, including DC, do not require a face-to-face interview to apply for children's coverage
- 33 of the 37 states with separate SCHIP programs use a single application for both Medicaid and SCHIP (18 of these 37 states use a joint renewal form for the two programs.)
- 10 states do not require families to provide verification of their income at enrollment (11 states do not require families to verify income at renewal).
- 14 states have adopted presumptive eligibility for children's Medicaid
- 45 states, including DC, allow children to renew coverage annually, as opposed to more often
- 16 states have adopted 12-month continuous eligibility, guaranteeing children a full year of coverage.

Parents

- 28 states, including DC, allow parents and children to apply for health coverage using a single, simplified application
- 40 states, including DC, do not require a face-to-face interview when applying for a parent; 46 states, including DC, do not require an interview for renewing a parent's coverage
- 40 states, including DC, allow parents to renew coverage annually, as opposed to more often

Premiums and Copayments

Children

- 34 states impose premiums or an enrollment fee in their children's health coverage programs; 10 charge families with income as low as 101% FPL
- In states with premiums:
 - + the cost for two children in a family with income of 101% FPL ranges from \$8 to \$40 per month
 - + the cost for families with income at 151% FPL ranges from \$10 to \$75 per month.
 - + the cost for families with income at 200% FPL ranges from \$10 to \$250 per month.
 - + the cost for families with income at 250% FPL ranges from \$20 to \$235 per month.
 - + the cost for families with income at 300% FPL ranges from \$20 to \$181 per month.
 - + the cost for families with income at 350% FPL ranges from \$60 to \$152 per month.
 - + premiums charged in states with Medicaid waivers, i.e. Rhode Island and Wisconsin, may be considerably higher than most other states because premiums may include coverage for a parent.
- 12 states impose "lock-out" periods on children in families that do not pay the required premium, preventing such children from re-entering the program after being disenrolled
- 18 states require co-payments for non-preventive physician visits, emergency room care, and/or in-patient hospital care for children (at income levels specified in the survey)
- 21 states require a co-payment for prescription drugs for children