

# ELIGIBILITY GUIDELINES FOR MISSISSIPPI HEALTH BENEFITS

## (Families and Children Medicaid and the Children's Health Insurance Program)

Mississippi Health Benefits includes four Medicaid programs and the Children's Health Insurance Program (CHIP). Individuals who may qualify are:

- Children up to age 19
- Low-income adults with children under age 18
- Pregnant women

### Medical Assistance Program (MA-85)

This program provides Medicaid coverage for low income families with children under age 18. Children must be deprived of the support of one or both parents due to incapacity, death, and continued absence or under/unemployment. Adults, who are either parents or custodial relatives, within certain degrees of relationship to the children, may also qualify. This is the only program which has both gross and net income maximums.

Pregnant women may be eligible in this program if family income does not exceed the gross and net maximums based on family size. The pregnant woman, her spouse and children, if applicable, and unborn(s) are included in the family size.

The expected due date must be verified by a healthcare professional.

As a condition of eligibility, the adult must cooperate with child support enforcement requirements for each child deprived due to a parent's continued absence from the home.

### Expanded Medicaid Program (EM-87)

Medicaid coverage is provided in this program for children up to age 6 whose family income does not exceed 133% of Federal Poverty Level (FPL).

### Infant Survival Program (IS-88)

Children up to age 1 and pregnant women whose family income does not exceed 185% of FPL may qualify in this program.

Pregnant women are eligible if family income does not exceed the appropriate family size which includes the pregnant woman, her spouse and children, if applicable, and unborn(s).

The expected due date must be verified by a healthcare professional. Eyeglass and dental services are not available to pregnant women in this program.

### Poverty Level Medicaid Program (PL-91)

Medicaid coverage is provided for children up to age 19 whose family income does not exceed 100% of FPL.

### Children's Health Insurance Program (CHIP-99)

CHIP provides insurance coverage for uninsured children up to age 19 whose family income does not exceed 200% of FPL. A child must be determined ineligible for Medicaid before eligibility for CHIP can be considered. Children with current health insurance coverage at the time of application are not eligible for CHIP.

### How To Apply:

An application can be obtained on this website. Applications are also mailed upon request and are available at the Medicaid Regional Office serving your community or at other locations which serve children's needs.

When your application is received by the regional Medicaid office, a Medicaid Specialist will be assigned to assist you with the application process, which includes the requirement for an in-person interview. The following general information will be needed:

- Proof of family income for the most recent full month
- Proof of citizenship or eligible immigrant status for each person applying. (For US citizens, we will attempt to verify citizenship using the Social Security Number.)
- Social Security Numbers for each person applying

NOTE: Additional information may be needed.  
(revised March 1, 2012)



*Keeping Kids Healthy*

**Program income limits are shown on the back of this page.**

## INCOME LIMITS FOR HEALTH BENEFITS PROGRAMS 2012

### CHILDREN UP TO AGE 19

POVERTY LEVEL (PL/91 - 100% FPL)								
FAMILY SI ZE	1	2	3	4	5	6	7	8
MONTHLY INCOME	\$931	\$1261	\$1591	\$1921	\$2251	\$2581	\$2911	\$3241

For more than 8 members, add \$330 for each additional person.

### CHILDREN UP TO AGE 6

EXPANDED MEDICAID (EM/87 - 133% FPL)								
FAMILY SI ZE	1	2	3	4	5	6	7	8
MONTHLY INCOME	\$1239	\$1677	\$2116	\$2555	\$2994	\$3433	\$3872	\$4311

For more than 8 members, add \$439 for each additional person.

### CHILDREN UP TO AGE 1 AND PREGNANT WOMEN

INFANT SURVIVAL (IS/88 - 185% FPL)								
FAMILY SI ZE	1	2	3	4	5	6	7	8
MONTHLY INCOME	\$1723	\$2333	\$2944	\$3554	\$4165	\$4775	\$5386	\$5996

For more than 8 members, add \$611 for each additional person.

### UNINSURED CHILDREN UP TO AGE 19

CHILDREN'S HEALTH INSURANCE PROGRAM (CHIP) (ME/99 - 200% FPL)								
FAMILY SI ZE	1	2	3	4	5	6	7	8
MONTHLY INCOME	\$1862	\$2522	\$3182	\$3842	\$4502	\$5162	\$5822	\$6482

For more than 8 members, add \$660 for each additional person.

### FAMILIES AND CHILDREN UP TO AGE 18

MEDICAL ASSISTANCE (ME/85 - TANF NEED STANDARD)								
FAMILY SI ZE	1	2	3	4	5	6	7	8
MONTHLY GROSS INCOME	\$403	\$542	\$680	\$819	\$958	\$1097	\$1235	\$1374
NET INCOME	\$218	\$293	\$368	\$443	\$518	\$593	\$668	\$743

For more than 8 members, add \$75 for each additional person.