

MISSOURI MEDICAID EXPANSION FACT SHEET

What is Medicaid expansion?

The Affordable Care Act provides public insurance (Medicaid) to cover adults ages 19 through 64 with incomes at or below the limit for their household size. *See Table 1.*

Missouri selected this option through a ballot initiative enacted in August 2020.

Until now, Missouri Medicaid coverage was limited to certain groups such as pregnant women, seniors, people with disabilities and children. Parents and caretakers were only covered if they had extremely low incomes. Adults without children who do not fall within these groups were not covered. However, if they meet the income requirements, they will now be covered under Medicaid expansion!

Who will now become eligible?

Missouri Medicaid expansion makes health insurance available to 275,000 more Missourians by eliminating the coverage gap between Medicaid and Marketplace Insurance, where people generally do not have an option to enroll in affordable comprehensive coverage.

Some people, who are blind or disabled, and ineligible for Medicaid because they have too much income or assets may also get coverage under the Medicaid expansion group.

When can people sign up? When will changes go into effect?

Eligible Missourians can apply for coverage now. Applications will start being processed on October 1, 2021.

Medicaid Expansion is now part of Missouri's Constitution and Missouri is required to provide coverage for those who qualify, effective July 1, 2021.

If you think you are newly eligible for Medicaid health insurance, please visit

<https://mydss.mo.gov/healthcare/apply>

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Income Eligibility:

Household Size	Monthly Income	Yearly/ Annual Income
1	\$1,481	\$17,774
2	\$2,003	\$24,040
3	\$2,525	\$30,305
4	\$3,048	\$36,570
5	\$3,570	\$42,835
6	\$4,092	\$49,100
7	\$4,614	\$55,366

*Numbers based off HHS Poverty Guidelines for 2021

ⁱ Groups that are not eligible under the Medicaid expansion category include pregnant women, those entitled to or enrolled in Medicare Part A or B, and those eligible for other mandatory Medicaid programs. The exclusion of individuals who are entitled to or enrolled in Medicare Part A or B precludes dual-eligible individuals (those eligible for both Medicaid and Medicare) from being eligible under the Medicaid expansion category.