



What is Arkansas Medicaid?

Arkansas Medicaid is a public insurance program that provides health care coverage to 1 in 3 Arkansans. Medicaid programs are paid for jointly by the state and the federal government. Medicaid programs differ in each state – the federal government sets broad national guidelines, and each state administers its own Medicaid program. In Arkansas, Medicaid covers:

1 in 2 births

80% of behavioral health services

83% of services for people with intellectual and developmental disabilities

Who is responsible for administering Arkansas Medicaid?

Arkansas Medicaid is managed by the Department of Human Services (DHS). Within DHS, the Division of County Operations (DCO) manages all eligibility decisions, and the Division of Medical Services (DMS) manages payment and program operations.

Who is Eligible for Arkansas Medicaid?*

Eligibility depends on the individual's income, assets, age, and living situation. Most individuals who can get Medicaid are in one of these groups:



Adults and families with low income



Pregnant women and newborns



Individuals with disabilities



Individuals with behavioral health needs



Older adults



Children

What is the difference between Medicaid and Commercial Insurance?

	Medicaid	Medicare	Commercial
Who Manages It?	<ul style="list-style-type: none"> The Federal government sets broad rules, and each state manages its own Medicaid program. 	<ul style="list-style-type: none"> The Federal government establishes uniform rules for Medicare at the national level. 	<ul style="list-style-type: none"> For-profit public and private health insurance companies.
Who is Eligible?	<ul style="list-style-type: none"> Anyone who meets income and other requirements. 	<ul style="list-style-type: none"> Anyone who meets age or disability requirements, regardless of income. 	<ul style="list-style-type: none"> Everyone but primarily offered through employer.
What is Covered?	<ul style="list-style-type: none"> Hospital and doctor services, prescriptions, home health care. 	<ul style="list-style-type: none"> Hospital (Part A), doctor services (Part B), prescriptions (Part D). 	<ul style="list-style-type: none"> Each plan may offer different levels of services.
What Does it Cost?	<ul style="list-style-type: none"> General free, although there may be small fees for certain services. 	<ul style="list-style-type: none"> Premiums set at the federal level with annual deductibles, and other costs. 	<ul style="list-style-type: none"> Depends on plan selection.

* In Arkansas, DHS determines eligibility for Medicaid services for every category of assistance except Social Security Income (SSI), which is determined by the Social Security Administration. For more information, visit ar.gov/HCBS or contact Access Arkansas at 855-372-1084.