

Indiana Medicaid

What is Medicaid?

Medicaid is a health insurance program funded by the state and federal government. Medicaid pays for necessary medical coverage for low-income individuals and families. Several programs are part of Medicaid in Indiana, including:

- Hoosier Healthwise (Packages A and C)
- Healthy Indiana Plan (HIP)
- Hoosier Care Connect and M.E.D. Works

For these Medicaid programs, there are income limits that are considered as part of eligibility. Income eligibility varies by program and may be based on individual circumstances, such as the number of family members in your home. Your child or family member may qualify for different programs at different times, so it's important to learn about how each program works.

Hoosier Healthwise (Packages A and C):

Hoosier Healthwise Package A is a full-service insurance plan for children (up to age 19) and pregnant individuals who meet income eligibility requirements. Members of this plan do not have to pay any premiums; however, some low-cost co-payments may apply.

Hoosier Healthwise Package C (CHIP) is a full-service insurance plan for children (up to age 19) whose families have slightly higher incomes and do not qualify for Package A. Children on Package C (CHIP) cannot be eligible for employer-sponsored health insurance or other minimal essential health coverage. With this insurance package, members are required to pay a low-cost monthly premium as well as low-cost co-payments for certain services.

For more information about Hoosier Healthwise (Packages A and C):

<https://www.in.gov/medicaid/members/member-programs/hoosier-healthwise/>

For more information about Hoosier Healthwise (Packages A and C) eligibility:

<https://www.in.gov/medicaid/members/apply-for-medicaid/eligibility-guide/>

For more information about Hoosier Healthwise (Packages A and C) out-of-pocket costs:

<https://www.in.gov/medicaid/members/member-programs/hhw-package-c-med-works-premium/>

Healthy Indiana Plan (HIP):

Healthy Indiana Plan (HIP) is a full-service insurance plan for adults ages 19-64 who meet income eligibility requirements. Adults on HIP cannot be eligible for Medicare or other Medicaid programs.

For more information about the Healthy Indiana Plan (HIP):

<https://www.in.gov/fssa/hip/>

For more information about the Healthy Indiana Plan (HIP) **eligibility and out-of-pocket costs:**

<https://www.in.gov/fssa/hip/am-i-eligible/hip-eligibility-and-contribution-calculator/>

Hoosier Health Connect and M.E.D. Works:

For more information on these programs, visit INF2F's Medicaid Disability [Fact Sheet](#).

Apply at your local Division of Family Resources office. To find your local office, call:
1-800-403-0864

or the MCH Moms Helpline:
1-844-624-6667

□ To learn more about programs that cover children, call the Hoosier Healthwise Helpline, call:
1-800-889-9949

□ To learn more about the Healthy Indiana Plan (HIP), call:
1-877-438-4479



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How to Apply?

Each local Division of Family Resources (DFR) Office and Enrollment Center accepts applications for all of the programs described here. To find your local office call the DFR toll free number at: 1-800-403-0864; call MCH Moms Helpline 1-844-624-6667; or go to <http://www.in.gov/fssa/dfr/2999.htm>.

To apply for Medicaid/Hoosier Healthwise call the DFR toll free number at: 1-800-403-0864 or visit: <https://www.in.gov/medicaid/members/apply-for-medicaid/>

You will need the following information and documentation to complete the application(s):

- **Proof of Identity**- for adults, this can be a driver’s license, State ID card, Social Security card, or other picture ID.
- **Proof of Income** - a recent pay stub or other documentation from your employer showing previous month's income. If there is income from other sources like Social Security, then include some type of statement showing how much is being received.
- **Social Security Number**- SSN’s are *not required* for non-applicants.
- **Proof of Citizenship**- can be a birth certificate.
- If the person applying is not a US citizen, you will need **proof of immigration status**, such as an immigration card or number.
- If the person applying has private health insurance, you will need **proof of private insurance**, like an insurance card or the insurance policy number.

Income Limits

All of the programs mentioned use the Federal Poverty Definition to set income limits. It is important to note that these limits are RESET each year.

Household Size	100%	150%	200%	225%	250%
1	\$14,580	\$21,870	\$29,160	\$32,805	\$36,450
2	\$19,720	\$29,580	\$39,440	\$44,370	\$49,300
3	\$24,860	\$37,290	\$49,720	\$55,935	\$62,150
4	\$30,000	\$45,000	\$60,000	\$67,500	\$75,000
5	\$35,140	\$52,710	\$70,280	\$70,065	\$87,850
6	\$40,280	\$60,420	\$80,560	\$90,630	\$100,700
7	\$45,420	\$68,130	\$90,840	\$102,195	\$113,550
8	\$50,560	\$75,840	\$101,120	\$113,760	\$126,400

*The above chart reflects ANNUAL income limits for 2023.

Where to get more Information:

- Contact Indiana Family to Family by calling 1-844-323-4636 or by visiting www.inf2f.org.
- Get free, expert help with healthcare coverage and insurance, including these Medicaid programs by calling Covering Kids & Families of Indiana at 1-317-222-1850 or by visiting www.ckfindiana.org.

Programs and systems change often. It is important to ensure that you are using the most current information. This fact sheet was updated May 2023. Please check <https://www.inf2f.org/fact-sheets.html> for the most recent edition.

La versión en español de esta información está disponible [aquí](#).

This fact sheet was supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$93,175 with 87% percent financed with non-governmental sources. The contents are those of INF2F and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS, or the U.S. Government. For more information, please visit HRSA.gov.