



ACA/FAMILY MEDICAID 201-7

ACA Adult Medicaid and ACA Adult

Supersedes: 01/01/2023 ACA/FMA 201-8 (05/02/2024); 05/01/2025

Reference: 42 CFR 435.119; ARM 37.82.101-102, 301; ARM 37.84.102, 116-123; P.L. 119-21

Overview: The Montana Health and Economic Livelihood Partnership (HELP) program created two new coverage groups beginning January 1, 2016; ACA Adult and ACA Adult Medicaid. These are expanded Medicaid coverage to otherwise eligible adults.

ACA Adult Medicaid and ACA Adult cover individuals aged 19 through 64.

FINANCIAL CRITERIA:

Income is determined under modified adjusted gross income (MAGI) rules. Each member's MAGI is compared to the federal poverty level (FPL) to see if they qualify for coverage. ACA Adult Medicaid income must be 0% to 50% FPL (after a 5% disregard from their total countable income) and ACA Adult must be 51% to 133% FPL (after a 5% disregard from their total countable income).

NON-FINANCIAL CRITERIA:

Medicaid standard nonfinancial requirements are listed in section [CMA 300 Non-Financial Overview](#). In addition to the standard criteria that apply to all Medicaid programs, the following non-financial criteria must be met:

1. Must be aged 19 through 64 years of age;
2. Not eligible for or enrolled in Medicare Parts A and/or B,
3. Not be pregnant at application, and
4. Meet Community Engagement requirements or have a temporary exemption in the look-back period; or qualify for an exclusion.

See CMA 310-1 Community Engagement and Exclusion Policy

FILING UNIT:

Required filing unit members are determined based on tax filing rules. See [FMA 200-1 ACA Filing Unit](#) for ACA filing unit requirements.

ACA ADULT MEDICAID AND ACA ADULT COVERAGE ENDS:

ACA Adult Medicaid and ACA Adult coverage closes when the client:

1. Requests closure,
2. Dies,
3. Moves out of Montana,
4. Is non-compliant PERM and/or Program Compliance,
5. Becomes eligible for Medicare or has Marketplace coverage,
6. Is unable to be located,
7. Reaches age 65 (eligibility ends the month before their 65th birthday), or
8. No longer meets Community Engagement requirements or a temporary exemption; or no longer qualifies for an exclusion.

If coverage is closing due to a reported/discovered change, an ex parte review will be completed. See CMA 1501-1 Reporting Changes.

Effective Date: 07/01/2026