

Securing A Healthier Future for the District of Columbia

Medicaid Changes Under the Affordable Care Act (ACA)

Frequently Asked Questions

The Affordable Care Act (ACA), which was signed into law on March 23, 2010, expands Medicaid coverage. The ACA also changes certain eligibility rules and simplifies the application process. Consumers need to understand these changes so that they can access the health care they need.

Q. What are the changes to the application process?

A. Beginning in October 2013, most applicants will use a single application form and process for both Medicaid and premium assistance in the Health Benefit Exchange. By October 2014, all Medicaid applicants will use the single application form and process. Applications can be submitted online, by telephone, by mail, or in person.

Q. How will income be counted?

A. For most Medicaid eligibility groups, income will be counted using a new method called Modified Adjusted Gross Income (MAGI). This will generally be the same as the Internal Revenue Service's calculation of Adjusted Gross Income, which is gross income minus allowable deductions. Some income that previously counted for Medicaid determinations, such as child support, will not be included in the MAGI calculation. Some income that is not counted under the current rules will be included in the MAGI calculation. For example, the income of children in their parents' household will be counted if the children expect to be required to file a federal tax return.

Applicants will not need to perform their own MAGI calculation. The new eligibility system will retrieve information from electronic data hubs to determine the MAGI calculation.

Q. How will the household size be determined?

A. Household size for people who file federal tax returns will generally be based on the tax household. Tax filers with children in their homes who do not expect to claim the children as tax dependents cannot include those children in their household size. This may affect the tax filer's Medicaid eligibility.

Someone who is acting responsibly for a minor may submit a Medicaid application for the minor, even if the minor is not included in that person's household. For example, a grandmother who files taxes and does not expect to claim her granddaughter as a tax dependent would not include the granddaughter in her household. However, the grandmother could still submit a Medicaid application on behalf of her granddaughter.

Q. Do the new income and household composition rules apply to all Medicaid beneficiaries?

A. The new income and household composition rules will not apply to the elderly, people applying on the basis of need for long-term care, people with disabilities, people who are medically needy, people who qualify for assistance with Medicare premiums and cost-sharing, and foster care youths.

Q. Will childless adults have coverage?

A. Medicaid will continue to cover adults with no children who have incomes no higher than 200 percent of the Federal Poverty Line (FPL).

Q. Are there any changes for foster care youths?

A. Youths who have aged out of foster care will be eligible for Medicaid up to age 26.

Q. Where can I go to find more information on Medicaid changes?

A. Medicaid.gov is a federal website where you can find more information on Medicaid changes under the ACA.

Q. How can community organizations help educate District residents about the changes to the Medicaid program?

A. The Medicaid Outreach Project is an initiative to ensure that Medicaid beneficiaries and the organizations that serve them are informed about upcoming changes to the Medicaid program. The project will use a train-the-trainer model, where organizations commit to learning about Medicaid changes and then holding training sessions for their constituents.

If you are interested in participating in the Medicaid Outreach Project and attending these sessions, please email Miriam Straus at <u>miriam.straus@dc.gov</u> or Lucy Wilson-Kear at <u>lucy.wilson-kear@dc.gov</u>.

Q. If I need additional information, whom should I contact?

A. For additional information about Medicaid in the District, please email Lucy Wilson-Kear, Associate Director of Eligibility, at <u>lucy.wilson-kear@dc.gov</u>.

The DC Health Benefit Exchange Authority is charged with implementing and operating the District of Columbia's health insurance exchange in accordance with the Patient Protection and Affordable Care Act (PPACA). HBX The Authority ensures access to quality and affordable health care for all residents and small businesses in the District of Columbia.