

TABLE

Medical Assistance Programs for Immigrants in Various States

Federally funded Medicaid and CHIP (Children’s Health Insurance Program) is available to otherwise eligible “qualified” immigrants who entered the U.S. before August 22, 1996, and those who have held a “qualified” status for five years or longer. Refugees and other “humanitarian” immigrants, veterans, active duty military and their spouses and children, and certain other immigrants can get Medicaid or CHIP without a five-year waiting period.

This table describes state policies for providing health coverage to *additional* groups of immigrants, under federal options to cover lawfully residing children and pregnant women, regardless of their date of entry into the U.S., or to provide prenatal care to women regardless of status, using CHIP funds. It also describes immigrant coverage under programs using exclusively state funds.*

The information in this table is subject to change. Please check with your state or local health care agency or legal assistance office regarding the most current rules. If you have updated information, please contact Tanya Broder, National Immigration Law Center, broder@nilc.org.

January 2018

STATE	ELIGIBLE IMMIGRANTS
Alaska	“Qualified immigrants” and PRUCOLs can receive chronic and acute medical assistance if they have a terminal illness, cancer, diabetes, seizure disorders, mental illness, hypertension, or certain other medical conditions.
Arkansas	Prenatal care is available regardless of immigration status. ²
California	“Qualified” immigrants, PRUCOLs, survivors of trafficking, U visa applicants, and U visa-holders. Lawfully residing children and pregnant women. ¹ Prenatal care, ² long-term care, breast and cervical cancer treatment, and certain other medical services are available regardless of immigration status. Children under 19, regardless of immigration status.
Colorado	Lawfully residing children and pregnant women. ¹ Lawfully residing immigrants who are ineligible for Medicaid, are over age 60, and are enrolled in the Old Age Pension Program (OAP) may be eligible for medical services (excluding long-term care, psychiatric services, and in-patient hospitalization) through the Old Age Pension Health and Medical Fund. Since January 2014, however, this program has imposed a five-year (or longer) waiting period for new immigrants. Lawfully residing immigrants under 250% FPL may be eligible for the Colorado Indigent Care Program (CICP), regardless of their date of entry into the U.S. CICP is a reimbursement mechanism for hospitals and primary care clinics.
Connecticut	Lawfully residing children and pregnant women. ¹ Residents of nursing homes and persons receiving the Connecticut home care program for elders as of June 30, 2011, or who applied for these benefits on or prior to June 1, 2011.
Delaware	Lawfully residing children and pregnant women. ¹

* This table indicates whether a state takes advantage of federal coverage options, marked as follows:

¹ Federal funds are used to provide medical coverage to lawfully residing children and/or pregnant women, regardless of their date of entry into the U.S.; and/or

² Federal CHIP funds are used to provide prenatal care to women, regardless of their immigration status.

If an eligibility group or service is listed *without* a superscript “1” or “2,” the services are provided *exclusively with state funds*.

Medical Assistance Programs for Immigrants in Various States

STATE	ELIGIBLE IMMIGRANTS
District of Columbia	Adults, regardless of immigration status, may be eligible for health coverage through the DC Health Care Alliance. ¹ Children, regardless of immigration status, may be eligible for the Immigrant Children’s Program (ICP), if ineligible for Medicaid. ¹
Florida	Children who do not meet the immigration status criteria for Medicaid or CHIP, but are otherwise eligible, can buy coverage at full cost under KidCare. Lawfully residing children. ¹
Hawaii	Lawfully residing children and pregnant women, including residents of Freely Associated States (Marshall Islands, Micronesia, and Palau). ¹ Seniors and people with disabilities who are qualified immigrants, parolees, and nonimmigrants (including residents of Freely Associated States) receive coverage equivalent to Medicaid. Other lawfully present individuals under 100% FPL will receive state premium assistance in addition to federal subsidies under the health care marketplace created by the Affordable Care Act.
Illinois	All children under 300% FPL, regardless of immigration status, can get coverage through the All Kids program. Co-pays and premiums are required for certain families, based on their income. ¹ “Qualified” abused immigrant adults are also eligible for coverage, regardless of their date of entry. Asylum applicants and torture victims can get up to 24 months of continuous coverage (this period can be extended to 36 months for some asylum applicants). Prenatal care is available regardless of immigration status. ² Noncitizens with end-stage renal disease who receive emergency renal dialysis and meet state residency and other program rules may receive a kidney transplant, regardless of immigration status. Effective Jan. 1, 2018, individuals and derivative family members who have filed or are preparing to file an application for T or U status or asylum; terminates if have not filed application within one year (with limited exceptions) or if application finally denied.
Iowa	Lawfully residing children. ¹
Kentucky	Lawfully residing children. ¹
Louisiana	Prenatal care is available regardless of immigration status. ²
Maine	Lawfully residing children and pregnant women. ¹
Maryland	Lawfully residing children and pregnant women. ¹ Limited coverage is available to low- and moderate-income Montgomery County residents, regardless of immigration status, and to children in families earning up to 250% FPL, regardless of immigration status, in Prince George’s County.

* This table indicates whether a state takes advantage of federal coverage options, marked as follows:

¹ Federal funds are used to provide medical coverage to lawfully residing children and/or pregnant women, regardless of their date of entry into the U.S.; and/or

² Federal CHIP funds are used to provide prenatal care to women, regardless of their immigration status.

If an eligibility group or service is listed *without* a superscript “1” or “2,” the services are provided *exclusively with state funds*.

Medical Assistance Programs for Immigrants in Various States

STATE	ELIGIBLE IMMIGRANTS
Massachusetts	<p>“Qualified,” lawfully present, or PRUCOL seniors and persons with disabilities up to 100% FPL (excludes long-term care).</p> <p>“Qualified,” lawfully present, or PRUCOL immigrant children under 19 years old are eligible up to 300% FPL; 19- and 20-year-olds are eligible up to 150% FPL.¹ All children, regardless of immigration status or income, are eligible for primary and preventive care through the Children’s Medical Security Plan.</p> <p>Full-scope medical services for pregnant women up to 200% FPL, regardless of their immigration status.^{1, 2}</p> <p>Lawfully present nonpregnant adults are eligible for ConnectorCare; those under 300% FPL who purchase coverage through the ACA Marketplace and receive federal subsidies may qualify for additional state subsidies and cost-sharing equivalent to the levels that were available under Commonwealth Care. Other adults who are PRUCOL but not on HHS’s lawfully present list are eligible for MassHealth benefits (excluding long-term care) with the same premium contributions required for ConnectorCare.</p>
Michigan	Prenatal care is available regardless of immigration status. ²
Minnesota	<p>Lawfully residing children.¹ Prenatal care is available regardless of immigration status.²</p> <p>Individuals who receive services from the Center for Victims of Torture. Effective Jan. 1, 2017, individuals granted deferred action under the Deferred Action for Childhood Arrivals Program (DACA).</p> <p>Other lawfully present noncitizens under 200% FPL who are ineligible for Medicaid based on their status, are not Medicare recipients, and don’t have access to other affordable coverage can receive more limited coverage through MinnesotaCare (excludes, e.g., home-based services, such as personal care assistance and home nursing services).</p>
Montana	Lawfully residing children. ¹
Nebraska	Lawfully residing children and pregnant women. ¹ Prenatal care is available regardless of immigration status. ²
Nevada	Lawfully residing children. ¹
New Jersey	<p>Lawfully residing children and pregnant women.¹ Parents who have been lawful permanent residents for less than 5 years and were enrolled in NJ FamilyCare on April 1, 2010, may continue receiving coverage only, in the agency’s discretion, if being treated for a life-threatening illness or receiving ongoing life-sustaining treatment.</p> <p>NJ FamilyCare Advantage is available to children with family income exceeding 350% FPL, regardless of immigration status, based on payment of premium contribution (“buy-in”). Limited funds for prenatal services are available to women up to 200% FPL, regardless of immigration status. “Qualified” immigrants and PRUCOLs who were in Medicaid-certified nursing homes prior to Jan. 29, 1997, remain eligible for nursing home care.</p>
New Mexico	Lawfully residing children and pregnant women ¹ and “qualified” battered immigrants. PRUCOLs who entered the U.S. before Aug. 22, 1996.
New York	<p>“Qualified” immigrants and PRUCOLs. Lawfully residing children and pregnant women.¹</p> <p>Prenatal care is available regardless of immigration status. All children, regardless of immigration status, are covered under the state Child Health Plus program.</p>

* This table indicates whether a state takes advantage of federal coverage options, marked as follows:

¹ Federal funds are used to provide medical coverage to lawfully residing children and/or pregnant women, regardless of their date of entry into the U.S.; and/or

² Federal CHIP funds are used to provide prenatal care to women, regardless of their immigration status.

If an eligibility group or service is listed *without* a superscript “1” or “2,” the services are provided *exclusively with state funds*.

Medical Assistance Programs for Immigrants in Various States

STATE	ELIGIBLE IMMIGRANTS
North Carolina	Lawfully residing children and pregnant women. ¹
Ohio	Lawfully residing children and pregnant women. ¹ People who were lawfully residing in the U.S. on Aug. 22, 1996, and some individuals under an order of supervision.
Oklahoma	Prenatal care is available regardless of immigration status, under Soon to be Sooners program. ²
Oregon	Lawfully present children. ¹ Prenatal care is available regardless of immigration status. ² Children regardless of immigration status. COFA Premium Assistance Program for residents of Freely Associated States (Marshall Islands, Micronesia, and Palau) earning under 138% FPL who enroll in a qualified health plan.
Pennsylvania	Lawfully residing children and pregnant women. ¹ State-funded Medical Assistance is available to lawfully residing immigrants who are otherwise eligible.
Rhode Island	Lawfully residing children. ¹ Prenatal care is available regardless of immigration status. ² Lawfully residing persons who were in the U.S. before Aug. 22, 1996, and were residents of Rhode Island before July 1, 1997, are also covered.
South Carolina	Lawfully residing children and pregnant women. ¹
Tennessee	Prenatal care is available regardless of immigration status, under CoverKids (Healthy TN Babies). ²
Texas	Lawfully residing children who entered the U.S. on or after Aug. 22, 1996, are eligible for children’s Medicaid or CHIP, depending on their income. ¹ Prenatal care is available regardless of immigration status through the CHIP Perinatal program. ² NOTE: Texas denies federal Medicaid to most “qualified” immigrant adults who entered the country on or after Aug. 22, 1996, even after they complete the federal 5-year bar.
Utah	Lawfully residing children. ¹
Vermont	Lawfully residing children and pregnant women. ¹
Virginia	Lawfully residing children and pregnant women. ¹
Washington	Seniors and persons who are blind or have disabilities, and who are lawfully present may be eligible for a limited medical care services program. Prenatal care is available to otherwise-eligible women regardless of immigration status. ² Children in households with income below 215% FPL are eligible for medical coverage without a share of cost, regardless of their immigration status. ¹ Monthly premiums are required for children in families earning between 215% and 317% FPL.
West Virginia	Lawfully residing children and pregnant women. ¹
Wisconsin	Lawfully residing children and pregnant women. ¹ Prenatal care is available regardless of immigration status. ²

* This table indicates whether a state takes advantage of federal coverage options, marked as follows:

¹ Federal funds are used to provide medical coverage to lawfully residing children and/or pregnant women, regardless of their date of entry into the U.S.; and/or

² Federal CHIP funds are used to provide prenatal care to women, regardless of their immigration status.

If an eligibility group or service is listed *without* a superscript “1” or “2,” the services are provided *exclusively with state funds*.

Medical Assistance Programs for Immigrants in Various States

STATE	ELIGIBLE IMMIGRANTS
Wyoming	Lawfully residing pregnant women. ¹ NOTE: Wyoming denies Medicaid to most nonpregnant lawful permanent residents who do not have credit for 40 quarters of work history in the U.S.

Key Terms Used in This Table

“Qualified” immigrants – are: (1) lawful permanent residents (LPRs); (2) refugees, asylees, persons granted withholding of deportation/removal, conditional entry (in effect prior to Apr. 1, 1980), or paroled into the U.S. for at least one year; (3) Cuban/Haitian entrants; (4) battered spouses and children with a pending or approved (a) self-petition for an immigrant visa, or (b) immigrant visa filed for a spouse or child by a U.S. citizen or LPR, or (c) application for cancellation of removal/suspension of deportation, whose need for benefits has a substantial connection to the battery or cruelty (parent/child of such battered child/spouse is also “qualified”); and (5) survivors of trafficking and their derivative beneficiaries who have obtained a T visa or whose application for a T visa sets forth a *prima facie* case. (A broader group of trafficking survivors who are certified by or receive an eligibility letter from the Office of Refugee Resettlement are eligible for benefits funded or administered by federal agencies, without regard to their immigration status.)

“PRUCOL” or permanently residing in the U.S. under color of law – is not an immigration status, but a benefit eligibility category. The term generally means that immigration authorities are aware of a person’s presence but have no plans to deport/remove him or her from the country. It is interpreted differently, depending on the benefit program and jurisdiction.

Lawfully residing – means the person is lawfully present in the U.S. and meets the Medicaid state residency requirement. Lawfully present immigrants include “qualified” immigrants and individuals: paroled into the U.S. for less than a year; with a valid nonimmigrant status (e.g., citizens of Micronesia, Marshall Islands, and Palau, and survivors of serious crimes cooperating with law enforcement in prosecuting the perpetrators); granted withholding of removal under the Convention Against Torture, temporary protected status (TPS), deferred enforced departure (DED), deferred action; family unity, or temporary resident status; with approved visa petition who have filed an application to adjust to lawful permanent residence; granted employment authorization based on application for asylum or withholding of removal (or, if under 14, application pending for over 180 days), TPS, registry, legalization under IRCA (1986 law), adjustment under LIFE Act, suspension of deportation/cancellation of removal, or based on an order of supervision; and children who have applied for Special Immigrant Juvenile Status.

FPL – “federal poverty level,” as determined by the U.S. Dept. of Health and Human Services’ poverty guidelines (the guidelines for 2013 are available at <http://aspe.hhs.gov/poverty/13poverty.cfm>).

Deeming – in some cases, a sponsor’s income and/or resources may be added to the immigrant’s in determining eligibility. Exemptions from deeming may apply.

NOTE: The information in this table is subject to change. Please check with your state or local social services agency or legal assistance office regarding the most current rules.

* This table indicates whether a state takes advantage of federal coverage options, marked as follows:

¹ Federal funds are used to provide medical coverage to lawfully residing children and/or pregnant women, regardless of their date of entry into the U.S.; and/or

² Federal CHIP funds are used to provide prenatal care to women, regardless of their immigration status.

If an eligibility group or service is listed *without* a superscript “1” or “2,” the services are provided *exclusively with state funds*.