

EXHIBIT 36. Medicaid Income Eligibility Levels as a Percentage of the Federal Poverty Level for Non-Aged, Non-Disabled, Non-Pregnant Adults by State, July 2025

State	Parents and caretaker relatives of dependent children ¹	Additional individuals age 19–64 ²
Alabama	13%	—
Alaska	128	133%
Arizona	106	133
Arkansas	12	133
California	109	133
Colorado	68	133
Connecticut	133	133
Delaware	87	133
District of Columbia	216	210 (age 19–20 only: 216)
Florida	22	Age 19–20 only: 22
Georgia	26	95 ³
Hawaii	105	133
Idaho	18	133
Illinois	133	133
Indiana	14	133
Iowa	41	133
Kansas	33	—
Kentucky	18	133
Louisiana	19	133
Maine	100	133 (age 19–20 only: 300)
Maryland	123	133
Massachusetts	133	133 (age 19–20 only: 150)
Michigan	54	133
Minnesota	133	133 ⁴
Mississippi	17	—
Missouri	14	133
Montana	24	133
Nebraska	58	133
Nevada	24	133
New Hampshire	51	133
New Jersey	24	133
New Mexico	35	133
New York	133	133 ⁵
North Carolina	33	133
North Dakota	40	133
Ohio	90	133
Oklahoma	31 ⁶	133 ³
Oregon	31	133 ⁴

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State	Parents and caretaker relatives of dependent children ¹	Additional individuals age 19–64 ²
Pennsylvania	33%	133%
Rhode Island	116	133
South Carolina	95	–
South Dakota	43	133
Tennessee	100	–
Texas	11	–
Utah	34 ⁶	133 ³
Vermont	40	133
Virginia	49	133
Washington	30	133
West Virginia	14	133
Wisconsin	95	95 ³
Wyoming	42	–

Notes: As of January 2025, 100 percent of the federal poverty level (FPL) in the lower 48 states and the District of Columbia was \$15,650 for an individual plus \$5,500 for each additional family member. Before 2014, states had the flexibility to disregard income sources and amounts of their choosing when determining Medicaid and CHIP eligibility. In 2014, uniform modified adjusted gross income (MAGI) rules became mandatory for determining Medicaid and CHIP eligibility for most children and adults under age 65 eligible for Medicaid on a basis other than disability, including the groups shown in this table. As a result, states are now required to use MAGI-converted eligibility levels that account for the change in income-counting rules. The eligibility levels shown in this table reflect these MAGI-converted levels or another MAGI-based income limit in effect in each state for these groups as of 2025. Under federal regulations, the effective income limits may be 5 percentage points higher than the percentage of FPL shown in this table to account for a general income disregard that applies to an individual's eligibility under the group with the highest income standard, rather than for particular eligibility groups within Medicaid or CHIP.

States are required to provide Medicaid coverage for parents and other caretaker relatives (and their dependent children) at or above the state's 1988 Aid to Families with Dependent Children eligibility levels. Under regular Medicaid state plan rules, states may opt to cover additional parents and caretaker relatives, children age 19–20, and other individuals age 19–64 who have incomes less than or equal to 133 percent FPL and are not pregnant or eligible for Medicare. Certain states provide coverage through Section 1115 waivers, which allow them to operate their Medicaid programs with fewer statutory requirements. As noted in this table, the covered benefits under these waivers may be more limited than those provided under regular state plan rules and might not be available to all individuals at the income levels shown.

– Dash indicates that state does not use this eligibility pathway.

¹ In states that use dollar amounts rather than percentage of FPL to determine eligibility for parents, dollar amounts were converted to percentage of FPL, and the highest percentage was selected to reflect eligibility level for the group. Parents and caretaker relatives with income above the reported threshold for this group may be eligible for coverage under the new adult group (under Section 1902(a)(10)(A)(i)(VIII) of the Social Security Act (the Act)) in states that have adopted the expansion.

² Reflects state plan coverage under Section 1902(a)(10)(A)(i)(VIII) of the Act for individuals who are age 19–64, have incomes less than or equal to 133 percent FPL, and are not pregnant or eligible for Medicare; state plan coverage for children age 19–20 where indicated; and Section 1115 waiver coverage that is not subject to the limitations indicated in note 5.

³ The state has a Section 1115 demonstration that provides Medicaid coverage to some low-income adults. In some cases, the demonstration includes limitations on eligibility or benefits, is not offered to all residents of the state, or includes an enrollment cap.

⁴ In Minnesota and Oregon, individuals with incomes that are greater than 133 percent FPL but do not exceed 200 percent FPL are covered under the Basic Health Program.

⁵ In New York, individuals with incomes that are greater than 133 percent FPL but do not exceed 250 percent FPL are covered under the Essential Plan Expansion using a Section 1332 waiver.

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⁶ Reflects parent coverage under the Medicaid state plan. The state has some additional coverage above state plan eligibility standards through a Section 1115 demonstration. The demonstration includes limitations on eligibility or benefits, is not offered to all residents of the state, or includes an enrollment cap.

Sources: MACPAC, 2025, analysis of CMS, 2023, Medicaid, Children's Health Insurance Program, & Basic Health Program Eligibility Levels, <https://www.medicaid.gov/medicaid/national-medicaid-chip-program-information/medicaid-childrens-health-insurance-program-basic-health-program-eligibility-levels/index.html>; CMS, 2025, Medicaid state plan amendments, <https://www.medicaid.gov/state-resource-center/medicaid-state-plan-amendments/index.html>; CMS, 2025, CHIP state plan amendments, <https://www.medicaid.gov/chip/state-program-information/index.html>; Kaiser Family Foundation (KFF), 2025, Medicaid and CHIP Eligibility, Enrollment, and Renewal Policies as States Resume Routine Operations, San Francisco, CA: KFF, <https://www.kff.org/medicaid/medicaid-and-chip-eligibility-enrollment-and-renewal-policies-as-states-resume-routine-operations-following-the-unwinding-of-the-pandemic-era-continuous-enrollment-provision>; and eligibility information from state websites.