

Medicaid Changes for Noncitizens: Effective Oct. 1, 2026



FREQUENTLY ASKED QUESTIONS

What is changing?

A new federal law, H.R. 1, as passed by Congress and signed into law by President Trump, changes who can get Medicaid and may impact up to 15,000 noncitizen Maryland Medicaid members. The Maryland Department of Health, Maryland Health Connection, our managed care organizations and community partners are working together to help Maryland families navigate these changes.

Who remains eligible for full Medicaid coverage after Oct. 1, 2026?

To enroll or stay enrolled in Medicaid after Oct. 1, 2026, most noncitizen adults must be:

- Lawful Permanent Residents (LPR) - green card holders - who meet or are exempt from the five-year waiting period.
- Cuban/Haitian entrants.
- Citizens of the Marshall Islands, Micronesia, and Palau who are living in one of the U.S. states or territories - Compact of Free Association (COFA) migrants.

Pregnant adults, regardless of immigration status, will still qualify for coverage.

Who will NOT be impacted by this change?

- Noncitizen pregnant individuals and children are not impacted.
- Noncitizens who are lawfully present in the U.S. and who are pregnant can apply for Medicaid and may qualify for coverage for up to 12 months following the birth of a baby.

- Noncitizens, regardless of immigration status, who are pregnant can get Medicaid coverage through the [Healthy Babies Program](#). This covers care during pregnancy and for up to four months following the birth of a baby.
- Children under age 21, who are lawfully present in the U.S., can still get Medicaid, even if their parents or family members do not qualify for coverage. Only specific family members applying for coverage need to share citizenship or immigration status.

When will Maryland communicate these changes to participants?

- June 2026: Maryland Health Connection (MHC) will contact noncitizens who may lose coverage on Oct. 1, via mail.
- August 2026: MHC will send an official notice to noncitizens who will no longer qualify for Medicaid on Oct. 1. Individuals can update their immigration status if it has changed. Notices will be sent by mail or delivered electronically based on the member's preference. Outreach to impacted noncitizens enrolled through Maryland Health Connection will also be conducted by text and email.
- Oct. 1, 2026: MHC will disenroll individuals who no longer meet the new federal eligibility rules for noncitizens.

Is Emergency Medicaid changing?

Eligibility for Emergency Medicaid Services will not change. Emergency Medicaid is for people who would otherwise qualify for full Medicaid, except for their immigration status. Emergency Medicaid covers medically necessary care for a sudden health crisis, including both an initial emergency room visit, and any hospital stay needed to treat an emergency.

Applications submitted by December 31, 2026, can receive up to three months of retroactive coverage. Beginning January 1, 2027, federal law limits retroactive coverage to two months.

What conditions are considered an emergency?

An emergency is a severe, sudden medical condition—including emergency labor and delivery—with symptoms that need immediate medical attention. Without fast treatment, the condition could reasonably be expected to result in:

- Serious danger to the patient's health.
- Serious damage to bodily functions.
- Serious dysfunction of any organ or body part.

Note: All Emergency Medicaid claims are subject to medical necessity review by Telligen.

What is the approval process for Emergency Medicaid?

Hospitals and providers do not need to elect or opt-in to Emergency Medicaid.

1. To seek reimbursement, the service provider should complete an [OES 401](#) form and give the form to the patient on the date of service.
2. The patient should submit the OES form to their local LDSS or LHD office within 3 months of the discharge date for a case worker to complete the application.
3. The LDSS or LHD office will return the completed form to the listed service provider, requesting the provider upload the completed form and relevant medical documentation to Telligen via <https://myqualitrac.com/> within 60 days.

Review [Provider Transmittal 61-26](#) for more information on submitting requests for Emergency Medical Service reviews.

Resources

For questions about these changes or to determine if an individual qualifies for coverage, contact Maryland Health Connection at MarylandHealthConnection.gov or MD Benefits at benefits.maryland.gov.

- If an individual has Medicaid or MCHP health coverage, direct them to:
 - Login to their account at MarylandHealthConnection.gov.
 - Call Maryland Health Connection at 855-642-8572. Help is available in more than 200 languages. Deaf and hard of hearing use Relay service.

- Call or visit their local [Department of Social Services](#) or their [local health department](#).
- If an individual has coverage through MD Benefits, direct them to:
 - Login to their account at benefits.maryland.gov.
 - Call the DHS Call Center at 800-332-6347. Help is available in more than 200 languages. Deaf and hard of hearing use Relay service.
 - Call or visit their local [Department of Social Services](#) or their [local health department](#).
- For community resources, dial 2-1-1 or visit 211md.org.
- Learn more at MarylandHealthConnection.gov/checkin.

