

CATEGORY	INCOME COMPARED TO	HOUSEHOLD SIZE		RESOURCE LEVEL		SPECIAL NOTES
		1	2	1	2	
PRESUMPTIVE ELIGIBILITY FOR PREGNANT WOMEN	100% FPL	N/A	1,261	NO RESOURCE TEST		Qualified provider makes the presumptive eligibility determination. Cannot spend-down to become eligible for presumptive eligibility.
	200%FPL	N/A	2,522			
PREGNANT WOMEN	100% FPL	N/A	1,261	NO RESOURCE TEST		A woman determined eligible for Medicaid for any time during her pregnancy remains eligible for Medicaid coverage until the last day of the month in which the 60th day from the date the pregnancy ends occurs, regardless of any change in income or household composition. If the income is above 200% FPL the A/R must spend-down to the Medicaid income level. The baby will have guaranteed eligibility for one year.
	200%FPL	N/A	2,522			
CHILDREN UNDER ONE	200%FPL	1,862	2,522	NO RESOURCE TEST		If the income is above 200% FPL the A/R must spend-down to the Medicaid income level. One year guaranteed eligibility if mother is in receipt of Medicaid on delivery. Eligibility can be determined in the 3 months retro to obtain the one year extension.
CHILDREN AGE 1 THROUGH 18	133% FPL	1,239	1,677	NO RESOURCE TEST		If the income is above 133% FPL the A/R must spenddown to the Medicaid income level.
UNDER 21, ADC-RELATED AND FNP	MEDICAID LEVEL	800	1,175	NO RESOURCE TEST		FNP parents cannot spenddown.
SINGLES/CHILDLESS COUPLES	MEDICAID STANDARD	750	936	NO RESOURCE TEST		The A/R cannot spend-down income.
LOW INCOME FAMILIES	MEDICAID STANDARD	750	936	NO RESOURCE TEST		The A/R cannot spend-down income.
SSI-RELATED	MEDICAID LEVEL	800	1,175	14,400	21,150	Household size is always one or two.
Qualified Medicare Beneficiary (QMB)	100%FPL	931	1,261	NO RESOURCE TEST		Medicare Part A & B, coinsurance, deductible and premium will be paid if eligible.
COBRA CONTINUATION COVERAGE	100%FPL	931	1,261	4,000	6,000	A/R may be eligible for Medicaid to pay the COBRA premium.
AIDS INSURANCE	185%FPL	1,723	2,333	NO RESOURCE TEST		A/R must be ineligible for Medicaid, including COBRA continuation.
QUALIFIED DISABLED & WORKING INDIVIDUAL	200%FPL	1,862	2,522	4,000	6,000	Medicaid will pay Medicare Part A premium.
SPECIFIED LOW INCOME MEDICARE BENEFICIARIES (SLIMBS)	BETWEEN 100% BUT LESS THAN 120%FPL	931	1,261	NO RESOURCE TEST		If the A/R is determined eligible, Medicaid will pay Medicare Part B premium.
		1,117	1,513			
QUALIFIED INDIVIDUALS (QI-1)	BETWEEN 120% BUT LESS THAN 135% FPL	1,117	1,513	NO RESOURCE TEST		If the A/R is determined eligible, Medicaid will pay Medicare Part B premium.
		1,257	1,703			
FAMILY HEALTH PLUS PARENTS LIVING WITH CHILDREN	150%FPL	1,397	1,892	NO RESOURCE TEST		The A/R must be ineligible for Medicaid. The A/R cannot spend-down to become eligible for Family Health Plus.
SINGLES/CHILDLESS COUPLES	100%FPL	931	1,261			
FAMILY PLANNING BENEFIT PROGRAM (FPBP)	200%FPL	1,862	2,522	NO RESOURCE TEST		Provides Medicaid coverage for family planning services to persons with incomes at or below 200% FPL. Potentially eligible individuals will be screened for eligibility for Medicaid and FHPlus, unless they specifically request to be screened only for FPBP eligibility.
MEDICAID BUY-IN PROGRAM FOR WORKING PEOPLE WITH DISABILITIES (MBI-WPD)	250%FPL	2,328	3,153	20,000	30,000	A/R's with a net income that is at least 150% but at or below 250% FPL will pay a premium. Currently, there is a moratorium on premium payment collection. Otherwise countable retirement accounts are disregarded as resources effective 10/01/11.