



WHO IS ELIGIBLE?

Low-income residents who are:

- · Pregnant women and infants;
- Children ages 1-18;
- Parents and caretaker relatives of dependent children; or
- Adults aged 19-64, who are not pregnant and not eligible for Medicare.

NY State of Health complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, sex, age or disability in its health programs and activities.

Medicaid At a Glance

WHAT'S COVERED?

- Hospital inpatient and outpatient services
- Clinic services
- Early screening, diagnosis, and treatment for children under 21 years of age under the Child/ Teen Health Program
- Medicine, supplies, medical equipment, and equipment like wheelchairs, etc.
- Laboratory and X-ray services
- Preventive health and dental care and treatment by doctors and dentists
- · Care in a nursing home

- Care through home health agencies and personal care
- Treatment in psychiatric hospitals (for persons under 21 or those 65 and older), mental health facilities, and facilities for the mentally retarded or the developmentally disabled
- Family planning services
- Transportation to medical appointments, including public transportation and car mileage
- Emergency ambulance transportation to a hospital
- Stop-smoking products like gum and patches

Some services may not be covered because of age, financial circumstances, family situation, or living arrangements. Some services may have small co-payments. You will not have a co-pay if you are in a managed care plan, except for a small co-pay for pharmacy services.

CONTACT US:

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How do I know if my income and resources qualify me for Medicaid?

The chart below shows how much income you can receive annually and still qualify for Medicaid.*

The income levels are based on how many family members live with you.

2017 Annual Income Levels				
Household Size	Parent/Caretakers or Single Childless Couples or Adults age 19 & 20 not living with parents	Children Age 1 - 18	Adults age 19 & 20 living with parents	Pregnant Women, Infants Under the Age of 1, or Individuals Eligible for Family Planning Benefits
	138% of FPL	154% of FPL	155% of FPL	223% of FPL
1	\$16,643	\$18,573	\$18,693	\$26,894
2	\$22,412	\$25,010	\$25,172	\$36,216
3	\$28,180	\$31,447	\$31,651	\$45,537
4	\$33,948	\$37,884	\$38,130	\$54,858
5	\$39,717	\$44,322	\$44,609	\$64,180
6	\$45,485	\$50,759	\$51,088	\$73,501
7	\$51,254	\$57,196	\$57,567	\$82,823
8	\$57,022	\$63,633	\$64,046	\$92,144
9	\$62,790	\$70,070	\$70,525	\$101,465
10	\$68,559	\$76,508	\$77,004	\$110,787
Additional Person	\$5,769	\$6,438	\$6,479	\$9,322

^{*}As of January 1, 2017. Income Levels may be adjusted each year based on the Federal Poverty Levels (FPL).

How much does Medicaid cost?

Monthly Premiums: There is no monthly premium for Medicaid.

Cost Sharing: Certain services under Medicaid require a small copay, but there are some times when no copay is needed. The most you would ever spend in copays under Medicaid in one year would be \$200.

For a list of Frequently Asked Questions and Answers about Medicaid, go to: http://www.health.ny.gov/health_care/medicaid/

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