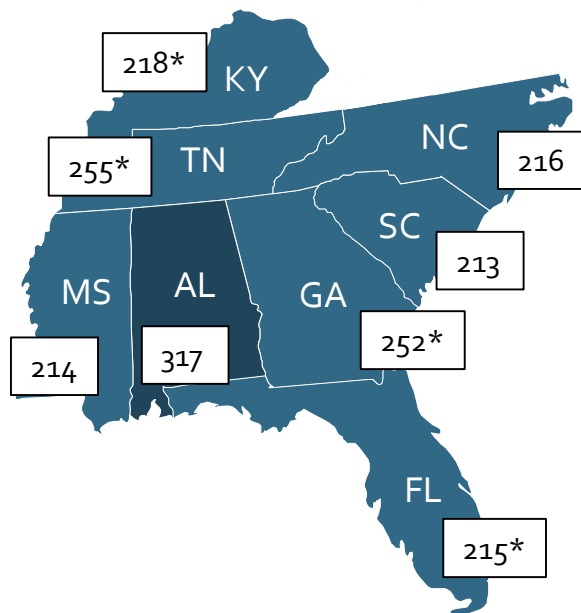


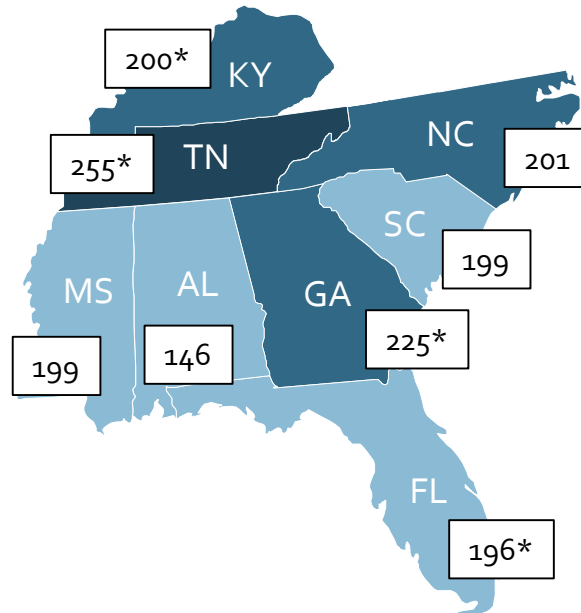
# Medicaid Eligibility Levels (% of Federal Poverty Level)

Eligibility for Medicaid or the Children's Health Insurance Program (CHIP) is determined by whether household income falls below state-specified levels, usually specified relative to the Federal Poverty Level (FPL). These levels typically vary by eligibility group (e.g., children, pregnant women, parents of eligible children, other non-disabled adults) and can vary significantly by state. States also vary in how frequently beneficiaries are required to recertify their eligibility (e.g., file paperwork, verify income).

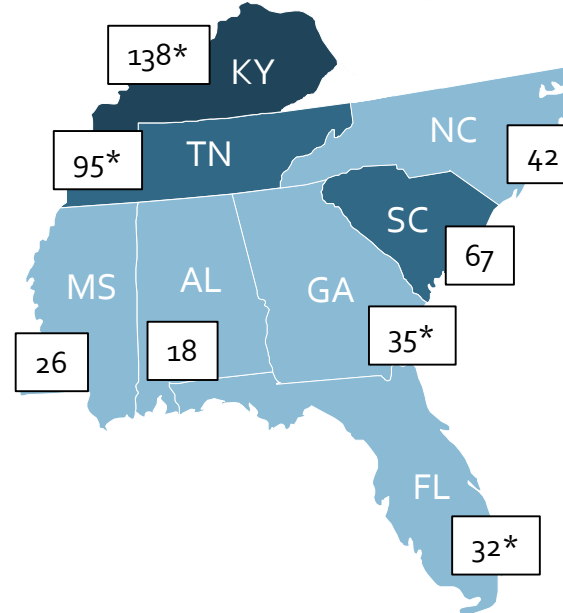
Income Eligibility Levels for **Children** in Medicaid/CHIP, % of FPL



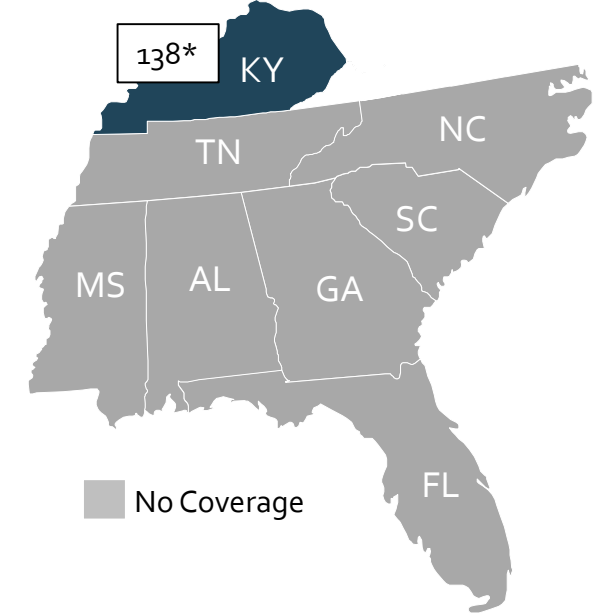
Income Eligibility Levels for **Pregnant Women** in Medicaid/CHIP, % of FPL



Income Eligibility Levels for **Parents** in Medicaid, % of FPL



Income Eligibility Levels for **Other Non-Disabled Adults** in Medicaid, % of FPL



\* Indicates that beneficiaries in these states must recertify every 6 months or more frequently.

In Florida, children in Medicaid younger than age five receive 12-month continuous eligibility and children ages five and older receive six months of continuous eligibility.

The other states in the Southeast Region award continuous eligibility for 12 months before requiring recertification.

**Note:** Eligibility levels and state-specified frequencies of recertification are based on January 2019 eligibility rules and 2019 federal poverty levels (FPLs) for a family of three. In 2019, the FPL for a family of three was \$21,330.

**References:** Brooks, T., Roygardner, L., & Artiga, S. 2019. [Medicaid and CHIP Eligibility, Enrollment, and Cost Sharing Policies as of January 2019: Findings from a 50-State Survey](#). Henry J Kaiser Family Foundation.

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# Medicaid/CHIP Child and Parent Participation Rates, 2016 and 2013

Many individuals are eligible for Medicaid or CHIP but are not enrolled. Children's participation (percent enrolled, of those eligible) is generally around 95%, and participation among parents of eligible children varies more widely (in the Southeast: 55% in Georgia versus 88% in Kentucky).

In recent years these gaps have been reduced for children and parents of eligible children across nearly all Southeastern states.



## Children

State	Participation Rate 2013	Participation Rate 2016
Alabama	91.6%	<b>96.3%</b>
Florida	85.0%	<b>93.0%</b>
Georgia	85.5%	<b>90.6%</b>
Kentucky	90.3%	<b>95.6%</b>
Mississippi	89.2%	<b>94.8%</b>
North Carolina	91.9%	<b>95.0%</b>
South Carolina	89.9%	<b>95.5%</b>
Tennessee	91.1%	<b>95.5%</b>

## Parents of Eligible Children

State	Participation Rate 2013	Participation Rate 2016
Alabama	60.7%	<b>64.0%</b>
Florida	62.0%	<b>71.2%</b>
Georgia	55.2%	<b>55.3%</b>
Kentucky	61.5%	<b>88.1%</b>
Mississippi	69.4%	<b>64.7%</b>
North Carolina	62.6%	<b>69.3%</b>
South Carolina	59.7%	<b>72.6%</b>
Tennessee	72.7%	<b>79.6%</b>

**Medicaid/CHIP Child and Parent Participation Rates** are defined as the ratio of Medicaid/CHIP-eligible enrolled children (parents) to Medicaid/CHIP-eligible enrolled children (parents) plus Medicaid/CHIP-eligible uninsured children (parents).

**References:** Urban Institute tabulations of 2013/2016 American Community Survey (ACS) data from the Integrated Public Use Microdata Series (IPUMS) from: Jennifer Haley, Genevieve Kenney, Robin Wang, Victoria Lynch, and Matthew Buettgens. [Medicaid/CHIP Participation Reached 93.7 Percent Among Eligible Children In 2016](#), The Urban Institute, Washington, DC, August 2018.

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# Medicaid Coverage Continuity

Definition: The “continuity ratio” measures the portion of a year that an average beneficiary is enrolled in Medicaid. It is the ratio of the average # of Medicaid enrollees in a fiscal year divided by the unduplicated # of annual enrollees.

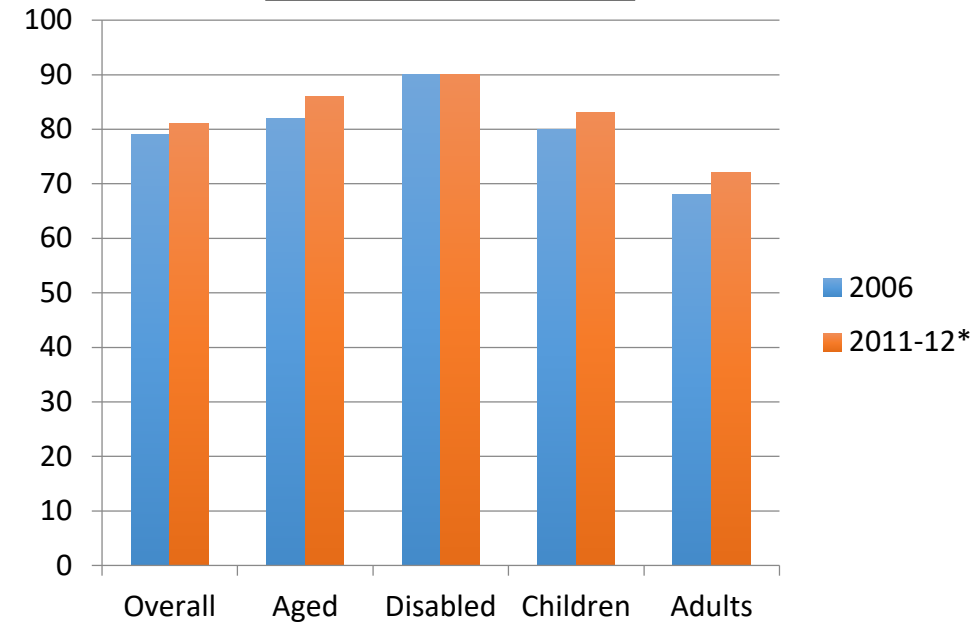
## Continuity Ratios by State and Eligibility Group, Southeast Region<sup>1</sup>

	Overall Ratio	Children	Non-elderly Adults	Blind/Disabled	Aged
Alabama	84.0%	85.2%	76.7%	91.0%	88.8%
Florida	74.3%	79.7%	55.0%	87.2%	85.1%
Georgia	76.3%	79.2%	61.2%	90.2%	85.9%
Kentucky	79.2%	83.0%	64.0%	91.4%	86.5%
Mississippi	81.4%	83.0%	71.0%	91.7	89.3%
North Carolina	80.2%	85.5%	64.0%	89.6%	86.7%
South Carolina	81.9%	82.1%	75.1%	91.2%	86.8%
Tennessee	83.1%	87.2%	74.2%	87.9%	80.5%

Based on Medicaid Statistical Information System Datamart for FY2012

On average, a typical Medicaid beneficiary is covered for four-fifths of the year and lacks Medicaid coverage for the remaining fifth of the year.  
Gaps are somewhat less common for children.

## National Medicaid Continuity Ratios, 2006 and 2011-12<sup>1</sup>



\*2011-12 data are a blend of data from FY 2010 to 2012  
Data from the Medicaid Statistical Information System.

Reference: <sup>1</sup>Ku, L., Steinmetz, E., and Bysshe, T. (2015) Continuity of Medicaid Coverage in an Era of Transition (Working Paper). Milken Institute of Public Health, George Washington University.