

Improved Access to Coverage and CHP Premium Hikes Included in State Budget

Eligibility and Simplification

The State Budget included several provisions to expand and simplify eligibility for Medicaid, Child Health Plus and Family Health Plus. These changes should make it easier for children and parents to get and keep public insurance coverage.

Provisions in the budget align eligibility levels and base eligibility for all programs on gross, rather than net, income. According to the Department of Health, these proposals “maximize coverage for family members within the same program, reduce documentation requirements and lessen confusion about eligibility rules.”

Eligibility Group	Revised Income Level Based on Gross Income
Children aged 1 – 19	Medicaid eligibility set at 160% of the Federal Poverty Level (FPL). Child Health Plus continues for all children above 160% of FPL
19 and 20 year olds	Medicaid eligibility set at 100% FPL. Family Health Plus eligibility set at 160% FPL.
Parents	Medicaid eligibility set at 100% FPL. Family Health Plus eligibility set at 160% FPL.
Pregnant Women and Infants	Medicaid eligibility set at 230% of FPL.

The budget also contains provisions to reduce the administrative barriers to coverage:

- Eliminates the face to face interview requirement for Medicaid and Family Health Plus.
- Eliminates the resource test for most Medicaid and Family Health Plus applicants (does not apply to SSI or SSI-related).
- Eliminates finger imaging requirement for adults applying for Medicaid.
- Permits public employees who meet income requirements to enroll in the Family Health Plus premium assistance program.

In addition, the budget gives the Department of Health the authority to seek a federal waiver to expand Family Health Plus coverage for low-income adults up

to 200 percent of the federal poverty level, which would make 400,000 additional adults eligible for coverage.

Child Health Plus Premium Increases

As part of the federal Children’s Health Insurance Program Reauthorization Act (CHIPRA), states are required to file state plan amendments to begin to draw down federal funds. While the premium increases that were presented in the Governor’s Budget were higher than those that were eventually adopted, the federal government expected some increase in cost-sharing before the state plan could be approved.

Effective July 1, 2009 family contributions for Child Health Plus coverage will increase as follows. (Total family contribution will continue to be capped at three children.)

Eligibility Category	Current Amount	Revised Amount
Below 160% FPL	None	None
160-222% FPL	\$9	\$9
223-250% FPL	\$15	\$15
251-300% FPL	\$20	\$30
301-350% FPL	\$30	\$45
351-400% FPL	\$40	\$60
Above 400% Full Premium	\$162 (average)	\$162 (average)

New York and New Jersey are the only states that can receive an federal match under CHIPRA for children above 300% of FPL because these states had laws in place to cover children up to 400% FPL before CHIPRA was passed.

You can view the [New York State Medicaid Update](#) for more information on the Medicaid provisions in the state budget.