



Alaska Medicaid Eligibility Standards

October 21, 2024

The federal government applies two different methodologies for determining Medicaid eligibility, depending on the beneficiary group. Eligibility determinations for the Aged, Blind and Disabled are based on the financial and non-financial methodology of the Supplemental Security Income (SSI) program as set by the Social Security Administration. All other beneficiary groups' eligibility determinations are based on Modified Adjusted Gross Income (MAGI) methodology. The MAGI methodology was established by the Affordable Care Act (ACA) in 2010.

MAGI Eligibility Standards Methodology

States were required to convert their Medicaid eligibility levels to the MAGI methodology for all eligibility groups except the Aged, Blind and Disabled following passage of the ACA. The new methodology, which took effect January 1, 2014, allows for alignment with eligibility for federal premium tax credits and cost-sharing subsidies offered through the Federally Facilitated Marketplace. MAGI takes a household's Adjusted Gross Income (AGI) from their federal tax filing and adds excluded foreign income, non-taxable Social Security benefits, and tax-exempt interest.

The MAGI-conversion process involved a translation of pre-2014 net income eligibility standards into MAGI-based eligibility standards. To make the transformation to MAGI, states needed to "convert" their net-income based eligibility standards to MAGI-based standards. States were given three different options for the conversion process:

- 1) Use converted income limits provided by CMS that were based on the Survey of Income Program and Participation (SIPP),
- 2) Develop a modification to the underlying CMS SIPP methodology, or
- 3) Develop their own conversion methodology.

Alaska chose the second option and used the CMS income limit conversion with an adjustment for the Permanent Fund Dividend (PFD) to continue to hold families harmless for receipt of the PFD as required by Alaska State Statute. The hold harmless provision ensures Alaskans are not disadvantaged by the receipt of the PFD. Alaska termed its modified MAGI conversion methodology "SIPP +1".

The new eligibility standards may appear higher than the old standards, but they are not. They are being expressed in a different way — gross versus net. The former eligibility standards used a two-part process that started with gross income, but then applied a series of income deductions prior to applying a net income standard. The new MAGI method adjusts the old net income standards upward to offset the loss of deductions, simplifying the eligibility determination process.

All but two of the MAGI Medicaid eligibility groups use an income limit based on a percentage of Federal Poverty Level (FPL). The eligibility level for the Parent/Caretaker Relative and Under 21 Medicaid groups are based on an actual dollar amount due to pre-MAGI eligibility methodology decisions. One other important factor regarding MAGI is that the federal law requires a 5% income disregard as part of the methodology, which in effect increases the approved FPL standard by 5%. For example, Alaska's approved standard for uninsured children is 203%, but the income disregard in effect increases that standard to 208%.



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Children and Pregnant Women

The table below provides information on the former and current eligibility standards for the various child groups and pregnant women. Alaska does not currently have the option to change the eligibility standards for children. The ACCESS Act, passed by Congress, extended and funded the Children's Health Insurance Program (CHIP) program through FFY 2027. This new federal law also extended the Maintenance of Effort (MOE) requirement that prohibits states from changing their eligibility levels and enrollment procedures for children in Medicaid and CHIP through FFY 2027.

The minimum federal eligibility standard for pregnant women is 133% of FPL, and the maximum is 185% (these are the levels under pre-MAGI methodologies, which would convert to levels that would appear higher under the MAGI conversion). Because the federal government updates the FPL each year, the actual dollar limits represented by these FPL levels adjust each year accordingly. In addition, the 5% income disregard is added to these FPL levels (e.g., 200% is in effect 205% after the disregard rule is applied).

Population	Citation	Alaska's Pre-MAGI Standard	CMS SIPP Conversion	Alaska's Current MAGI Standard (SIPP +1)
Pregnant Women	1902(a)(10)(A)(ii)(IX)	175% FPL	184% FPL	200%
Insured Children <19	1902(a)(10)(A)(i)(VI),(VII) & 1902(a)	150% FPL	158% FPL	177%
Uninsured Children < 19	1902(a)(10)(A)(ii)(XIV)	175% FPL	185% FPL	203%

In 2023, Alaska Senate Bill 58 authorized the division to create an optional Medicaid category to provide Medicaid benefits to Pregnant Women that have countable income between 201% - 225% of FPL, which was implemented effective February 1, 2024. A pregnant woman is not eligible for this new optional Medicaid category if they are eligible in another Medicaid category or if their dependent children are not receiving Medicaid benefits or enrolled in minimum essential coverage.

Parent/Caretaker Relatives and Under 21 Medicaid (19 – 20-year-olds)

The eligibility standards for Parent/Caretaker Relatives and the Under 21 Medicaid groups were originally tied to the Aid to Families with Dependent Children (AFDC) payment standard. States had flexibility to define need and set benefit levels for AFDC, and those levels varied from state to state based on regional variations in low-income population issues such as basic housing and food costs relative to the poverty level. Alaska's high cost-of-living drove a higher eligibility standard relative to most other states as a result.

When Alaska converted these eligibility groups to MAGI, the income limit selected was the Social Security Act Sec. 1931 low-income level as of December 31, 2013. That limit is adjusted:

- To account for income deductions that were previously allowed for Medicaid but are no longer allowed under MAGI, and
- For the Permanent Fund Dividend, which was excluded prior to MAGI.

The table on the next page shows the conversion of the income limits for these two eligibility groups. As noted above, these eligibility standards are set as a dollar level based on household size, not as a percentage of FPL. This standard is sometimes shown as a percentage of FPL on reports, but it is a conversion of the dollar levels reflected as an FPL for comparison purposes.



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Citation	Household Size	Alaska's Pre-MAGI Income Standard	CMS SIPP Conversion	Alaska's initial SIPP +1 Standard (At time of conversion)	Alaska's Current SIPP+1 Standard	Alaska's Current SIPP+1 Standard as % of FPL
SSA Sec. 1931 for 12/31/2013	1	\$857	\$1,221	\$1,333	\$1,808	115%
	2	\$1,369	\$1,858	\$2,082	\$2,814	132%
	3	\$1,541	\$2,156	\$2,492	\$3,364	125%
	4	\$1,713	\$2,454	\$2,902	\$3,912	120%
	5	\$1,885	\$2,752	\$3,312	\$4,459	117%
	6	\$2,057	\$3,050	\$3,722	\$5,008	114%
	7	\$2,229	\$3,347	\$4,131	\$5,555	112%
	8	\$2,401	\$3,645	\$4,541	\$6,102	111%
	9	\$2,573	\$3,943	\$4,951	\$6,654	109%
	10	\$2,745	\$4,241	\$5,361	\$7,201	108%
	Additional	\$172	\$273	\$385	\$517	

Alaska's options for changing this methodology at this point in time are to select the SSA Sec. 1931 low-income level as of March 23, 2010, or the 1996 state Aid to Families with Dependent Children income standards (as opposed to the current selection of low-income level as of December 31, 2013). Selecting the March 23, 2010 option would decrease the income limit, which could make less households eligible. Because the eligibility level for adults under expansion is higher than these categories, those over the new lower limit would shift to expansion but at a 50% federal match instead of the enhanced federal match provided for those "newly eligible" under expansion.

Household Size	<u>CURRENT</u> Alaska's Current SIPP+1 Standard (based on SSA 1931 for 2013)	<u>OPTION</u> Income Limit based on SSA 1931 for 2010 converted to current levels
1	\$1,808	\$1,542
2	\$2,814	\$2,466
3	\$3,364	\$2,775
4	\$3,912	\$3,084
5	\$4,459	\$3,393
6	\$5,008	\$3,703
7	\$5,555	\$4,011
8	\$6,102	\$4,320
9	\$6,654	\$4,628
10	\$7,201	\$4,937
Additional	\$517	\$308

Alaska would have the option to eliminate Medicaid coverage entirely for the Under 21 group, though those young people would then qualify under the expansion category but at a 50% federal match instead of the enhanced federal match provided for those "newly eligible" under expansion.



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Expansion Group

Alaska's adult expansion group is currently at 133% of FPL, which is the federal minimum eligibility standard for this group. A few states that have implemented expansion have a higher eligibility level implemented under the Basic Health Program option under the Affordable Care Act. The ACA provides a very high enhanced federal funding match for this eligibility group, but only for those "newly eligible" under expansion.

Aged, Blind and Disabled Eligibility Standards

The Social Security Administration (SSA) uses a means-tested methodology for determining eligibility for Supplemental Security Income (SSI). Eligibility is based on disability, income, and countable assets. The limits are adjusted annually when the SSA adjusts SSI payments based on the Cost-of-Living Adjustment (COLA). An individual verified as receiving SSI is automatically eligible for Medicaid coverage. An individual who is not receiving SSI, but is over age 65, blind, or disabled is evaluated against Adult Public Assistance (APA) cash income limits to determine if they are eligible for Medicaid benefits (certain individuals receiving Long Term Care Services and Supports have a higher income limit, which is 300% of the prevailing SSI standard).

Effective with the benefit month of January 2020, Alaska reduced the APA cash income limits due to a CMS required change to our APA payment calculation. To preserve Medicaid eligibility for individuals who lost APA cash eligibility due to this change, Alaska added an income disregard to the Refused Cash Medicaid category. This income disregard effectively raised the income limits for this Medicaid category to the previous APA cash income limit levels. An individual who is determined ineligible for APA cash due to excess monthly income is now also measured against the increased Refused Cash Medicaid income limits. If the individual's countable monthly income is over the appropriate APA cash income limit for their household living situation but under the Expanded Refused Cash Medicaid income limit, the individual will be ineligible for APA cash but eligible for Medicaid benefits.

State spending for APA cash is required to meet the Maintenance of Effort requirement for the Medicaid program. A change in eligibility requirements that reduces state spending on APA will put federal Medicaid funding at risk.

Summary of Ability to Alter Eligibility Standards

The following table provides a summary of the level of flexibility available to Alaska's Medicaid program to change current eligibility standards.

Eligibility Group	Flexibility to Alter Eligibility Standards
Aged, Blind & Disabled	Cannot change due to maintenance of effort
Children under 19	Cannot change until FFY 2028 due to CHIP Maintenance of Effort
Pregnant Women	Option to lower to 133% FPL (Pre-MAGI level)
Parent/Caretaker Relatives	Option to change from 2013 low-income level to the 2010 level or 1996 AFDC income standard (those shifted to Expansion as a result would be at 50% FMAP)
Under 21 Medicaid (19 – 20-year-olds)	Option to change same as Parent/Caretaker Relatives; or eliminate entirely (would move to Expansion, but at 50% FMAP)
Expansion	Currently at the federal minimum of 133% FPL



Comparison to other States

The table starting on page 6 compares the various Medicaid eligibility levels of all the states for the MAGI groups. When comparing the eligibility levels for children, an important factor to consider is that federal law allowed states the option to either implement CHIP as an expansion of the traditional Medicaid program, or to set up a separate CHIP program (either integrated with Medicaid or as a stand-alone program). Alaska implemented CHIP as a Medicaid expansion, so the eligibility standard appears high compared to many other states. However, when considering the eligibility levels of states with separate CHIP programs, Alaska ranks 43rd among states for child eligibility (only 7 other states have a lower eligibility standard).

Also please note that Alaska's Parent/Caretaker Relatives group uses a dollar amount, not FPL level, and the FPL level reflected in the table is a conversion of the dollar level in 2025 for a 2-person household to the 2024 FPL for Alaska. Please see the table on page 3 for the current dollar-level conversion to FPL (which varies by household size).



MAGI Medicaid and CHIP Eligibility Levels

The following table provides eligibility levels in each state for key coverage groups that use Modified Adjusted Gross Income (MAGI), as of December 1, 2023. The data represent the principal, but not all, MAGI coverage groups in Medicaid, the Children's Health Insurance Program (CHIP), and the Basic Health Program (BHP). All income standards are expressed as a percentage of the federal poverty level (FPL). The MAGI-based rules generally include adjusting an individual's income by an amount equivalent to a 5% FPL disregard. Other eligibility criteria also apply, such as citizenship, immigration status, and state residency.

State Medicaid, CHIP and BHP Income Eligibility Standards

(For selected MAGI Groups, based on state decisions as of December 1, 2023)

	Children				Pregnant Women		Adults (Medicaid)	
	Medicaid Ages 0-1 ¹	Medicaid Ages 1-5 ¹	Medicaid Ages 6-18 ¹	Separate CHIP ²	Medicaid	CHIP ³	Parent/ Caretaker ⁴	Expansion to Adults
Alabama	141%	141%	141%	312%	141%	N/A	13%	No
Alaska ⁵	203%	203%	203%	N/A	200%	N/A	130%(\$)	133%
Arizona	147%	141%	133%	200%	156%	N/A	106%	133%
Arkansas	142%	142%	142%	211%	209%	N/A	13%(\$)	133%
California	261%	261%	261%	See note ⁶	208%	N/A	109%	133%
Colorado	142%	142%	142%	260%	195%	260%	68%	133%
Connecticut	196%	196%	196%	318%	258%	N/A	155%	133%
Delaware	212%	142%	133%	212% (1 up to 19)	212%	N/A	87%	133%
District of Columbia	319%	319%	319%	N/A	319%	N/A	216%	210% ⁷
Florida	206%	140%	133%	210% (1 up to 19)	191%	N/A	24%(\$)	No ⁸
Georgia	205%	149%	133%	247%	220%	N/A	28%(\$)	No
Hawaii ⁵	308%	308%	308%	N/A	191%	N/A	105%	133%
Idaho	142%	142%	133%	185%	133%	N/A	19%(\$)	133%
Illinois	313%	313%	313%	N/A	208%	N/A	133%	133%
Indiana	208%	158%	158%	250%	208%	N/A	15%(\$)	133%
Iowa	375%	167%	167%	302% (1 up to 19)	375%	N/A	44%(\$)	133%
Kansas	166%	149%	133%	250%	166%	N/A	33%	No
Kentucky	213%	213%	213%	N/A	195%	213%	19%(\$)	133%
Louisiana	212%	212%	212%	250%	133%	N/A	19%	133%
Maine	300%	300%	300%	N/A	209%	N/A	100%	133% ⁷
Maryland	317%	317%	317%	N/A	259%	N/A	123%	133%
Massachusetts	200%	150%	150%	300%	200%	N/A	133%	133% ⁷
Michigan	212%	212%	212%	N/A	195%	N/A	54%	133%
Minnesota	283% ¹⁰	275%	275%	N/A	278%	N/A	133%	200% ¹¹
Mississippi	194%	143%	133%	209%	194%	N/A	19%(\$)	No
Missouri	196%	150%	150%	300%	196%	300%	15%(\$)	133%
Montana	143%	143%	143%	261%	157%	N/A	24%	133%
Nebraska	213%	213%	213%	N/A	194%	N/A	58%	133%
Nevada	160%	160%	133%	200%	160%	N/A	26%(\$)	133%
New Hampshire	318%	318%	318%	N/A	196%	N/A	55%(\$)	133%



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New Jersey	194%	142%	142%	350%	194%	200%	26%(\$)	133%
New Mexico	300%	300%	240%	N/A	250%	N/A	37%(\$)	133%
New York	218%	149%	149%	400%	218%	N/A	133%	200% ¹¹
North Carolina	211%	211%	211%	N/A	196%	N/A	36%(\$)	133%
North Dakota	170%	170%	170%	N/A	170%	N/A	43%(\$)	133%
Ohio	206%	206%	206%	N/A	200%	N/A	90%	133%
Oklahoma	205%	205%	205%	N/A	205%	N/A	33%(\$)	133% ⁹
Oregon	185%	133%	133%	300%	185%	N/A	33%(\$)	133%
Pennsylvania	215%	157%	133%	314%	215%	N/A	33%	133%
Rhode Island	261%	261%	261%	N/A	190%	253%	116%	133%
South Carolina	208%	208%	208%	N/A	194%	N/A	95%	No ⁹
South Dakota	182%	182%	182%	204%	133%	N/A	46%(\$)	133%
Tennessee	195%	142%	133%	250%	195%	N/A	84%(\$)	No
Texas	198%	144%	133%	201%	198%	N/A	12%(\$)	No
Utah	139%	139%	133%	200%	139%	N/A	36%(\$)	133% ⁹
Vermont	312%	312%	312%	N/A	208%	N/A	43%(\$)	133%
Virginia	143%	143%	143%	200%	143%	200%	49%(\$)	133%
Washington	210%	210%	210%	312%	193%	N/A	33%(\$)	133%
West Virginia	158%	141%	133%	300%	185%	300%	16%(\$)	133%
Wisconsin	301%	186%	151%	301% (1 up to 19)	301%	N/A	95% ⁹	No/95% ⁹
Wyoming	200%	200%	200%	N/A	154%	N/A	45%(\$)	No

- These eligibility standards include CHIP-funded Medicaid expansions for children under age 19. Children eligible for a CHIP-funded Medicaid expansion may be covered either under the mandatory children's group or under the optional targeted low-income child group. Expanded Medicaid eligibility after 1997 qualifies for CHIP funding.
- CHIP covers birth up to age 19 unless otherwise noted in parentheses.
- CHIP gives states the option to cover pregnant women and children from conception to birth. This table shows coverage of pregnant women only.
- These data show Medicaid state plan coverage of the eligibility group for parents/caretaker relatives. In expansion states, parents/caretaker relatives with incomes above the standard shown here may be eligible for coverage in the adult group. Some states use dollar amounts based on household size instead of percentages of the FPL as the income standard for parent and caretaker relatives. For those states, CMS converted the amount to percentages of the FPL. CMS uses the highest percentage to show the eligibility level for the group. States that use dollar amounts to make determinations are indicated by (\$).
- The dollar values that FPLs represent in Alaska and Hawaii are higher than in the rest of the United States. For example, in 2018, 100% of the FPL for a family of four was equal to \$31,380 in Alaska and \$28,870 in Hawaii, compared to \$25,100 in the other 48 states and the District of Columbia.
- The Separate CHIP in California covers certain children up to age 2 with incomes up to 317% of the FPL statewide; and it covers children up to age 19 also up to 317% of the FPL in three counties only.
- In addition to covering the adult group up to 133% of the FPL, the state covers ages 19 and 20 up to the following levels: DC 216%, MA 150%, ME 300%.
- The state also covers ages 19 and 20 up to the following levels: FL 24%.
- The state has a section 1115 demonstration, which provides Medicaid coverage to some additional low-income adults. In some cases, coverage:
 - Includes limitations on eligibility and benefits
 - Is not offered to all residents of the state
 - Includes an enrollment cap
- Minnesota covers children up to age 2 with incomes up to 283% of the FPL.
- Adults with incomes from above 133% and up to 200% of the FPL are covered through BHP.