

TABLE 11
State-Funded SCHIP Programs

This table lists the state-funded programs that provide medical care to immigrants who are not eligible for coverage under the federally funded State Children’s Health Insurance Program (SCHIP). In some states or counties, limited medical services, such as preventive care, are available to all children regardless of immigration status. These programs are not systematically listed here.

(Unless otherwise indicated, information updated JULY 2007. Entry for Rhode Island deleted SEP. 2008.)

STATE	NAME OF PROGRAM – ELIGIBLE IMMIGRANTS
California	Healthy Families (combined SCHIP and Medicaid expansion program) “Qualified” immigrants, victims of trafficking, U visa/interim relief applicants, and U visa holders up to 250% of the federal poverty level.
Connecticut	Husky B (combined SCHIP and Medicaid expansion program) “Qualified” immigrants, PRUCOLs, and lawfully residing immigrants up to 300% of the federal poverty level.
District of Columbia	Immigrant Children’s Program All uninsured children up to 200% of the federal poverty level, regardless of immigration status, and who are ineligible for Medicaid and SCHIP. Enrollment is limited.
Florida	KidCare (combined SCHIP and Medicaid expansion program) Children up to 200% of the federal poverty level who were enrolled in the state’s SCHIP program (“KidCare”) as of Jan. 31, 2004. A freeze on enrollment of non–federally eligible children has been in effect for several years.
Hawaii	Med-QUEST (Medicaid expansion) Lawful permanent residents, PRUCOLs, and residents of Freely Associated States (Marshall Islands, Micronesia, and Palau) up to 200% of the federal poverty level. Effective Jan. 1, 2008, this coverage will be available to children in families earning up to 300% of the federal poverty level. A three-year pilot program provided more limited coverage to children in families earning up to 300% of the federal poverty level who are ineligible for public coverage, regardless of their immigration status
Illinois	All Kids All children regardless of income or immigration status are eligible for health coverage through “All Kids.” Co-pays and premiums are required for certain families, based on their income.
Maine	Cub-Care (combined SCHIP and Medicaid expansion program) “Qualified” immigrants and PRUCOLs up to 200% of the federal poverty level.
Maryland	Children’s Health Program (combined SCHIP and Medicaid expansion program) “Qualified” immigrants up to 300% of the federal poverty level
Massachusetts	MassHealth/Children’s Medical Security Plan (combined SCHIP and Medicaid expansion program) “Qualified” immigrant and PRUCOL children in families up to 200% of poverty are eligible for MassHealth Family Assistance (coverage excludes long-term care). All children, regardless of immigration status or income, are eligible for primary and preventive care through Children’s Medical Security Plan.
Minnesota	Minnesota Care (Medicaid expansion) “Qualified” immigrants, PRUCOLs, and lawfully residing immigrants up to 275% of the federal poverty level. Eligibility for this program may be affected by deeming.
Nebraska	Kids Connection (Medicaid expansion) “Qualified” immigrants up to 185% of the federal poverty level. Eligibility for this program may be affected by deeming.

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TABLE 11 (CONTINUED)
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STATE	NAME OF PROGRAM – ELIGIBLE IMMIGRANTS
New Jersey	NJ FamilyCare / NJ KidCare (combined SCHIP and Medicaid expansion) “Qualified” immigrant children up to 350% of the federal poverty level are eligible for NJ FamilyCare. “Qualified” immigrant parents up to 115% of the federal poverty level (or up to 200% FPL if enrolled before June 15, 2002) are eligible for NJ FamilyCare during the 5-year bar.
New Mexico	New Mexikids (Medicaid expansion) PRUCOLs up to 235% of the federal poverty level who entered the U.S. before Aug. 22, 1996.
New York	Child Health Plus (Medicaid expansion) All children up to 250% of the federal poverty level, regardless of immigration status.
Pennsylvania	CHIP (separate SCHIP program) “Qualified” immigrants and PRUCOLs up to 300% of the federal poverty level.
Texas	TexCare Partnership (combined SCHIP and Medicaid expansion program) “Qualified” immigrant children up to 200% of the federal poverty level.
Washington (Updated 12/07)	Children’s Healthcare Programs Children in families earning up to 250% of the federal poverty level are eligible for the Children’s Healthcare Programs, regardless of their immigration status. Monthly premiums are required for children in families earning between 200 and 250% of the federal poverty level. As of Jan. 1, 2009, there will be a capped program for children in families earning up to 300% of the federal poverty level, and an opportunity for higher -income families to buy into the program. Eligibility for children’s programs may be affected by deeming. Full-scope coverage is available at all income levels. Children in families with income up to 250% of the federal poverty level are eligible for the same scope of services as Medicaid. As of Jan. 1, 2009, there will be a capped program for all children in families up to 300% of the federal poverty line.
Wyoming	Kid Care (separate SCHIP program) “Qualified” abused children up to 133% of the federal poverty level.

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Key Terms Used in 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; and (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 are also “qualified.”

“PRUCOL” or Permanently Residing in the U.S. under Color of Law – is not an immigration status, but a benefit eligibility category. The term, which 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, has been interpreted differently depending on the benefit program and jurisdiction.

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.