Medicaid is Critical for Delaware Families

Medicaid is a state/federal partnership that provides health insurance to Delawareans in low- to moderate-income families and those with special health care needs.

Medicaid Supports Delaware Families Who Most Need Help

Medicaid/CHIP Enrollees

- 37% Children
- 46% Adults
- 10% People with disabilities
- 7% Seniors

Medicaid/CHIP cover 124,000 Delaware children, including:

- 99+% of children in foster care
- 50% of children with disabilities or special health care needs
- 45% of infants, toddlers, and preschoolers

Who qualifies for Medicaid in Delaware?

Medicaid is a primary source of coverage for low-income children in Delaware. Delaware Healthy Children Program, Delaware’s CHIP program, is designed to cover children whose families make too much to qualify for Medicaid but not enough to afford private insurance.

Medicaid is Built to Help Children Succeed

Medicaid covers important services that help children grow up healthy and thrive:

- Doctor visits
- Hearing screenings
- Prescriptions
- Speech, physical, and occupational therapy with no service limits
- Immunizations
- Mental and behavioral health services, including ADHD treatment
- Dental checkups and treatment
- Services for Autism Spectrum Disorder
- Eye exams and glasses
- Medically necessary services for individual conditions

The lowest-income children can access Medicaid services for free, while families with slightly higher incomes may pay limited premiums and copays.
Medicaid and CHIP are critical to the health and success of our children and the economic security of their families. We must ensure that any policy changes or funding decisions protect children's access to the coverage and care they need to thrive.

Keeping Medicaid Strong

We can’t cut Medicaid spending without hurting families.

Federal cuts to Medicaid mean:
- Squeezing already-tight state Medicaid budgets
- Making it harder for states to meet needs across their whole budgets, including in critical areas like K-12 education

State cuts to Medicaid mean:
- Covering fewer people
- Offering fewer benefits, and/or
- Paying providers less

Protecting Children and Families During Renewals

As states undergo redeterminations following a three-year pause during COVID-19, it is crucial that they:

- Take time to get it right. States may need to pause or slow down to make sure eligible children don’t lose coverage and to help those who are no longer eligible for Medicaid transition to CHIP or Marketplace coverage.
- Communicate clearly and consistently with families. States need to make sure families:
  - Have adequate time to respond to notices
  - Understand when and how to respond to notices
  - Know the details of adult and child eligibility
  - Understand their other options for coverage

Strengthening State Programs

States can take several steps to boost coverage and increase access to care for eligible children and families:

- Adopting continuous eligibility:
  - 12-month postpartum eligibility
  - 12-month continuous eligibility for adults
  - Multi-year continuous eligibility for children
- Increasing access to Medicaid services to meet children where they are:
  - School-based services
  - Home and community-based services