

# Member Eligibility

## OVERVIEW

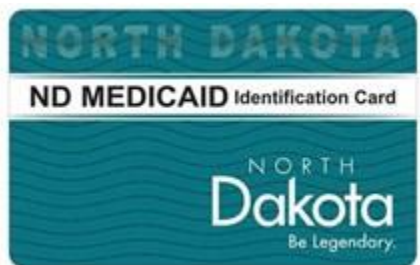
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Individuals may apply for North Dakota Medicaid/Children's Health Insurance Program (CHIP) online through the [Apply for Help webpage](#), in person at their [local human service zone office](#), or by [mail](#). The [Application for Assistance](#) can be printed and mailed, faxed or emailed. The contact information is listed under **Step 2** on the application.

Individuals approved are eligible beginning the first day of the month in which they are approved. An individual may request retroactive coverage for the three months immediately preceding the application month if the individual had health care expenses in those months and met the ND Medicaid eligibility criteria in those months.

Applications for coverage which require a disability determination to be made will be processed on average, within 90 days. All other applications will be processed within 45 days

The North Dakota Medicaid Identification Card is issued by the Department of Health and Human Services (NDHHS) on behalf of eligible ND Medicaid recipients.



Members must present a ND Medicaid identification card to a ND Medicaid provider each time before obtaining a covered service or fill a prescription as stated in the [Medicaid Member Handbook](#).

The Medicaid ID card does not guarantee Medicaid eligibility. Providers are responsible for verifying a member's eligibility before providing services. Eligibility can be verified using the [ND Medicaid MMIS Portal](#) or through the Automated Voice Response System (AVRS) by dialing 1.877.328.7098.

## VERIFYING ELIGIBILITY

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How to check Member Eligibility via MMIS Web Portal or (AVRS)

- [Member Eligibility in MMIS Web Portal](#)
- [AVRS](#)

## SUSPENSION OF BENEFITS

A member may be eligible for Medicaid but have suspended benefits. This includes when a member is incarcerated or admitted to an Institution for Mental Disease (IMD).

### IMD EXCLUSION

The IMD exclusion is in [§1905\(a\) of the Social Security Act](#) in paragraph (B) following the list of Medicaid services. This paragraph states that federal financial participation is not available for any medical assistance under title XIX for services provided to any individual who is under age 65 and who is a patient in an IMD unless the payment is for inpatient psychiatric services for individuals under age 21. This exclusion was designed to assure that states, rather than the federal government, continue to have principal responsibility for funding inpatient psychiatric services. Under this broad exclusion, no Medicaid payment can be made for services provided either in or outside the facility for IMD patients in this age group. The IMD exclusion applies not only to IMD services but to all Medicaid services. Because IMDs are defined to be institutions with more than 16 beds, the IMD exclusion applies only to institutions with at least 17 beds.

### INCARCERATION

ND Medicaid suspends Medicaid eligibility while an individual is incarcerated. Medicaid funds may not be used to pay for services for people while they are incarcerated, except when they are inpatients in a medical institution for 24 hours or more. There are some limited exceptions that allow the use of federal Medicaid funds for youth and young adults who are incarcerated. Our [Fact Sheet for Incarcerated Individuals](#) has more information on Medicaid coverage and eligibility while incarcerated and upon release.

## MEDICAID COVERAGE PROGRAMS

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### FULL COVERAGE

ND Medicaid covers medically necessary [health care services](#) for members. Some people who qualify for Medicaid may be responsible for a part of their medical bills. This is called [recipient liability](#) or client share. Recipient liability is the monthly amount a member must pay toward the cost of medical services before the Medicaid program will

pay for services received. It works like a monthly deductible and is based on the difference between a member or household's monthly net income and Medicaid income limits.

### Medicaid Expansion

Medicaid Expansion eligibility is based on age, income, and residency. You must be between the ages of 19-64, must be a resident of North Dakota, and your household income must be equal to or less than 138% of the Federal Poverty Level.

- Enrollees age 21 and over will receive two ID cards, one from BCBS ND and one from Medicaid
- All outpatient pharmacy benefits are administered by the State, just as with traditional Medicaid – this is why two ID cards are sent

Enrollees 19-20 years old are eligible for Medicaid Expansion based on income but are enrolled in traditional Medicaid to allow for expanded coverage for Dental and Vision benefits and will only receive the ND Medicaid ID card.



### CHILDREN HEALTH INSURANCE PLAN (CHIP)

This is a Medicaid plan that can cover health care for a child that does not qualify for Medicaid. [CHIP](#) is for children who:

- Are North Dakota residents
- Are U.S. citizens or qualified aliens
- Do not have health insurance coverage
- Are 18 years of age or younger
- Live in families with qualifying incomes

### WAIVERS

[Waivers](#) are agreements between the Centers for Medicare and Medicaid Services (CMS) and a state's Medicaid agency and serve specific groups of people.

Waivers specify:

- Number of participants to be served

- Eligibility criteria
- Available services, including any limits on services
- Procedures for the evaluation and re-evaluation of the level of care

Waivers give eligible people options if their needs can be met in their homes, and if providing services in a home and community setting is cost neutral compared to institutional services.

North Dakota's current Medicaid 1915(c) Waivers include:

- [Home and Community-Based Services](#)
- [Children's Hospice](#)
- [Children with Medically Fragile Needs](#)
- [Autism Spectrum Disorder Birth through age 17](#)
- [Approved 1915\(c\) Traditional Individual with Intellectual Disabilities and Developmental Disabilities](#)

## ELIGIBILITY TABLE

The [Medicaid Services and Limits table](#) in the Application for Assistance Guidebook has information about health care services covered by ND Medicaid. Covered services may change and different rules may apply for members in the Coordinated Services Program

## REFERENCES

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- [North Dakota Administrative Code](#)
- [North Dakota Century Code](#)
- [Code of Federal Regulations](#)

## CONTACT

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### Medical Services Division

North Dakota Health and Human Services

600 E. Boulevard Ave., Dept. 325

Bismarck, ND 58505-0250

Email: [dhsmed@nd.gov](mailto:dhsmed@nd.gov)

Phone: [\(701\) 328-7068](tel:(701)328-7068)

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## POLICY UPDATES

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July 2025

Section	Summary
	Policy created