MEDICAID 101
VITAL TO THE HEALTH OF MICHIGAN KIDS

MEDICAID covers children who need care the most. Approximately 20% of children have SPECIAL HEALTHCARE NEEDS, and 44% of those children are covered by PUBLIC INSURANCE.

MEDICAID covers more than 30 million children nationwide.

In 2015, 43.5% OF ALL BIRTHS in Michigan were covered by MEDICAID.

MEDICAID provides health insurance for 963,000 low-income children in Michigan.

How do Michigan children qualify for MEDICAID?

If a household income is below the following limits:

• 195% of the FEDERAL POVERTY LEVEL for infants under 1 year old
• 160% of FPL for children 1-18 years old; children with slightly higher household income — up to 212% of FPL, qualify for the Children’s Health Insurance Program, which is called MICHILD in Michigan
• 195% of FPL for pregnant women
• 133% of FPL for parents and other adults (the eligibility calculation includes a built-in 5 percent income disregard. So eligibility actually extends up to 138% of FPL).
A state-wide program within the Michigan Department of Health and Human Services. This program provides services for children, and some adults, with chronic medical conditions and special health care needs and costs. CSHCS covers more than 2,700 MEDICAL DIAGNOSES AND CONDITIONS. Eligibility determination is made by CSHCS Physicians.

**HOW DOES IT WORK?**

The program works as SECONDARY COVERAGE TO HELP COVER THE COST OF THE CHILD’S MEDICAL CARE. The family’s primary insurance—such as employer insurance or Medicaid—pays first and then CSHCS picks-up the co-pays, deductible, and out-of-pocket costs related to the qualifying diagnosis.

**COST**

There is a yearly fee to join CSHCS. The fee is DETERMINED ON A SCALE BASED UPON FAMILY INCOME AND FAMILY SIZE, but in certain cases—for foster children or kids already on Medicaid—the fee is waived. For almost all current enrollees, the annual fee is significantly less than what the cost of healthcare would be without CSHCS.

CSHCS doesn’t help cover all medical costs, only the costs related to the child’s qualifying diagnosis. The program will not pay for visits to the primary care physician or any other unrelated medical costs.

**WHO CAN ENROLL?**

CSHCS covers children from birth to age 21 with one or more qualifying diagnoses. These diagnoses can be life-limiting and most require specialty medical care and supports. Individuals with hemophilia or cystic fibrosis may be eligible to remain on CSHCS as adults.

**CSHCS ENROLLEES**

have support through the Family Center for Children and Youth with Special Health Care Needs, which helps shape CSHCS policies and helps families navigate the CSHCS system. Families also receive care coordination for community services from their local public health department.

**CSHCS IS NOT ONLY FOR LOW-INCOME FAMILIES**

Many families don't know that they can enroll in CSHCS even if they have private or employer insurance! CSHCS is based on the child’s diagnosis, not income. So anyone with a child who has one or more of the qualifying diagnoses can enroll.

**# of CSHCS enrollees during 2017:**

44,298

**TOP 5 DIAGNOSES**

Prematurity
Diabetes
Epilepsy
Asthma
Cerebral Palsy