FAQs

I need health insurance, but my income is low and I am confused about how to get health insurance here in Georgia. What should I do?

Medicaid coverage is available to low-income pregnant women, children in low-income households, low-income elderly persons age 65 or older, disabled persons who cannot work, and low-income families with children under age 19. If you meet one of the listed criteria, you may qualify for Medicaid in Georgia.

You can find out if you qualify for Medicaid or other medical assistance and social service programs by going online, to www.compass.ga.gov, or speaking with a Division of Family and Children Services (DFCS) representative. You may find your DFCS county contact information at www.dfcs.dhs.georgia.gov and click on your county of residence.

If you do not meet the above criteria or you have already been told that you do not qualify for Medicaid in Georgia due to income or resources, you can apply for medical coverage at the Federal Marketplace at www.healthcare.gov. The federal government is responsible for operating the health insurance exchange in Georgia. To determine what options may be available to you, visit www.healthcare.gov or call 1-800-318-2596 or TTY: 1-855-889-4325.

I keep reading and hearing about insurance being required by January 1, 2014; am I supposed to sign up for health insurance? If I can’t afford the insurance, will I be fined?

The federal government is responsible for operating the health insurance exchange for Georgia. To determine what options may be available to you, visit www.healthcare.gov or call 1-800-318-2596 or TTY: 1-855-889-4325.

I’m interested in applying for Medicaid. How do I go about doing that?

You can find out if you qualify for Medicaid or other medical assistance and social service programs by going online, to www.compass.ga.gov, or calling 1-877-423-4746 or TTY: 1-800-255-0135. You may also find DFCS county contact information at www.dfcs.dhs.georgia.gov; click on your county of residence.

I’ve already applied for Medicaid; how long will it take to determine if I am eligible?

- Pregnant women should have a decision within 10 days.
- For all other non-disabled types of Medicaid, it should take no more than 45 days.
- For disabled people applying for Medicaid, it could take up to 60 days.
Georgia did not expand Medicaid, so does that mean I cannot get Medicaid coverage?

If you were denied by the state previously and your situation has not changed, you may be eligible for insurance through the Federal Marketplace at www.healthcare.gov or by phone at 1-800-318-2596 or TTY: 1-855-889-4325. Even though Georgia did not expand Medicaid, it did not change the current criteria for Medicaid. You may qualify if you have been denied before but your situation has changed. Medicaid coverage is available to low-income pregnant women, children in low-income households, low-income elderly persons age 65 or older, disabled persons who cannot work, and low-income families with children under age 19. If you meet one of the listed criteria, you may qualify for Medicaid in Georgia.

To determine if you are eligible for Medicaid you can go online, to www.compass.ga.gov, or speak with a DFCS representative. You may find DFCS county contact information at www.dfcs.dhs.georgia.gov; click on your county of residence.

Are Medicaid eligibility requirements changing because of health care reform (ACA, etc.)?

In Georgia, the overall requirements have not changed. Beginning January 2014, certain types of income will no longer be counted for children and caretakers, and pregnant women. Also, assets will no longer be counted in children and caretakers on Medicaid. The documentation requirements are also changing in that workers will use electronic databases to try to support what you state your situation is on your application. If the worker cannot find what is needed electronically, then you may be asked to supply additional verification. The budgeting process is changing in that the state is no longer allowing many deductions that were allowed prior to the Affordable Care Act (ACA). The income limit was raised to account for the removal of the income deductions. Each state is responsible for determining Medicaid eligibility. Policy makers in Georgia made the decision to maintain the previous Medicaid eligibility requirements where possible.

To determine if you are eligible for Medicaid you can go online, to www.compass.ga.gov, or speak with a DFCS representative. You may find DFCS county contact information at www.dfcs.dhs.georgia.gov; click on your county of residence.

What is COMPASS?

COMPASS is a quick and easy way for people in Georgia to get answers to questions about health and human services. It provides an online application system for a number of social service programs in Georgia including Medicaid, PeachCare for Kids, SNAP (food stamps), and child care. COMPASS also provides a means to check an application’s status, submit changes and check on benefits. You can access COMPASS at www.compass.ga.gov.

Is Georgia changing its Medicaid application process? If so, how?
Medicaid and Peachcare for Kids applications are now available online at www.compass.ga.gov. Interested individuals may use COMPASS to apply online, download a printable application at http://dfcs.dhs.georgia.gov/what-do-i-need-apply-medicaid, or go to their local DFCS offices to apply using a lobby computer or pick-up and complete a paper application. You may find DFCS county contact information at www.dfcs.dhs.georgia.gov; click on your county of residence.

Interested individuals who do not have Internet access or choose not to apply online or through a DFCS office can complete a single, consolidated paper application eliminating the need for separate program applications. To receive the paper application by USPS, call 1-877-423-4746 or TTY: 1-800-255-0135.

I’ve been told that our family’s income is too high for Medicaid and PeachCare for Kids coverage. Is there other insurance (public or private) that we might be able to afford for our kids in particular?

If you are interested in learning more about health insurance options that may be available to you in Georgia, visit www.healthcare.gov or call 1-800-318-2596 or TTY: 1-855-889-4325

I have heard about tax credits for some people who go to the health insurance exchange (Marketplace). Do I get a tax credit or refund if I go to the exchange rather than applying for Medicaid? How can I find out about this?

Effective January 1, 2014, adults with income under 400 percent of the Federal Poverty Level (FPL) who are not eligible for Medicaid may seek coverage through the Federally Facilitated Marketplace (FFM). To learn more about options that may be available to you, visit www.healthcare.gov or call 1-800-318-2596 or TTY: 1-855-889-4325

What do I do if documentation is needed with my online Medicaid application?

Documentation may be dropped off at the county office of residence; it can be faxed to the fax number listed at the top of the document (F.173) requesting the additional needed verification; mailed to the county office of residence or brought to the lobby of the county office and scanned utilizing a document imaging kiosk. If scanned, customers can print or e-mail a receipt of the uploaded documentation.

Can I submit an attachment with my original Medicaid application, or send it later?

Documents can be added during the application process during the self-scanning option. Customers will need to ‘create an account’ in order to access the self-scanning feature during the application. Customers need to ‘create an account’ for the application itself. This is not the same account as the mycompass account.

Will my Medicaid application be processed any quicker if I apply online rather than going into a DFCS office and filling out a paper application?
Application processing standards are the same regardless of the origin of the application (online or paper).

I could not finish my application because of a technical problem. Who should I call for help?

COMPASS works best with Internet Explorer version 5.5 or higher. If you have trouble while using COMPASS, please call the Online Services hotline at 1-877-423-4746.

I have questions about the online Medicaid application. Is there help available?

Yes, if you have questions about the online application, you may call 1-877-423-4746.

Can I use this online Medicaid system to renew my Medicaid eligibility, or is it just for new people coming into Medicaid?

Yes, you may complete your renewal on-line beginning the 20th of the month before your renewal is due using COMPASS at www.compass.ga.gov and clicking on the “MY COMPASS” account picture.

An on-line account will have to be created if you have not already done so, and the Client ID number will be needed to activate the “MY COMPASS” account. The Client ID number may be found in the upper right hand corner of most letters received from DFCS. Once you have set up your MYCOMPASS account, you can click on the “RENEW MY BENEFITS” tab to complete your review.

If I use the online Medicaid system and I am not eligible for coverage, how will I be notified?

You will receive notice through the US Postal Service of the decision made on your application. The notice will usually be received within 10 days of the decision, depending on mailing time. Depending on the type of Medicaid being requested, the decision could be made within 10 days (for pregnant women), 45 days (for caretakers, children and non-disabled individuals) or 60 days (for disabled individuals). You can also check on the status of your application using COMPASS and clicking the “Application Status Check” picture.

If my Medicaid application is not approved, is there any other place for me to turn to get health insurance for myself and my family?

The federal government is responsible for operating the health insurance exchange in Georgia. To determine what options may be available to you, visit www.healthcare.gov or call 1-800-318-2596 or TTY: 1-855-889-4325.