

## Coverage for Aged, Blind or Disabled

Category	Eligible Population	Monthly Income Limits	Resource Limits	Benefits
Aged, Blind or Disabled	Aged (65+), blind or totally and permanently disabled	100% of federal poverty level (FPL): \$1,133 per individual or \$1,526 per couple	\$8,400 per individual, \$12,600 per couple	Medicaid benefits
Qualified Disabled Working Individuals	Disabled individuals who lost eligibility for Title II benefits and Social Security support of Medicare premiums because of wages	Countable income must be at or below 200% of FPL	\$4,000 per individual	Payment of monthly Medicare Part A premiums only, not eligible for other Medicaid benefits
Qualifying Individual	Must have Medicare Part A benefits	Income level must be greater than 120% of FPL and less than 135% of the FPL: \$1,529 for an individual, or \$2,060 for a couple	\$8,400 per individual, \$12,600 per couple	Medicare Part B premiums only, not eligible for other Medicaid benefits
Specified Low-income Medicare Beneficiary	Must have Medicare Part A benefits	Income level must be greater than 100% and less than 120% of FPL: \$1,359 per individual or \$1,831 per couple	\$8,400 per individual, \$12,600 per couple	Medicare Part B premiums only, not eligible for other Medicaid benefits
Supplemental Security Income (SSI)	Aged (65+), blind or totally and permanently disabled and working	\$841 per individual, \$1,261 per couple	\$2,000 per individual, \$3,000 per couple	A cash payment individual with no income receives \$794 per month, Medicaid benefits
SSI Pass-Along	Individuals who lost eligibility for SSI due to increase in receipt of certain Social Security benefits	Follows SSI limits once Social Security Administration benefit increase is disregarded	SSI resource limits (can we link to these?)	Medicaid benefits
TEFRA – Katie Beckett	Disabled children under age 19 who meet level of care required in ICF-ID facility, nursing facility or hospital	Parent's income is not counted, child's income limit is \$2,523	\$2,000 per child (parent's income and resources not considered)	Medicaid benefits
Working Disabled	Under age 65, totally and permanently disabled and working	250% of FPL: \$2,832 if it is a household of one AND the individual's unearned income must be at or below 100% of FPL: \$1,133	\$8,400 per individual	Medicaid benefits

## Coverage for Children and Families

Category	Eligible Population	Monthly Income Limits	Resource Limits	Benefits
Family Planning	Both men and women of any age are eligible if their income is at or below 199% of FPL	Family income cannot exceed 199% of FPL: \$4,601.87 for family of four	Not applicable	Family planning services, physical exam and certain screenings such as cholesterol and diabetes
Foster Children	Children under 21 years of age who reside in licensed foster homes or private child care facilities supported in whole or in part by state or federal foster care board payments	Eligibility is generally established on an individual basis, income cannot exceed \$758.77	Not applicable	Medicaid benefits, certain categories of children may also receive a cash payment
Former Foster Care	Individuals under the age of 26 who were also in foster care at the age of 18, cannot be eligible in any other Medicaid category	No limit	Not applicable	Medicaid benefits
Parent/Caretaker Relative	Low-income families with children under 18 years of age or under 19 years of age if attending a secondary school full-time	Based on family size, family income cannot exceed 67% of FPL: \$1,549.37 for a family of four	Not applicable	Medicaid benefits
Partners for Healthy Children	Low-income children up to age 19 if their family income is at or below 213% of federal poverty level	Based on family size, family income cannot exceed 213% of FPL: \$4,925.62 for family of four	Not applicable	Medicaid benefits for the qualifying children
Pregnant Women and Infants	Pregnant women and infants under age one	Based on family size, income cannot be more than 199% of FPL: \$4,601.87 for family of four	Not applicable	Medicaid coverage for the pregnant woman for the duration of the pregnancy, including 12 months after the pregnancy ends, and for the child under age one
Transitional Medicaid	Individuals who lost eligibility for Parent Caretaker Relative/Low-income Family because of the earned income of the parent/caretaker(s)	Minimum of six months regardless of income, can be up to 24 months if earned income is less than or equal to 185% FPL	Not applicable	Medicaid benefits for up to two years beginning with the month of PCR/LIF ineligibility

### Coverage for Long-term Care

Category	Eligible Population	Monthly Income Limits	Resource Limits	Benefits
Home and Community-based Services (Waivers)	Aged, blind or disabled and determined to be medically in need of a nursing home care but chooses to remain at home, must require/receive at least one waived service for a minimum of 30 consecutive days	300% of federal benefit rate (FBR) income limit: \$2,523 per individual	\$2,000 per individual	Medicaid benefits and home and community-based waiver services
MAO-Institutional	Aged, blind or disabled and determined to be medically in need of nursing home care and reside in an approved medical facility for at least 30 days	300% of FBT income limit: \$2,523 per individual	\$2,000 per individual	Medicaid benefits and payment to the nursing home, individuals are required to pay part of their cost of care
Optional State Supplementation	Individuals residing in approved, licensed residential care homes who meet SSI eligibility requirements, except for income	\$1,526 per individual	\$2,000 per individual	Medicaid benefits and payments to the community residential care facility, individuals are required to pay part of their cost of care

### Other Coverage

Category	Eligible Population	Monthly Income Limits	Resource Limits	Benefits
Breast and Cervical Cancer Program	Individuals diagnosed and in need of treatment for breast or cervical cancer or pre-cancerous lesions (CIN II/III) with no health insurance or insurance that does not pay for treatment of these conditions	200% of FPL: \$2,265 for an individual	Not applicable	Medicaid benefits
COVID-19 Limited Benefit	Uninsured individuals who require assistance to cover costs associated with COVID-19 diagnostic testing, must not be eligible for any other Medicaid category	No income limit	Not applicable	Diagnostic testing for the COVID-19 virus