

Guide to the State Tables

These 51-state tables use information selected primarily from the state fact sheets and, in contrast to the fact sheets, provide an opportunity to view the efforts of individual states within the context of all 51 states (including the District of Columbia). The tables focus on the substantive issues highlighted in the fact sheets that concern whether and how states have restructured their Medicaid programs to expand coverage and access for low-income working families. Although these tables will inevitably invite comparisons among the states, states' efforts to consider restructuring their Medicaid programs must always be understood within their individual circumstances. It is also important to note that these tables present just certain elements of a state's program amenable to a table format and that reviewing each state's fact sheet will provide a much more complete and informative of picture.

Table 1: Selected State Characteristics

Table 1 presents demographic characteristics that may be relevant to a state's potential willingness to expand Medicaid and/or health insurance coverage for working families. For example, information showing the percentage of non-elderly persons with incomes below 100 percent and 200 percent of the federal poverty level (FPL) receiving Medicaid represents one measure of the generosity of each state's Medicaid program. Information concerning each state's unemployment rate, uninsured rate, poverty rate, and percentage of families with incomes below 100 percent FPL suggest how pressing concerns about uninsured working families might be in the states. The changes in Medicaid enrollment for all eligible persons (i.e., not just families) and TANF enrollment for families during the last four years may suggest something about states' approaches to administering two public assistance programs important to low-income families.

Table 2: Selected State Medicaid Program Characteristics

Table 2 presents Medicaid program characteristics that may be relevant to a state's ability to pay for as well as potential willingness to expand Medicaid coverage for working families. For example, information concerning the percentage of a state's budget spent on Medicaid and the Federal Medicaid assistance percentage (FMAP) (i.e., the federal share of Medicaid spending in each state) indicates what states have been willing to spend on Medicaid, and how much federal assistance is available to support their efforts. Information showing the percentage of non-elderly persons with incomes below 100 percent FPL receiving Medicaid and the income eligibility standards for Section 1931 Medicaid provide more measures of the generosity of states' Medicaid programs. Information on Medicaid enrollment trends and the Medicaid managed care penetration rates provide indicators of important Medicaid program dynamics in the latter part of the 1990s; that is, declining enrollment post welfare reform and the continued growth of Medicaid managed care.

Table 3: Changes in Medicaid and TANF Enrollment During 1999 to 2000

Table 3 provides more detailed information about enrollment trends in Medicaid for all eligible persons (i.e., not just families) and TANF between 1996 and 2000, the period just before and after implementation of the 1996 federal welfare reform law. The relative trends in Medicaid

and TANF enrollment during this period may suggest something about states' relative interest in enrollment and retention issues associated with these two public assistance programs important to low-income families.

Table 4: Section 1931 Medicaid Eligibility Criteria and Maximum Monthly Earnings for Three-Person Family

This table provides information about the basic eligibility criteria for Section 1931 Medicaid and places this information in the context of what a three-person applicant or recipient family can earn per month and attain or retain Medicaid eligibility. This table highlights the variability among the states with respect to the amount of the applicant and recipient earned income disregards, and also shows how far states have moved from the original disregards required under AFDC of \$90 for applicants and \$90 plus \$30 and one-third of the remaining earnings for recipients. The net income threshold (i.e., how much earned income a family can have and still qualify for Section 1931 Medicaid) is a function of the income standard and the earned income disregards (i.e. how much earned income can be reduced), and also varies widely by state. To the extent that states have eliminated their gross income tests and eliminated or expanded their asset tests, then Section 1931 Medicaid becomes more accessible to low-income working families.

Table 5: Eligibility for Section 1931 Medicaid Families, Medicaid Expansion Children and SCHIP Children as a Function of Percent of Federal Poverty Level

Table 5 illustrates the generosity of the states' public health insurance programs by showing the eligibility/coverage for families and children as a function of family earned income as a percent of federal poverty level. The table distinguishes between SCHIP Medicaid expansions and separate state SCHIP coverage. Also shown are the four states that have received waivers to use their SCHIP programs to expand coverage for families (i.e., include parents as well as their children). This table also shows the extent to which states have chosen to make their public health insurance programs for children more generous than for their parents.

Table 6: Provisions of State 1115 Medicaid Demonstrations that Help Low Income Working Families

Table 6 shows whether and how the 16 states operating 1115 Medicaid demonstrations used these waiver programs to expand coverage for low-income working families. All but one state (Arkansas) used these programs to establish mandatory managed care for Medicaid beneficiaries. Eleven states established a range of eligibility/coverage expansions for families. This table also shows whether states extended transitional Medicaid coverage or eliminated the asset test using their waivers, and how eligibility for Section 1931 Medicaid compares with eligibility for Section 1115 Medicaid. Although this information is not presented in Table 7, coverage under 1115 Medicaid demonstrations is frequently not as generous in terms of benefits as coverage under Section 1931 Medicaid and can involve co-pays and premiums, generally not allowed under 1931 Medicaid. Also, losing eligibility under 1115 Medicaid waiver due to increased income does not entitle the Medicaid recipient to transitional Medicaid assistance in contrast to 1931 Medicaid.

Table 7: Provisions Helping Low-Income Working Families Get Medicaid

Table 7 shows whether and how states have restructured their Medicaid programs specifically to help low-income working families get coverage. Five of the seven strategies involve options under Section 1931 Medicaid, while eliminating the ‘100-hour’ rule and expanding coverage under an 1115 waiver do not involve the states using 1931 options. The strategies shown are particularly helpful to establishing or extending family-based Medicaid coverage to low-income working families (e.g., whether the first vehicle is disregarded entirely for purposes of the asset test, or whether or not states use earned income disregards to establish or extend eligibility for transitional Medicaid assistance).

Table 8: State Policies Addressing ‘3 out of 6 Month’ Rule Requirement for Transitional Medicaid Assistance Eligibility to Improve Access for Low-Income Working Families

Table 8 indicates that 19 states have taken steps to ensure that families finding employment or receiving increased earnings quickly (i.e., in less than three months after becoming eligible for Section 1931 Medicaid) do not lose their opportunity for 12 months of Medicaid coverage under transitional Medicaid assistance (TMA) because they could not meet the ‘3 out of 6 month’ requirement for TMA coverage (i.e., to be eligible for TMA, a recipient must be losing 1931 eligibility due to increased income and have received 1931 Medicaid during three out of the last six months). The table describes the three categories of strategies including (1) options under Section 1931, (2) provisions of the 1115 Medicaid Waiver, and (3) other strategies such as retroactive eligibility.

Table 9: How States with Mandatory Applicant Job Search Requirements Account for Potential Effect on Section 1931 Medicaid Coverage

Table 9 shows the 16 states that have mandatory applicant job search policies for TANF applicants (i.e., families are required to search for jobs as a condition of TANF eligibility), and whether these states have addressed the potential risk that families will lose their access to TMA because of a failure to meet the ‘3 out 6 month’ rule for TMA eligibility by getting work quickly and experiencing a disqualifying increase in income.

Table 10: How States with Lump Sum Payment Diversion Program Account for Potential Effect on Section 1931 Medicaid Coverage

Table 10 shows the 22 states that have lump sum payment diversion programs (i.e., TANF applicants can opt to receive a lump sum payment to meet their immediate needs in lieu of enrolling in TANF) and whether these states have addressed the potential risk that (1) families might be ineligible for Medicaid if the lump sum payment was counted as income or (2) families might lose their access to TMA because of a failure to meet the ‘3 out 6 month’ rule for TMA eligibility by quickly experiencing a disqualifying increase in income.

Table 11: Extension of Transitional Medicaid Assistance (TMA) Beyond 12 Months

Table 11 shows the 13 states that have extended TMA coverage beyond 12 months to low-income families, and whether these states used their options under Section 1931 Medicaid or other provisions under Medicaid waiver programs to affect these extensions. As shown in the footnote, two states will establish increased earned income disregards for Section 1931 Medicaid to preserve their expansions of TMA when their Medicaid waivers expire in June and July 2001.

Table 1: Selected State Characteristics

State	Population 1999 (million)	Uninsured Rate 1997-1999	Unemployment Rate 1999	Poverty Rate 1998	Families Below Poverty 1998	Percent Non-Elderly with Medicaid 1997-1999		Change in Total Medicaid Enrollment 6/96-6/00	Change in Total TANF Enrollment 6/96-6/00
						<100% FPL	<200% FPL		
U.S.	272.7	16.0%	4.2%	13.2%	10.0%	37.9%	26.4%	+1.7%	-55.3%
AL	4.4	16.0%	4.8%	14.7%	11.4%	38.3%	25.0%	+9.0%	-49.0%
AK	.6	15.6%	6.4%	8.8%	7.6%	31.4%	24.3%	-7.0%	-31.2%
AZ	5.0	23.3 %	4.4%	18.1%	13.6%	26.7%	19.3%	+8.0%	-51.7%
AR	2.6	19.3%	4.5%	17.2%	11.5%	33.4%	22.0%	+4.9%	-52.5%
CA	33.1	21.3 %	5.2%	16.3%	12.6%	38.6%	28.5%	-7.0%	-52.0%
CO	4.1	15.7%	2.9%	9.3%	6.1%	23.0%	15.8%	+8.4%	-72.2%
CT	3.3	11.5%	3.2%	9.9%	6.7%	30.3%	23.8%	+2.8%	-60.7%
DE	0.8	13.1%	3.5%	9.5%	8.3%	42.5%	29.4%	+29.0%	-25.4%
DC	0.5	16.2%	6.3%	22.7%	20.3%	51.3%	40.7%	-4.7%	-36.5%
FL	15.1	18.8%	3.9%	13.9%	9.3%	29.6%	20.3%	+10.6%	-76.4%
GA	7.8	17.1%	4.0%	14.3%	11.0%	40.3%	27.4%	-13.0%	-63.2%
HI	1.2	9.5%	5.6%	12.3%	8.8%	41.6%	27.3%	+9%	-35.8%
ID	1.3	18.1%	5.2%	13.2%	9.7%	24.3%	17.6%	+27.8%	-94.1%
IL	12.1	18.1%	4.3%	11.1%	7.7%	39.9%	26.1%	-.5%	-60.9%
IN	6.0	12.2%	3.0%	8.6%	7.6%	30.9%	18.8%	+30.2%	-34.2%
IA	2.9	9.9%	2.5%	9.4%	7.3%	38.6%	21.2%	-11.0%	-43.0%
KS	2.7	11.4%	3.0%	10.1%	7.6%	30.4%	20.5%	+4%	-48.3%
KY	4.0	14.5%	4.5%	15.5%	11.1%	38.4%	28.1%	+8.2%	-51.5%
LA	4.4	20.3%	5.1%	18.6%	16.4%	35.8%	24.8%	-3.8%	-66.7%
ME	1.3	13.2%	4.1%	7.7%	10.6%	43.9%	25.9%	+2.4%	-73.7%
MD	5.2	13.9%	4.1%	8.6%	4.3%	23.1%	16.8%	+2.7%	-65.9%
MA	6.2	11.1%	3.2%	10.3%	7.0%	51.5%	38.7%	+39.3%	-61.3%
MI	9.9	12.0%	3.8%	10.8%	8.4%	46.8%	34.1%	-7.4%	-63.6%
MN	4.8	8.8%	2.8%	9.9%	7.2%	47.6%	34.6%	-2.3%	-32.2%
MS	2.8	18.9%	5.1%	18.3%	14.1%	35.8%	24.0%	+9.6%	-74.6%
MO	5.5	10.6%	3.4%	10.4%	8.7%	39.5%	28.4%	+18.2%	-48.4%
MT	0.9	19.2%	5.2%	16.4%	13.2%	33.2%	22.2%	-12.3%	-59.3%
NE	1.7	10.2%	2.9%	10.8%	9.1%	38.8%	25.1%	+26.7%	-30.6%
NV	1.8	19.8%	4.4%	9.9%	7.9%	18.5%	13.1%	+48.5%	-57.0%

State	Population 1999 (million)	Uninsured Rate 1997-1999	Unemployment Rate 1999	Poverty Rate 1998	Families Below Poverty 1998	Percent Non-Elderly with Medicaid 1997-1999		Change in Total Medicaid Enrollment 6/96-6/00	Change in Total TANF Enrollment 6/96-6/00
						<100% FPL	<200% FPL		
NH	1.2	11.1%	2.7%	8.4%	7.5%	42.3%	30.1%	+8.9%	-43.5%
NJ	8.1	15.4%	4.6%	9.0%	6.5%	34.2%	22.1%	-11.2%	-57.4%
NM	1.7	23.2%	5.6%	22.4%	17.3%	34.6%	26.5%	-5.9%	-33.8%
NY	18.1	17.1%	5.2%	16.6%	14.0%	48.7%	36.1%	+1.1%	-42.3%
NC	7.7	15.3%	3.2%	12.5%	11.5%	34.9%	23.4%	+7.1%	-65.6%
ND	.6	13.7%	3.4%	13.2%	11.8%	27.5%	19.2%	-6.6%	-43.3%
OH	11.3	11.0%	4.3%	11.6%	9.4%	43.9%	27.0%	+51.1%	-56.8%
OK	3.4	17.9%	3.4%	14.8%	11.5%	28.7%	17.5%	+21.1%	-87.6%
OR	3.3	14.1%	5.7%	12.8%	11.9%	39.0%	29.2%	-2.0%	-54.0%
PA	12.0	10.0%	4.4%	11.3%	8.2%	44.0%	29.8%	-16.7%	-57.9%
RI	1.0	9.0%	4.1%	11.8%	8.8%	48.1%	32.3%	+32.9%	-26.1%
SC	3.9	16.6%	4.5%	13.3%	10.2%	30.9%	21.6%	+37.8%	-70.6%
SD	0.7	12.6%	2.9%	13.0%	7.3%	25.9%	17.5%	+17.0%	-60.2%
TN	5.5	12.7%	4.0%	14.5%	10.2%	55.6%	40.6%	+12.1%	-45.8%
TX	2.0	24.1%	4.6%	16.1%	12.2%	30.1%	20.9%	-9.9%	-51.9%
UT	2.1	13.8%	3.7%	8.5%	7.1%	28.2%	16.5%	+17.9%	-41.4%
VT	0.6	10.6%	3.0%	10.6%	8.1%	54.3%	41.3%	+44.0%	-40.0%
VA	6.9	13.6%	2.8%	11.13%	7.4%	28.8%	19.2%	-29.7%	-59.4%
WA	5.8	13.1%	4.7%	10.0%	6.7%	45.0%	34.1%	+14.9%	-47.0%
WV	1.8	17.2%	6.6%	17.6%	14.2%	47.6%	31.0%	-14.7%	-68.0%
WI	5.3	10.3%	3.0%	8.6%	5.8%	39.2%	26.6%	-3.5%	-79.7%
WY	0.5	16.2%	4.9%	12.0%	8.4%	27.3%	17.7%	-5.5%	-91.8%

Sources:

Population, 1999: Kathleen O’Leary Morgan and Scott Morgan. *State Rankings, 2000. A Statistical View of the 50 United States.*

Uninsured rate, 3-year average, 1997-1999: U.S. Census Bureau, www.census.gov.

Change in Medicaid enrollment 6/96-6/98: Health Care Financing Administration (HCFA) www.hcfa.gov/medicaid/omc1998/1999.htm.

Calculations were done by staff of the Center for Health Services Research and Policy (CHSRP), School of Public Health and Health Services, The George Washington University Medical Center.

Change in Medicaid enrollment 6/98-12/99: HCFA, www.hcfa.gov/medicaid/omc1998/1999.htm, calculations by CHSRP staff.

Persons below 100 percent FPL receiving Medicaid, 1997-1999: The Kaiser Commission on Medicaid and The Uninsured in America, *Health Insurance Coverage of the Poor Non-Elderly*, www.kff.org/uninsured.

Persons below 200 percent FPL receiving Medicaid, 1997-1999: The Kaiser Commission on Medicaid and The Uninsured in America, *Health Insurance Coverage of the Near Poor Non-Elderly*, www.kff.org/uninsured.

Federal Medicaid matching rate (FMAP), FY 2000: *Federal Register*, vol. 64, no. 7, January 12, 1999.

State budget spent on Medicaid, FY 2000: National Association of State Budget Officers. *State Budget Spent on Medicaid FY 2000*, June 2000.

Unemployment rate, 1999: Kathleen O’Leary Morgan and Scott Morgan. *State Rankings, 2000, A Statistical View of the 50 United States.*

Poverty Rate, 1998: Kathleen O’Leary Morgan and Scott Morgan. *State Rankings, 2000. A Statistical View of the 50 United States.*

Families Living in Poverty, 1998: Kathleen O’Leary and Scott Morgan. *State Rankings, 2000. A Statistical View of the 50 United States.*

Table 2: Selected State Medicaid Program Characteristics

State ¹	Total Medicaid Enrollment			Changes In Total Medicaid Enrollment		% Non-Elderly <100% FPL w/ Medicaid	Federal Medicaid Matching Rate	State Budget Spent on Medicaid		Section 1931 Medicaid Eligibility as percentage of FPL 3-Person Family with Earnings Disregard			Medicaid Managed Care Penetration Rate
	6/96	6/98	6/00	6/96 – 6/98 (%)	6/96 – 6/00 (%)	1997 – 1999 (%)	2000 (%)	1997 (%)	2000 (%)	Aplcnt	Recpt ¹		2000 (%)
											June 2001 (%FPL)		
AL*	498,006	510,847	542,816	+2.6%	+9.0%	38.3%	69.57%	19.0%	15.7%	31%	31%	22%	59.88%
AK	87,550	65,936	81,391	-24.7%	-7.0%	31.4%	59.80%	6.9%	8.5%	82% in AK	124% in AK		0.00%
AZ	443,302	432,809	478,776	-2.4%	+8.0%	26.7%	65.92%	13.7%	14.0%	54%	54%		93.37%
AR	371,047	332,809	389,229	-10.3%	+4.9%	33.4%	72.85%	16.3%	15.8%	22%	54%		57.10%
CA	5,415,207	4,901,159	5,036,768	-9.5%	-7.0%	38.6%	51.87%	17.1%	16.0%	108%	158%		50.14%
CO	259,949	218,104	281,764	-16.1%	+8.4%	23.0%	50.00%	17.1%	36.2%	43%	43%		90.23%
CT	311,884	307,243	320,617	-1.5%	+2.8%	30.3%	50.00%	16.6%	20.2%	158%	158%		71.74%
DE*	73,798	80,794	95,178	+9.5%	+29.0%	42.5%	50.00%	9.9%	9.4%	120%	120%	81%	79.36%
DC	125,000	112,645	119,160	-10.0%	-4.7%	51.3%	70.00%	N/A	19.0%	200%	200%		66.18%
FL	1,538,007	1,417,854	1,701,128	-7.8%	+10.6%	29.6%	56.52%	16.1%	15.1%	33%	68%		59.76%
GA*	968,008	882,636	841,917	-8.8%	-13.0%	40.3%	59.88%	18.3%	17.0%	64%	64%	44%	95.73%
HI ²	163,000	163,721	164,474	+4%	+9%	41.6%	55.11%	10.8%	9.2%	100% in HI	100% in HI		73.92%
ID	84,618	88,658	108,176	+4.8%	+27.8%	24.3%	70.15%	13.1%	14.7%	35%	35%		29.89%
IL	1,399,372	1,308,582	1,392,388	-6.5%	-.5%	39.9%	50.00%	23.7%	16.0%	51%	96%		9.88%
IN	432,558	404,000	563,205	-6.6%	+30.2%	30.9%	61.74%	17.6%	19.1%	32%	32%		66.77%
IA	226,701	206,981	201,845	-8.7%	-11.0%	38.6%	63.06%	13.4%	12.7%	90%	90%		90.29%
KS	191,188	170,990	192,009	-10.6%	+4%	30.4%	60.03%	13.4%	14.9%	42%	65%		56.30%
KY*	531,728	518,467	575,399	-2.5%	+8.2%	38.4%	70.55%	21.4%	18.8%	52%	77%	52%	80.67%
LA	801,930	752,747	771,707	-6.1%	-3.8%	35.8%	70.32%	22.2%	20.6%	22%	22%		6.32%
ME	157,881	153,047	161,664	-3.1%	+2.4%	43.9%	66.22%	25.6%	21.4%	150%	150%		35.35%
MD	466,114	456,869	478,870	-2.0%	+2.7%	23.1%	50.00%	13.7%	17.1%	44%	44%		80.54%
MA	654,000	850,776	911,014	+30.1%	+39.3%	51.5%	50.00%	19.4%	20.2%	133%	133%		64.03%
MI*	1,148,115	1,106,466	1,063,557	-3.6%	-7.4%	46.8%	55.11%	19.5%	18.5%	66%	69%	66%	100.00%
MN*	477,000	428,842	465,898	-10.1%	-2.3%	47.6%	51.48%	18.8%	18.9%	80%	80%	57%	62.54%
MS*	510,226	384,432	559,379	-24.7%	+9.6%	35.8%	76.80%	23.7%	21.8%	39%	57%	39%	39.05%
MO*	637,897	607,321	754,292	-4.8%	+18.2%	39.5%	60.51%	20.2%	18.0%	47%	74%	32%	40.37%
MT	79,000	67,387	69,301	-14.7%	-12.3%	33.2%	72.30%	15.8%	14.4%	71%	71%		61.06%
NE	144,305	151,951	182,868	+5.3%	+26.7%	38.8%	60.88%	15.9%	18.1%	57%	57%		76.67%
NV*	64,712	90,585	96,100	+40.0%	+48.5%	18.5%	50.00%	N/A	8.4%	134%	134%	37%	39.48%
NH	72,158	73,036	78,614	+1.2%	+8.9%	42.3%	50.00%	30.7%	23.5%	64.0%	64%		5.64%

State ¹	Total Medicaid Enrollment			Changes In Total Medicaid Enrollment		% Non-Elderly <100% FPL w/ Medicaid	Federal Medicaid Matching Rate	State Budget Spent on Medicaid		Section 1931 Medicaid Eligibility as percentage of FPL 3-Person Family with Earnings Disregard			Medicaid Managed Care Penetration Rate
	6/96	6/98	6/00	6/96 – 6/98 (%)	6/96 – 6/00 (%)	1997 – 1999 (%)	2000 (%)	1997 (%)	2000 (%)	Aplcnt	Recpt ¹		2000 (%)
											June 2001 (%FPL)		
	706,812	643,120	627,686	-9.0%	-11.2%	34.2%	50.00%	22.2%	20.9%	133%	133%		59.21%
NM	331,808	243,059	312,360	-26.7%	-5.9%	34.6%	73.32%	17.0%	14.8%	60%	60%		63.80%
NY	2,750,000	2,140,104	2,751,385	-22.2%	+0.5%	48.7%	50.00%	33.4%	31.7%	57%	100%		25.13%
NC	818,364	815,359	876,372	-.4%	+7.1%	34.9%	62.49%	20.1%	19.3%	64%	64%		68.33%
ND*	46,566	42,490	43,498	-8.8%	-6.6%	27.5%	70.42%	15.7%	17.4%	151%	151%	86%	55.09%
OH	741,910	1,032,405	1,121,227	+39.2%	+51.1%	43.9%	58.67%	20.8%	19.2%	100%	100%		21.36%
OK	333,613	310,494	404,123	-6.9%	+21.1%	28.7%	71.09%	14.0%	13.0%	50.0%	50%		69.09%
OR	383,334	338,178	375,683	-11.8%	-2.0%	39.0%	59.96%	12.4%	17.4%	78%	78%		83.07%
PA	1,612,905	1,325,212	1,343,478	-17.8%	-16.7%	44.0%	53.82%	26.4%	25.8%	68%	68%		72.59%
RI	113,891	117,800	151,406	+3.4%	+32.9%	48.1%	53.77%	27.2%	24.4%	192%	192%		68.72%
SC*	390,561	442,994	538,188	+13.4%	+37.8%	30.4%	69.95%	18.4%	20.2%	96%	96%	57%	5.97%
SD	62,539	62,110	73,180	-.7%	+17.0%	25.9%	68.72%	19.6%	19.9%	68%	68%		92.70%
TN	1,180,449	1,268,769	1,323,319	+7.5%	+12.1%	55.6%	63.10%	23.7%	25.2%	84%	84%		100.00%
TX* ³	1,985,449	1,719,249	1,788,768	-13.4%	-9.9%	30.1%	61.36%	24.9%	21.3%	45%	243%	34%	33.89%
UT*	113,000	123,572	133,175	+9.4%	+17.9%	28.2%	71.55%	11.6%	11.3%	57%	84%	57%	89.51%
VT	82,650	107,976	119,057	+30.6%	+44.0%	54.3%	62.24%	21.5%	22.7%	85%	85%		46.70%
VA*	681,313	498,626	479,198	-26.8%	-29.7%	28.8%	51.67%	12.5%	11.1%	32%	47%	32%	58.64%
WA	696,658	788,922	800,481	+13.2%	+14.9%	45.0%	51.83%	15.7%	16.5%	93%	93%		100.00%
WV	307,503	308,910	262,315	+0.5%	-14.7%	47.6%	74.78%	23.8%	23.8%	29%	29%		34.55%
WI*	463,142	397,215	479,167	-14.2%	+3.5%	39.2%	58.78%	13.8%	13.5%	76%	76%	51%	43.91%
WY	38,956	35,332	36,832	-9.3%	-5.5%	27.3%	64.04%	7.8%	8.3%	67%	67%		0.00%

Footnotes:

¹ Fifteen states marked with asterisk have time-limited increased earnings disregard for recipients. These states have two entries in this column to reflect two eligibility levels: one with the increased earnings disregard, and one after this disregard has ended. Please see the individual fact state sheets for more details.

² Hawaii does not have a Section 1931 eligibility category, families are covered under the 1115 waiver program, QUEST.

³ Texas has not properly implemented Section 1931 and the eligibility criteria noted here apply only to TANF families. Medicaid only families are eligible under the state's medically needy program; applicant and recipient eligibility levels are both 34% FPL.

Sources:

Medicaid Enrollment and Changes in Medicaid Enrollment, 1996-1999: *Medicaid Managed Care Enrollment Reports*, U.S. Department of Health and Human Services, HCFA. Calculations were done by staff of the Center for Health Services Research and Policy (CHSRP), School of Public Health and Health Services, The George Washington University Medical Center.

Percentage of Non-elderly Persons Below 100 FPL on Medicaid, 1997-1999: The Kaiser Commission on Medicaid and the Uninsured in America, *Health Insurance Coverage of the Poor Non-elderly*. www.kff.org/uninsured.

Percentage of State Budget Spent on Medicaid: The National Association of State Budget Officers, *State Budget Spent on Medicaid FY 2000*. June 2000. Medicaid Managed Care Penetration Rate: U.S. Department of Health and Human Services, HCFA, December 1999.

1931 Medicaid eligibility criteria for applicants and recipients: Data were collected during Kaiser-supported study entitled *Making Medicaid Work for Low-Income Families* and are accurate to June 2001.

Table 3: Changes in Overall Medicaid and TANF Enrollment

State	Medicaid 6/96 – 6/98 Change (%)	TANF 6/96 – 6/98 Change (%)	Medicaid 6/98 – 6/00 Change (%)	TANF 6/98 – 6/00 Change (%)	Medicaid 6/96 – 6/00 Change (%)	TANF 6/96 – 6/00 Change (%)
U.S.	-6.7%	-32.3%	+9.0%	-30.1%	+1.7%	-53.2%
AL	+2.6%	-47.7%	+6.3%	+3.7%	+9.0%	-45.8%
AK	-24.7%	-18.2%	+23.4%	-20.1%	-7.0%	-34.9%
AZ	-2.4%	-41.2%	+10.6%	-13.9%	+8.0%	-49.4%
AR	-10.3%	-43.8%	+17.0%	-12.3%	+4.9%	-50.8%
CA	-9.5%	-22.9%	+2.8%	-37.0%	-7.0%	-51.4%
CO	-16.1%	-43.2%	+29.2%	-49.3%	+8.4%	-71.2%
CT	-1.5%	-25.2%	+4.4%	-46.4%	+2.8%	-60.0%
DE	+9.5%	+42.4%	+17.8%	-47.8%	+29.0%	-25.6%
DC	-10.0%	-20.1%	+5.8%	-17.6%	-4.7%	-34.1%
FL	-7.8%	-54.9%	+20.0%	-44.1%	+10.6%	-74.8%
GA	-8.8%	-47.3%	-4.6%	-24.3%	-13.0%	-60.1%
HI	+4.4%	-30.3%	+5.5%	-8.4%	+9.9%	-36.1%
ID	+4.8%	-81.6%	+22.0%	-42.9%	+27.8%	-89.5%
IL	-6.5%	-25.9%	+6.4%	-46.0%	-.5%	-60.0%
IN	-6.6%	-26.6%	+39.4%	-8.7%	+30.2%	-33.0%
IA	-8.7%	-22.9%	-2.5%	-21.8%	-11.0%	-39.7%
KS	-10.6%	-49.2%	+12.3%	+9.7%	+4.4%	-44.3%
KY	-2.5%	-30.7%	+11.0%	-28.1%	+8.2%	-50.2%
LA	-6.1%	-39.9%	+2.5%	-42.5%	-3.8%	-65.5%
ME	-3.1%	-28.6%	+5.6%	-31.7%	+2.4%	-51.3%
MD	-2.0%	-39.2%	+4.8%	-40.0%	+2.7%	-63.5%
MA	+30.1%	-27.6%	+7.1%	-43.55	+39.3%	-59.1%
MI	-3.6%	-35.13%	-3.9%	-41.7%	-7.4%	-62.2%
MN	-10.1%	-15.1%	+8.6%	-20.2%	-2.3%	-32.3%
MS	-24.7%	-59.5%	+45.5%	-34.1%	+9.6%	-73.3%
MO	-4.8%	-35.5%	+24.2%	-15.0%	+18.2%	-45.2%
MT	-14.7%	-42.0%	+2.8%	-21.4%	-12.3%	-54.4%
NE	+5.3%	-11.9%	+20.3%	-20.3%	+26.7%	-29.8%
NV	+40.0%	-28.6%	+6.1%	-35.4%	+48.5%	-53.9%
NH	+1.2%	-32.8%	+7.6%	-13.4%	+8.9%	-41.8%
NJ	-9.0%	-33.4%	+2.4%	-33.7%	-11.2%	-55.8%
NM	-26.7%	-25.3%	+28.5%	-8.4%	-5.9%	-31.6%
NY	-22.2%	-21.3%	+28.6%	-24.5%	+0.05%	-40.6%
NC	-.4%	-36.4%	+7.5%	-43.9%	+7.1%	-64.3%
ND	-8.8%	-34.3%	-2.4%	-.04%	-6.6%	-34.6%
OH	+39.2%	-34.1%	+8.6%	-30.3%	+51.1%	-54.0%
OK	-6.9%	-29.5%	+30.2%	-52.4%	+21.1%	-66.5%
OR	-11.8%	-41.0%	+11.1%	-12.9%	-2.0%	-48.6%
PA	-17.8%	-31.5%	+1.4%	-35.4%	-16.7%	-55.8%
RI	+3.4%	-5.3%	+28.5%	-18.1%	+32.9%	-22.4%
SC	+13.4%	-47.8%	+21.5%	-40.4%	+37.8%	-68.9%

State	Medicaid 6/96 – 6/98 Change (%)	TANF 6/96 – 6/98 Change (%)	Medicaid 6/98 – 6/00 Change (%)	TANF 6/98 – 6/00 Change (%)	Medicaid 6/96 – 6/00 Change (%)	TANF 6/96 – 6/00 Change (%)
TN	+7.5%	-43.0%	+4.3%	-2.3%	+12.1%	-44.3%
TX	-13.4%	-44.2%	+4.0%	5.6%	-9.9%	-47.0%
UT	+9.4%	-29.1%	+7.8%	-13.1%	+17.9%	-38.4%
VT	+30.6%	-21.6%	+10.3%	-20.9%	+44.0%	-37.9%
VA	-26.8%	-36.4%	-3.9%	-31.9%	-29.7%	-56.7%
WA	+13.2%	-24.5%	+1.5%	-29.5%	+14.9%	-46.8%
WV	+5.5%	-56.1%	+15.1%	-22.3%	-14.7%	-65.9%
WI	-14.2%	-76.5%	+20.6%	+1.8%	+3.5%	-76.0%
WY	-9.3%	-75.1%	+4%	-63.1%	-5.5%	-90.8%

Sources:

Health Care Financing Administration. *Medicaid Managed Care Enrollment Report*,
www.hcfa.gov/medicaid/omc1996/2000.htm.

Department of Health and Human Services, Administration for Children and Families, Changes in welfare caseloads,
<http://www.acf.dhhs.gov/news/stats/caseload.htm>.

Calculations were done by staff of the Center for Health Services Research and Policy (CHSRP), School of Public Health and Health Services, The George Washington University Medical Center.

Table 4: Section 1931 Medicaid Eligibility Criteria and Maximum Monthly Earnings For 3-Person Family

State	Amount of Applicant Earned Income Disregard	Amount of Recipient Earned Income Disregard ¹	Gross Income Test	Asset Test	Income Standard		Applicant Maximum Monthly Earned Income		Recipient Maximum Monthly Earned Income ¹		
					Applcmt.	Receipt	Amount	% FPL	Amount	% FPL	
AL*	\$90 + \$30 + 1/3	\$90 + \$30 + 1/3	\$1,245	\$1,000 applic. \$2,000 receipt.	\$164	\$164	\$366	31%	\$366	31%	22%
AK	\$90	\$150 + 33%	\$2,068	\$1,000	\$1,118	\$1,118	\$1,208	82% in AK	\$1,827	124% in AK	
AZ	\$90 + \$30 + 1/3	\$90 + \$30 + 1/3	\$1,783	N/A	\$347	\$347	\$641	54%	\$641	54%	
AR	20%	20% + 60%	N/A	\$1,000	\$204	\$204	\$255	22%	\$638	54%	
CA	all income up to 100% FPL + \$90 earnings	all income up to \$100% FPL + \$90 or \$240 + 50% earnings	N/A	\$3,150	\$1,179	\$793	\$1,269	108%	\$1,826	155%	
CO	\$90	\$90	\$779	\$2,000	\$421	\$421	\$511	43%	\$511	43%	
CT	all income up to 150% FPL + \$90 earnings	all income up to 150% FPL + \$90 earnings	N/A	N/A	\$745	\$745	\$1,859	158%	\$1,859	158%	
DE*	\$90 + \$30 + 1/3	\$90 + \$30 + 1/3 + all earnings in 2 nd and 3 rd mos.	\$1,603	N/A	\$867	\$867	\$1,421	120%	\$1,421	120%	81%
DC	all income up to 200% FPL	all income up to 200% FPL	\$2,358	N/A	\$2,360	\$2,360	\$2,358	200%	\$2,358	200%	
FL	\$90	\$200 + 50%	\$2,182	\$2,000	\$303	\$303	\$393	33%	\$806	68%	
GA*	\$90 + \$30 + 1/3	\$90 + \$30 + 1/3	\$784	\$1,000	\$424	\$424	\$756	64%	\$756	64%	44%
HI ²	1931 category not established	1931 category not established	N/A	\$3,250	\$1,356	\$1,356	\$1,356	100% in HI	\$1,356	100% in HI	
ID	\$90	\$90	\$1,833	\$1,000	\$317	\$317	\$407	35%	\$407	35%	
IL	\$90 + \$30 + 1/3	\$90 + \$30 + 1/3 or 2/3	N/A	N/A	\$377	\$377	\$686	58%	\$1,131	96%	
IN	\$90	\$90	N/A	\$1,000	\$288	\$288	\$378	32%	\$378	32%	
IA	20% + 50%	20% + 50%	\$1,570	\$2,000 applic. \$5,000 receipt.	\$426	\$426	\$1,065	90%	\$1,065	90%	
KS	\$90	\$90 + 40%	N/A	\$2,000	\$403	\$403	\$493	42%	\$762	65%	
KY*	\$90	\$90 + \$30 + 1/3 + 2 months of earnings anytime	\$974	\$1,000 applic. \$2,000 receipt.	\$526	\$526	\$616	52%	\$909	77%	52%
LA	\$90	\$90	\$1,100	\$1,000	\$174	\$174	\$264	22%	\$264	22%	
ME	all income up to 150% FPL + \$90 earnings	all income up to 150% FPL + \$90 earnings	N/A	\$2,000	\$1,180	\$1,180	\$1,859	158%	\$1,859	158%	
MD	20%	20%	\$956	\$2,000	\$418	\$418	\$523	44%	\$523	44%	
MA	all income up to 133% FPL	all income up to 133% FPL	\$1,568	N/A	\$1,568	\$1,568	\$1,568	133%	\$1,568	133%	
MI*	\$200 + 20%	\$200 + 20% or \$90 + \$30 + 1/3	N/A	\$3,000	\$459	\$459	\$774	66%	\$809	69%	66%
MN*	\$120 + 1/3	\$120 + 1/3	N/A	\$6,200	\$548	\$548	\$942	80%	\$942	80%	57%
MS*	\$90	\$90 + \$30 + 1/3	\$680	N/A	\$368	\$368	\$458	39%	\$672	57%	39%
MO*	\$90 + \$30 + 1/3	2/3 of earnings for 12 months	\$1,565	N/A	\$292	\$292	\$558	47%	\$876	74%	32%

State	Amount of Applicant Earned Income Disregard	Amount of Recipient Earned Income Disregard ¹	Gross Income Test	Asset Test	Income Standard		Applicant Maximum Monthly Earned Income		Recipient Maximum Monthly Earned Income ¹		
					Applcmt.	Recipt	Amount	% FPL	Amount	% FPL	
MT	\$200 + 25%	\$200 + 25%	\$1,125	\$3,000	\$478	\$478	\$836	71%	\$836	71%	
NE	20%	20%	N/A	\$6,000	\$535	\$535	\$669	57%	\$669	57%	
NV*	1 st 3 months of earnings	50%	\$1,561	\$2,000	\$844	\$348	\$1,561	134%	\$696	134%	37%
NH	20%	50%	N/A	\$1,000 applic. \$2,000 recip.	\$600	\$600	\$750	64%	\$1,200	102%	
NJ	up to 133% FPL	up to 133% FPL	N/A	N/A	\$443	\$443	\$1,568	133%	\$1,568	133%	
NM	\$120 + 1/3	\$120 + 1/3	\$720	N/A	\$389	\$389	\$704	60%	\$704	60%	
NY	\$90	\$90 + 47%	\$2,181	\$3,000	\$577	\$577	\$667	57%	\$1,179	100%	
NC	27.5%	27.5% + first 3 months earnings	N/A	\$3,000	\$544	\$544	\$750	64%	\$750	64%	
ND*	\$180 or 27% + 50% of remainder	\$180 or 27% + 50% of remainder	N/A	N/A	\$461	\$461	\$1,777	151%	\$1,777	151%	86%
OH	\$250 + 50% or all income up to 100% FPL	\$250 + 50% or all income up to 100% FPL	\$1,813	N/A	\$1,179	\$1,179	\$1,179	100%	\$1,179	100%	
OK	\$120	\$120	N/A	N/A	\$471	\$471	\$591	50%	\$591	50%	
OR	\$90 + \$30 + 1/3 or 50%	\$90 + \$30 + 1/3 or 50%	\$1,179	\$2,000	\$460	\$460	\$920	78%	\$920	78%	
PA	50%	50%	\$1,086	N/A	\$403	\$403	\$806	68%	\$806	68%	
RI	all income up to 185% FPL + \$90 earnings	all income up to 185% FPL + \$90 earnings	N/A	N/A	\$2,181	\$2,181	\$2,271	192%	\$2,271	192%	
SC*	50%	50% + 12 months earnings	N/A	N/A	\$568	\$568	\$1,136	96%	\$1,136	96%	57%
SD	no earnings disregarded	no earnings disregarded	\$796	\$2,000	\$796	\$796	\$796	68%	\$796	68%	
TN	\$150	\$150	\$1,554	\$3,100	\$840	\$840	\$990	84%	\$990	84%	
TX* ³	\$120 + 1/3 for TANF families only	\$120 + 90% of earnings for 1 st 4 months for TANF families only	N/A	\$2,000 to \$3,000	\$275	\$275	\$533	45%	\$2,870	243%	34%
UT*	\$90	\$90 + \$30 + 1/3	\$1,079	\$3,025	\$583	\$583	\$673	57%	\$995	84%	57%
VT	\$150 + 25%	\$150 + 25%	N/A	\$3,150	\$636	\$636	\$998	85%	\$998	85%	
VA*	\$90	\$90 + \$30 + 1/3	\$595	\$1,000	\$291	\$291	\$381	32%	\$557	47%	32%
WA	50%	50% + all earnings in 2 nd and 3 rd months	N/A	\$1,000 applic. only	\$546	\$546	\$1,092	93%	\$1,092	93%	
WV	\$90	\$90	\$1,833	\$1,000	\$453	\$453	\$543	46%	\$543	46%	
WI*	\$90 + \$30 + 1/3	\$90 + \$30 + 1/3	\$1,196	\$1,000	\$517	\$517	\$896	76%	\$896	76%	51%
WY	\$200	\$200	\$590	\$2,500	\$590	\$590	\$790	67%	\$790	67%	

Footnotes:

¹ Fifteen states marked with asterisk have time-limited increased earnings disregard for recipients. These states have two entries in this column to reflect two eligibility levels: one with the increased earnings disregard, and one after this disregard has ended. Please see the individual fact state sheets for more details.

² Hawaii does not have a Section 1931 eligibility category, families are covered under the 1115 waiver program, QUEST.

³ Texas has not properly implemented Section 1931 and the eligibility criteria noted here apply only to TANF families. Medicaid only families are eligible under the state's medically needy program; applicant and recipient eligibility levels are both 34% FPL.

Source:

1931 Medicaid eligibility criteria for applicants and recipients: Data were collected during Kaiser-supported study entitled *Making Medicaid Work for Low-Income Families* and are accurate to June 2001.

Table 5: Eligibility for 1931 Medicaid Families, Medicaid Expansion Children and SCHIP Children as a Function of Percent of Federal Poverty Level

State ¹	1931 Applicant Family of 3 with Earnings Disregard	1931 Recipient Family of 3 with Earnings Disregard		Medicaid Coverage for Children Including Medicaid Expansion & SCHIP Medicaid Expansion ²				Separate State SCHIP	Family Coverage w/SCHIP Waiver
				Up To 1 Year	1 to 5 Years	6 to 16 Years	17 to 19 Years		
AL*	31%	31%	22%	133%	133%	100%	100%	200%	N/A
AK	82%	124%		200%	200%	200%	200%	N/A	N/A
AZ	54%	54%		140%	133%	100%	50%	200%	N/A
AR	22%	54%		200%	200%	200%	100%	N/A	N/A
CA	108%	155%		200%	133%	100%	100%	250%	✓ ³
CO	43%	43%		133%	133%	100%	43%	185%	N/A
CT	158%	158%		185%	185%	185%	185%	300%	N/A
DE*	120%	120%	81%	185%	133%	100%	100%	200%	N/A
DC	200%	200%		200%	200%	200%	200%	N/A	N/A
FL	33%	68%		200%	133%	100%	100%	200%	N/A
GA*	64%	64%	44%	185%	133%	100%	100%	235%	N/A
HI ⁴	100%	100%		185%	100%	100%	200%	N/A	N/A
ID	35%	35%		150%	150%	150%	150%	N/A	N/A
IL	58%	96%		200%	133%	133%	133%	185%	N/A
IN	32%	32%		150%	150%	150%	150%	200%	N/A
IA	90%	90%		200%	133%	133%	133%	200%	N/A
KS	42%	65%		150%	133%	100%	100%	200%	N/A
KY*	52%	77%	52%	185%	150%	150%	150%	200%	N/A
LA	22%	22%		150%	150%	150%	150%	N/A	N/A
ME	158%	158%		150%	150%	150%	100%	200%	N/A
MD	44%	44%		200%	200%	200%	200%	N/A	N/A
MA ⁵	133%	133%		200%	150%	150%	150%	200%	400%
MI*	66%	69%	66%	185%	150%	150%	150%	200%	N/A
MN*	80%	80%	57%	280%	275%	275%	275%	N/A	N/A
MS*	39%	57%	39%	185%	133%	100%	100%	200%	N/A
MO*	47%	74%	32%	300%	300%	300%	300%	N/A	N/A
MT	71%	71%		133%	133%	100%	71%	150%	N/A
NE	57%	57%		185%	185%	185%	185%	N/A	N/A
NV*	134%	134%	37%	133%	133%	100%	89%	200%	N/A
NH	64%	102%		300%	185%	185%	185%	300%	N/A
NJ	133%	133%		185%	133%	133%	133%	350%	✓ ⁶
NM	60%	60%		235%	235%	235%	235%	N/A	N/A

State ¹	1931 Applicant Family of 3 with Earnings Disregard	1931 Recipient Family of 3 with Earnings Disregard		Medicaid Coverage for Children Including Medicaid Expansion & SCHIP Medicaid Expansion ²				Separate State SCHIP		Family Coverage w/SCHIP Waiver
				Up To 1 Year	1 to 5 Years	6 to 16 Years	17 to 19 Years			
NY	57%	100%		185%	133%	100%	100%	250%		N/A
NC	64%	64%		185%	133%	100%	100%	200%		N/A
ND*	151%	151%	86%	133%	133%	100%	100%	140%		N/A
OH	100%	100%		200%	200%	200%	200%	N/A		N/A
OK	50%	50%		185%	185%	185%	185%	N/A		N/A
OR	78%	78%		133%	133%	100%	100%	170%		N/A
PA ⁵	68%	68%		185%	133%	100%	71%	200%	235%	N/A
RI	192%	192%		250%	250%	250%	250%	N/A		✓ ⁸
SC*	96%	96%	57%	185%	150%	150%	150%	N/A		N/A
SD	68%	68%		140%	140%	140%	140%	N/A		N/A
TN	84%	84%		185%	133%	100%	N/A	400%		N/A
TX* ⁷	45%	243%	34%	185%	133%	100%	100%	200%		N/A
UT*	57%	84%	57%	133%	133%	100%	100%	200%		N/A
VT	85%	85%		300%	300%	300%	300%	N/A		N/A
VA*	32%	47%	32%	133%	133%	100%	100%	185%		N/A
WA	93%	93%		200%	200%	200%	200%	250%		N/A
WV	46%	46%		150%	150%	100%	100%	150%		N/A
WI*	76%	76%	51%	185%	185%	185%	185%	N/A		✓ ⁹
WY	67%	67%		133%	133%	100%	67%	133%		N/A

Footnotes:

¹ Fifteen states marked with asterisk have time-limited increased earnings disregard for recipients. These states have two entries in this column to reflect two eligibility levels: one with the increased earnings disregard, and one after this disregard has ended. Please see the individual fact state sheets for more details.

² Unlike 1931 Medicaid, the income eligibility levels for Medicaid and SCHIP expansions do not account for the effects of any disregards.

³ California is planning to cover parents up to 200% FPL, subject to federal approval and availability of state funds.

⁴ Hawaii has not established Section 1931 Medicaid; the eligibility levels shown are for its 1115 Medicaid waiver known as the QUEST Program.

⁵ Massachusetts and Pennsylvania provide state-financed coverage for children with incomes above SCHIP levels up to 400% FPL and 235% FPL respectively.

⁶ New Jersey covers parents with incomes up to 200% FPL using SCHIP funds.

⁷ Rhode Island covers parents with income up to 185% FPL using SCHIP funds.

⁸ Texas has not properly implemented Section 1931 and the eligibility criteria noted here apply only to TANF families. Medicaid only families are eligible under the state's medically needy program; applicant and recipient eligibility levels are both 34% FPL.

⁹ Wisconsin covers applicants parents with incomes between 100% and 185% FPL using SCHIP funds, and recipient parents up to 200% FPL.

Sources:

Medicaid coverage for children: Donna Cohen Ross and Lauren Cox. *Making it Simple: Medicaid for Children and CHIP Income Eligibility Guidelines and Eligibility Procedures: Individual State Profiles*. Center on Budget and Policy Priorities for the Kaiser Commission on Medicaid and the Uninsured, October 2000.

Family Coverage with SCHIP Waiver: *American Health Line, National Journal's Daily Briefing*. January 19, 2001, www.nationaljournal.com

1931 Medicaid eligibility criteria for applicants and recipients: Data were collected during Kaiser-supported study entitled *Making Medicaid Work for Low-Income Families* and are accurate to June 2001.

Table 6: Provisions of State 1115 Medicaid Demonstrations that Help Low-Income Working Families¹

State	Section 1115 Medicaid Demonstration						Section 1931		
	Year Implemented	Expanded Eligibility Groups	Extended TMA Coverage	Eliminated Asset Test	Mandated Managed Care	Expanded Coverage For Families	Coverage for 3-Person Families with Earnings Disregard (% FPL)		
							Applcmt.	Receipt.	
AZ	1982	None	Yes	Yes	Yes	No	54%	54%	
AR	1997	Children with family incomes up to 200% FPL ³	No	No	No	No	22%	54%	
DE*	1996	Uninsured adults up to 100% FPL ⁴	Yes	Yes	Yes	100% FPL	120%	120%	81%
HI	1994	Families up to 100% FPL ⁵	No	No	Yes	100% FPL	100%	100%	
MD	1997	None	No	No	Yes	No	44%	44%	
MA	1997	Many groups e.g., pregnant women, children and persons w/ HIV up to 200% FPL ⁶ parents up to 133% FPL; several disabled groups; adults 19-64 up to 200% FPL	No	Yes	Yes	133% FPL 200% for adults with employer-based health insurance	133%	133%	
MN*	1995	Pregnant women, children up to age 19 ⁷ and families up to 275% FPL; childless adults' children above age 21 up to 175% FPL	No	Yes	Yes	275% FPL	80%	80%	57%
MO*	1999	Parents up to 100% FPL or 125% FPL ⁸	Yes	Yes	Yes	100% to 125% FPL	47%	74%	32%
NY	1997 phase in	Waiver pending to cover parents up to 150% FPL, and childless adults up to 100% FPL	No	No	Yes	150% FPL (10/02)	57%	100%	
OH	1996	None	No	No	Yes	No	100%	100%	
OK	1996	None	No	Yes	Yes	No	50%	50%	
OR	1994	Families and adults up to 100% FPL	No	No	Yes	100% FPL	78%	78%	
RI	1994	Pregnant women, children up to 250% FPL; parents up to 185% FPL ⁹	Yes	Yes	Yes	185% FPL	192%	192%	
TN	1994	Uninsured and uninsurable individuals and families up to 400% FPL ¹⁰	Yes	No	Yes	400% FPL ¹⁰	84%	84%	
VT	1994	Children up to 300% FPL; single adults up to 150% FPL; parents up to 185% FPL	Yes	Yes	Yes	185% FPL	85%	85%	
WI*	1999	Applicant parents up to 185% FPL, recipient parents up to 200% FPL	No	No	Yes	185% FPL	76%	76%	51%

Footnotes:

¹ This table does not include states that were approved in 2001 to use SCHIP funds to provide coverage to parents and families. In 2001, three states were approved to cover parents using SCHIP dollars: Rhode Island and Wisconsin each maintained the eligibility levels established under their existing 1115 waiver programs but were allowed to use SCHIP dollars to fund the coverage, while New Jersey expanded eligibility to parents to 200% FPL using SCHIP funds.

² States marked with asterisk have time-limited increased earnings disregard for recipients. These states have two entries in this column to reflect two eligibility levels: one with the increased earnings disregard, and one after this disregard has ended. Please see the individual fact state sheets for more details.

³ Families in Arkansas are required to pay copayments, not premiums, (e.g., \$5 per prescriptions, \$10 per outpatient services, and 20% of the first day's hospital per diem).

⁴ There is no cost-sharing for this coverage in Delaware.

⁵ Eligibility for expansion eligibles in Hawaii was reduced from 300% FPL to 100% FPL on January 1, 1998. Enrollment cap of 125,000 applies. Premiums and copayments apply for individuals and families (except for pregnant women, infants, and children up to age 6) with incomes over 100% FPL.

⁶ Children in Massachusetts under age 1 with incomes up to 200% FPL are enrolled in MassHealth Standard. Children ages 1-18 with incomes up to 150% are enrolled in MassHealth Family Assistance/Premium Assistance Program; the state pays the employee's share of the employer premium minus a small family contribution. Children 1-18 between 150% and 200% FPL who do not have access to employer sponsored health insurance are enrolled in the MassHealth Family Assistance/Direct Purchase of Benefits program; the state buys the child into the Standard program.

⁷ In Minnesota, children up to age 2 are not subject to insurance barriers, while children 2-19 are subject to insurance barriers.

⁸ In Missouri, working parents who are transitioning off welfare and who have a Medicaid-eligible child in the home, absent parents who are participating in Missouri's Parent's Fair Share Program with incomes up to 100% FPL; absent parents with incomes up to 125% FPL who are actively paying their child support. Children up to age 19 with incomes up to 300% FPL are covered under the state's Title XXI program.

⁹ Children are enrolled in RI's Title XXI program.

¹⁰ Enrollment in Tennessee is capped at 1.4 million. Cap was reached in 1995; only mandatory coverage groups and uninsurable persons continue to be newly enrolled.

Table 7: Provisions Helping Low-Income Working Families Get Medicaid

State	Eliminated '100 Hour' Rule	Eliminated Asset Test	Kept Asset Test But Disregards Entirely First Vehicle	Uses 1931 Disregards or Other Policy to Meet TMA Rules	Effectively Extends Transitional Coverage ¹	Increased 1931 Earned Income Disregard	Uses 1115 Medicaid Waiver to Expand Coverage
U.S.	Yes: 42✓ No: 9	Yes: 16✓ No: 35	Yes: 18✓ No: 17	Yes: 18✓ No: 33	Yes: 13✓ No: 38	Yes: 39✓ No: 12	Yes: 11✓ No: 40
AL	✓		✓				
AK	✓		✓	✓		✓	
AZ	✓	✓	N/A	✓	✓	✓	
AR			✓			✓	
CA	✓					✓	
CO	✓		✓				
CT	✓	✓	N/A		✓	✓	
DE	✓	✓	N/A	✓	✓	✓	✓
DC	✓	✓	N/A			✓	
FL	✓					✓	
GA	✓			✓	✓	✓	
HI	✓		✓				✓
ID	✓		✓				
IL	✓	✓	N/A			✓	
IN	✓						
IA	✓					✓	
KS	✓		✓			✓	
KY	✓ ²			✓		✓	
LA							
ME	✓		✓	✓		✓	
MD	✓		✓			✓	
MA	✓	✓	N/A			✓	✓
MI	✓		✓	✓		✓	
MN	✓		✓				✓
MS	✓	✓	N/A		✓	✓	
MO	✓	✓	N/A	✓	✓	✓	✓
MT	✓		✓	✓		✓	
NE			✓		✓	✓	

State	Eliminated '100 Hour' Rule	Eliminated Asset Test	Kept Asset Test But Disregards Entirely First Vehicle	Uses 1931 Disregards or Other Policy to Meet TMA Rules	Effectively Extends Transitional Coverage ¹	Increased 1931 Earned Income Disregard	Uses 1115 Medicaid Waiver to Expand Coverage
NV	✓		✓	✓		✓	
NH			✓	✓		✓	
NJ	✓	✓	N/A	✓	✓	✓	
NM	✓	✓	N/A	✓		✓	
NY	✓					✓	✓
NC			✓	✓	✓	✓	
ND	✓	✓	N/A			✓	
OH	✓	✓	N/A			✓	
OK	✓	✓	N/A				
OR	✓					✓	✓
PA	✓	✓	N/A			✓	
RI	✓	✓	N/A		✓	✓	✓
SC	✓	✓	N/A	✓	✓	✓	
SD	✓		✓			✓	
TN						✓	✓
TX	✓			✓		✓	
UT				✓	✓		
VT	✓		✓		✓		✓
VA	✓						
WA	✓			✓		✓	
WV						✓	
WI							✓
WY	✓		✓			✓	

Footnotes:

¹ Under Section 1931, states have the option to disregard all earnings for a period of time at the point where a family would lose eligibility for Medicaid due to an increase in earnings and before the family enters TMA, thus effectively extending their transitional coverage. Some states, however, have extended the duration of TMA through AFDC or Section 1115 waivers; these waivers will all expire by the end of 2005.

² Kentucky has eliminated the '100 hour' rule for recipient families, but not for applicant families.

Source:

1931 Medicaid eligibility criteria for applicants and recipients: Data were collected during Kaiser-supported study entitled *Making Medicaid Work for Low-Income Families* and are accurate to June 2001.

Table 8: State Policies Addressing '3 out of 6 month' Rule Requirement for Transitional Medicaid Assistance Eligibility to Improve Access for Low-Income Working Families

State	Uses Section 1931 Options		Uses 1115 Waiver Options		Other Strategies
	Provides Targeted Earned Income Disregards	Other Strategies	AFDC Demonstration	Medicaid Demonstration	
AK					retroactive eligibility ¹
AZ	2 nd and 3 rd months' earnings disregarded				
DE	2 nd and 3 rd months' earnings disregarded				
GA	12 months of earnings disregarded				
KY	2 months of earnings disregarded anytime				
ME			'1 out of 3 month' rule for TMA		
MI					state-funded program ²
MS	1 month of earnings disregarded ³				
MO					retroactive eligibility ¹
MT			'3 out of 6 month' rule eliminated		
NV	first 3 months' earnings disregarded				
NH			earnings disregarded in first 3 months as needed for TMA		
NJ	12 months of earnings disregarded				
NM		'3 out of 6 month' rule eliminated			
NC	first 3 months' earnings disregarded				
SC	12 months of earnings disregarded				
TX	first 4 months' earnings disregarded ⁴				
UT	12 months of earnings disregarded				
WA	2 nd and 3 rd months' earnings disregarded				

Footnotes:

¹ Retroactive eligibility was designed to provide Medicaid payment for bills incurred by an individual during the three months prior to becoming eligible. Alaska and Missouri use this provision to ensure that recipients losing their 1931 coverage have three months of eligibility to access TMA.

² In 2000, Michigan established a state-funded program that provided equivalent TMA coverage for families who lose eligibility for 1931 Medicaid and do not meet the '3 out of 6 month' rule.

³ Mississippi's one month earnings disregard only helps families who already have two months of 1931 Medicaid eligibility.

⁴ Texas has not properly implemented its Section 1931 Medicaid program. 1931 Medicaid recipients who also receive TANF get the benefit of this earned income disregard to meet the '3 out of 6 month' rule, whereas, Medicaid-only recipients are still being categorized under the medically needy program and do not receive the benefit of this 1931 disregard. The state is scheduled to delink 1931 Medicaid and TANF properly by November 2002.

Source:

1931 Medicaid eligibility criteria for applicants and recipients: Data were collected during Kaiser-supported study entitled *Making Medicaid Work for Low-Income Families* and are accurate to June 2001.

Table 9: How States with Mandatory Applicant Job Search Account for Potential Effect on Section 1931 Medicaid Coverage

State ¹	1931 Medicaid Eligibility as % FPL Family of 3 w/ Earnings Disregard		TANF Job Search Requirements	Earned Income Disregard Is Not Time-Limited ²	Accounts for TMA '3 out of 6 Month' Requirement	Effectively Extends Transitional Coverage	
	Applicant	Recipient					
AL*	31%	31%	22%	Minimum of two documented employment contacts, work registration and maybe more employment contacts.	No	No	No
AZ	54%	54%		Two-parent families must participate for a minimum of 3 days in work activities.	Yes	Yes	Yes
AR	22%	54%		At least 10 days of job search with number and type of job contact determined by county.	Yes	No	No
GA*	64%	64%	44%	12 to 24 job searches could be required with an average length of 3 to 4 weeks.	No	Yes	Yes
ID	35%	35%		Two weeks of job search required with adequacy determined by caseworker.	Yes	No	No
IN	32%	100% ³		Ten job searches per week for four weeks, only in two counties.	Yes	No	No
KS	42%	65%		At least 10 employer contacts per week until application for cash assistance is approved.	Yes	No	No
MD	44%	44%		The number of required documented job searches varies by county between 20 to 30 per month.	Yes	No	No
MO*	47%	74%	32%	At least 10 employer contacts per week for a four-week period.	No	Yes	Yes
NV*	134%	134%	37%	Ten job search contacts per week until application is approved, which is usually about 4 weeks.	No	Yes	No
NY	57%	100%		Varies by county depending upon the individual county's approach.	Yes	No	No
OH	100%	100%		Varies by county depending upon the individual county's approach to designing their diversion programs.	Yes	No	No
OK	50%	50%		Two week of job search required with scope and type of job search determined by caseworker.	Yes	No	No
OR	78%	78%		Varies by county but generally at least one to two weeks of full-time (20 hours) job search is required.	Yes	No	No
SC*	96%	96%	57%	Two week of job search with at least five employer contacts per week much be completed.	No	Yes	Yes
WI*	76%	76%	51%	Local welfare offices determine number of job searches required for applicants	No	No	No

Footnotes:

¹ Six of these 16 states have time-limited earned income disregards for Medicaid recipients and are marked with an asterisk; these states have two entries in this column to reflect two eligibility levels: one with the increased earnings disregard, and one after this disregard has ended. Please see the individual fact state sheets for more details.

² Six of these 16 states have time-limited earned income disregards for Medicaid recipients. In states with mandatory applicant job search, a time-limited disregard could result in a working family's loss of Section 1931 Medicaid coverage sooner due to increased earnings when the disregard ends, and in effect, could penalize families who find work quickly through the mandatory job search program by jeopardizing their Medicaid coverage. 'Yes' in this column indicates that these 10 states do not limit the recipient disregard; in the six states with 'No', recipient families with earned income face the prospect of losing their 1931 eligibility sooner.

³ In Indiana, only recipient families with both TANF and Medicaid receive an earnings disregard that allows them to retain Medicaid eligibility up to 100% FPL. Medicaid-only recipient families lose eligibility at 32% FPL. However, since job search requirements apply only to TANF families, the higher figure is shown in this table.

Sources:

1931 Medicaid eligibility criteria for applicants and recipients: Data were collected during Kaiser-supported study entitled *Making Medicaid Work for Low-Income Families* and are accurate to June 2001.

TANF Job Search Requirements: Maloy, K., Pavetti, et al. *A Description and Assessment of State Approaches to Diversion Programs and Activities Under Welfare Reform*. Washington, DC: The George Washington University Medical Center, Center for Health Services Research and Policy, August 1998.

Table 10: How States with Lump Sum Payment Diversion Programs Account for Potential Effect on Section 1931 Medicaid Coverage

State ¹	1931 Medicaid Eligibility as % FPL Family of 3 with Earnings Disregard		Disregards Lump Sum Diversion Payment for 1931 Medicaid	Accounts for TMA '3 out of 6 Month' Requirement
	Applicant	Recipient		
AK	82% in AK	124% in AK	✓	✓ ²
AZ	54%	54%	✓	✓
AR	22%	54%	✓	
CA	108%	155%	✓	
CO	43%	43%		
CT	158%	158%	✓	
DC	200%	200%	✓	
FL	33%	68%	✓	
ID	35%	35%	✓	
IA	90%	90%	✓	
KY*	52%	77% 52%	✓	✓
ME	158%	158%	✓	✓ ³
MN*	80%	80% 57%	✓	
MT	71%	71%	✓	✓
NC	64%	64%	✓	✓
NJ	133%	133%	✓	✓
OH ⁴	100%	100%	✓ ¹	
OK	50%	50%		
SD	68%	68%	✓	
TX* ⁵	45%	243% 34%	✓	✓
UT*	57%	84% 57%	✓	
VA*	32%	47% 32%	✓	
WA	93%	93%	✓	✓
WV	46%	46%	✓	
WI*	76%	76% 51%	✓	
WY	67%	67%	✓	

Footnotes:

¹ These six states marked with an asterisk have time-limited increased earnings disregard for recipients. These states have two entries in this column to reflect two eligibility levels: one with the increased earnings disregard, and one after this disregard has ended. Please see the individual fact state sheets for more details.

² Alaska has not authorized the use of disregards to meet the '3 out of 6 month' rule for TMA, however, caseworkers have traditionally used retroactive eligibility to meet the 3-month requirement

³ Maine requires Medicaid eligibility in one of the previous three months for a family to qualify for TMA.

⁴ Existence of lump sum payment diversion program varies by county in Ohio.

⁵ Texas has not properly implemented Section 1931 Medicaid. The earned income disregard designed to meet the '3 out of 6 month' rule of \$120 plus 90% of the remaining earnings for the first 4 months of eligibility is available only to TANF families. Medicaid-only families will reportedly receive the benefits this disregard when the Section 1931 category is finally delinked from TANF in late 2002.

Table 11: Extension of Transitional Medicaid Assistance (TMA) Beyond 12 Months¹

State	Additional TMA Months	Total TMA Months	TMA Extended, In Effect, Using Section 1931 Options	TMA Extended Using Waiver Options
AZ	12	24		1115 Medicaid waiver, expires 2002
CT ²	12	24		AFDC demonstration waiver, expires 2001
DE	12	24		1115 Medicaid waiver, expires 2002
GA	12	24	✓	
MS	1	13	✓	
MO	24	36		1115 Medicaid waiver, expires 2005
NE	12	24		AFDC demonstration waiver, Expires 2002
NJ	12	24	✓	
NC	12	24	✓	
RI	6	18	✓	
SC	12	24	✓	
UT	12	24	✓	
VT ²	24	36		1115 Medicaid waiver, expires June 2001

Footnotes:

¹ Prior to 1996 welfare reform, numerous states used the AFDC waiver process to secure Medicaid waivers that allowed them to tailor Medicaid coverage to their AFDC demonstrations designed to promote the transition from welfare to work. Several states extended TMA coverage by 6 to 12 months using the Medicaid waiver process with the goal of providing families more transitional coverage to support work instead of welfare. HCFA routinely granted these Medicaid waivers and did not ask states to show that these ‘not otherwise matchable Medicaid costs’ would be offset by reduction in Medicaid costs in other areas (e.g., basis for granting home and community-based waivers is that Medicaid paying for community services that would not otherwise be covered is more than offset by savings from reduced use of expensive institutional services); instead, HCFA allowed anticipated reductions in AFDC expenditures due to families remaining off cash assistance as offsets for these Medicaid costs. With the passage of welfare reform and the delinking of Medicaid (i.e., creation of new Medicaid coverage category for families separate from cash), HCFA has indicated that these TMA waivers will no longer be granted unless states can meet the cost offset requirement with reductions in Medicaid costs, which would likely be impossible with TMA extensions. This table shows the states that have used their Section 1931 options to in effect expand TMA coverage. For example, North Carolina and South Carolina have both added 12 months of guaranteed 1931 Medicaid coverage for families about to lose Section 1931 Medicaid coverage due to increased earnings; after these 12 months, then the family would receive TMA. Table 12 also shows states with expiring waivers that extend TMA coverage. These states will have to consider using their Section 1931 options if they want to preserve the benefit of extended TMA coverage for their working families.

² Vermont and Connecticut are planning to use Section 1931 options to preserve their expansions of transitional coverage through use of earned income disregards.