



# GEORGIA PATHWAYS TO COVERAGE™

## HOW TO APPLY



Georgia Pathways to Coverage, or Pathways, is a Medicaid program for Georgians 19-64 who meet the eligibility criteria and otherwise would not qualify for traditional Medicaid. Pathways is a Medicaid eligibility category in Georgia, which increases access to affordable, quality healthcare coverage for those in the state who don't have it today.

## WHERE TO APPLY

Georgia residents can apply through the Gateway Customer Portal online at [gateway.ga.gov](https://gateway.ga.gov). You can also apply:

- In-person at your local Division of Family & Children Services (DFCS) office. To find the location and business hours for a DFCS office, visit: [dfcs.ga.gov/locations](https://dfcs.ga.gov/locations).
- By mail to your local DFCS office.
- By phone at 1-877-423-4746 or 711 for those who are deaf, hard of hearing, deaf-blind or have difficulty speaking.

If you need help applying, you can call the Customer Contact Center at 1-877-423-4746 or contact your local DFCS office.

## DOCUMENTS THAT MAY BE NEEDED

At application, your identity, income, and qualifying activities may need to be verified.

A requirement for Pathways eligibility is completing at least 80 hours of qualifying activities each month. You may need to provide documentation for each qualifying activity for the most recent four weeks available within eight weeks prior to your application submission date. For example, if you apply on July 1, you may need to provide documentation to prove your qualifying activities for June. If you're unable to provide documentation for June, you may need to provide documentation for May.



## FOR MORE INFORMATION ABOUT PATHWAYS :

Visit [pathways.georgia.gov](https://pathways.georgia.gov), call the Customer Contact Center at 1-877-423-4746 or 711 for those who are deaf, hard of hearing, deaf-blind or have difficulty speaking or apply at [gateway.ga.gov](https://gateway.ga.gov)

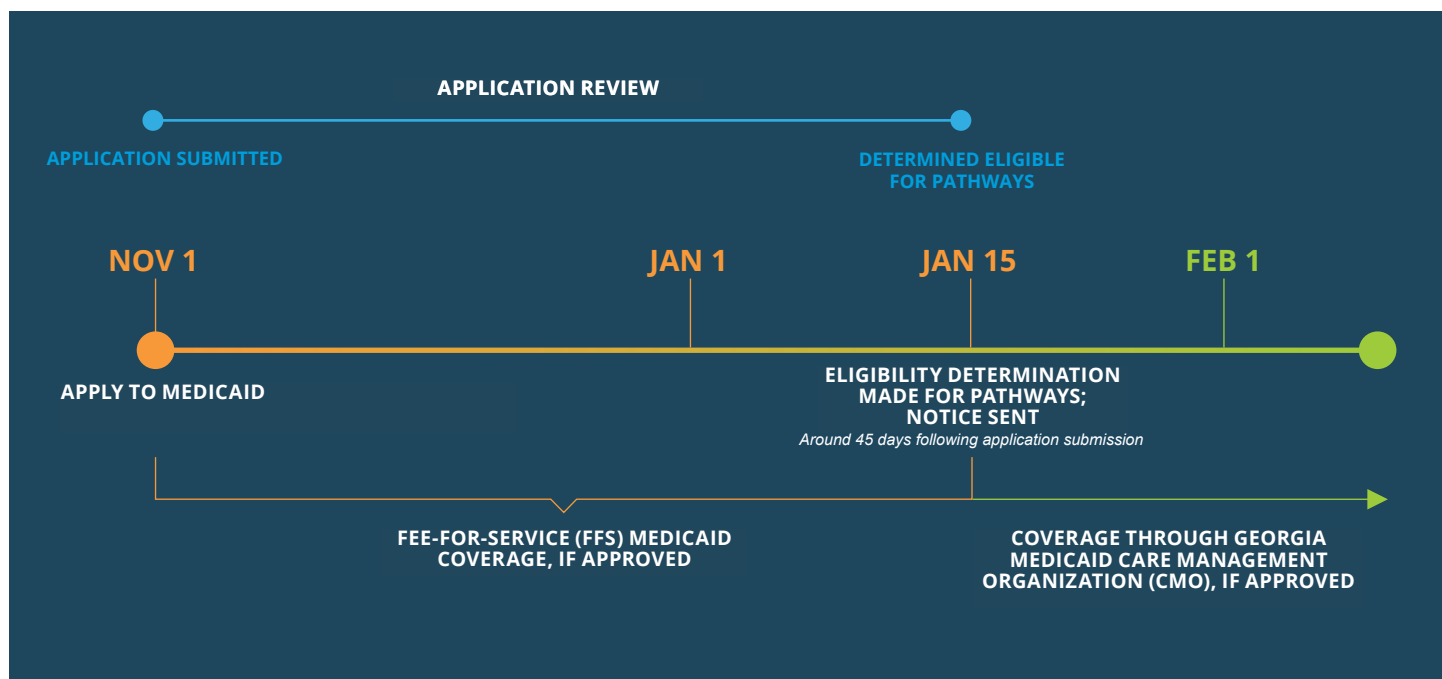


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## APPLICATION PROCESS

The state will review your application and let you know if you are approved or denied around 45 days after submission. If approved, your coverage will begin on the first day of the month when you applied.



*Sample timeline for demonstration purposes only; actual months will vary.*

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