

BASIC MEDICAID ELIGIBILITY

GROUP	BENEFITS	BASIC REQUIREMENTS **					SPECIAL PROVISIONS Updated 07/18
		BASIC ELIGIBILITY REQUIREMENT	WHOSE INCOME and RESOURCES COUNT	MONTHLY INCOME LIMIT Updated 04/19	RESOURCE LIMIT Updated 04/19	DEDUCTIBLE/SPEND DOWN	
S-ABD, SSI cases	Full Medicaid coverage only if a Medicaid application is submitted	<ul style="list-style-type: none"> Beneficiaries receiving Supplemental Security Income (SSI) -Federal cash assistance program for the aged, blind, and disabled, are automatically entitled to Medicaid. No separate application or Medicaid determination is required. Beneficiaries receiving State/County Special Assistance (SA) - program for aged and disabled individuals who are primarily in adult care facilities- includes Medicaid eligibility. Beneficiaries receiving Special Assistance In-Home- the individual must be determined Medicaid categorically needy eligible. 					
Aged MAA	Full Medicaid Coverage	Age 65 or older	Spouse's income and resources if live together	100% of Poverty Level 1 – \$1,041 2 – \$1,410	SSI Limits 1 - \$2,000 2 - \$3,000	YES	<p>If income exceeds income limit and the indicator is "yes," the individual or family may be able to be eligible for Medicaid if they can meet a deductible. See discussion of <u>Medical Deductible</u> on page 2 of this same column.</p> <p>Individuals in nursing facilities generally do not have to meet a deductible to be eligible for Medicaid. However, they must pay all of their monthly income, less a \$30 personal needs allowance and the cost of medical expenses not covered by Medicaid or other insurance to the nursing facility. Medicaid pays the remainder of their cost of care.</p> <p>Protection of income for spouse at home: When an individual is in a nursing facility and has a spouse living at home, a portion of the income of the spouse in the facility may be protected to bring the income of the spouse at home up to a level specified by federal law. Currently, that amount is \$2,057.50/mo and can be as much as \$3,160.50 depending upon at-home spouse's cost for housing. The amount protected for the at-home spouse is not counted in determining the eligibility of the spouse in the nursing facility.</p> <p>Protection of resources for spouse at home: Additionally, the countable resources of the couple are combined and a portion is protected for the spouse at home. That portion is ½ the total value of the countable resources, but currently not less than \$25,284 or more than \$126,420. The amount protected for the at-home spouse is not countable in determining the eligibility of the spouse in the facility.</p> <p>Transfer of resources: When a person gives away resources and does not receive compensation with a value at least equal to that of the resources given away, he may be penalized. Medicaid will not pay for care in a nursing facility or care provided under the Community Alternative Program (CAP) or other in-home health services & supplies for a period of time that depends on the value of the transferred resource.</p>
Blind MAB	Full Medicaid Coverage	Blind by Social Security Standards	Spouse's income and resources if live together. Parents' income and resources if under age 18 and live with parents.	100% of Poverty Level 1 – \$1,041 2 – \$1,410	SSI Limits 1 - \$2,000 2 - \$3,000	YES	
Disabled MAD	Full Medicaid Coverage	Disabled by Social Security Standards	Spouse's income and resources if live together. Parents' income and resources if under age 18 and live with parents.	100% of Poverty Level 1 – \$1,041 2 – \$1,410	SSI Limits 1 - \$2,000 2 - \$3,000	YES	
Health Care for Working Disabled (HCWD) MAD	Full Medicaid Coverage	* <u>See Footnote</u>	Spouse's income and resources if live together. Parents' income and resources if under age 18 and live with parents.	150% of Poverty Level 1- \$1,562 2- \$2,114	Min. CSR limit \$25,284	NO	
Qualified Medicare Beneficiaries MQB-Q	Payment of Medicare premiums and deductibles and co-insurance charges for Medicare covered services	Entitled to Medicare Parts A & B	Spouse's income and resources if live together. Parents' income and resources if under age 18 and live with parents.	100% of Poverty Level 1 – \$1,041 2 – \$1,410	1 - \$7,730 2 - \$11,600	NO	
Specified Low Income Medicare Beneficiaries MQB-B	Payment of Medicare Part B premium	Entitled to free Medicare Part A	Spouse's income and resources if live together. Parents' income and resources if under age 18 and live with parents.	120% of Poverty Level 1 - \$1,249 2 - \$1,691	1 - \$7,730 2 - \$11,600	NO	
Qualifying Individual MQB-E	Payment of Medicare Part B Premiums	Entitled to free Medicare Part A	Spouse's income and resources if live together. Parents' income and resources if under age 18 and live with parents.	135% of Poverty Level 1 - \$1,406 2 - \$1,903	1 - \$7,730 2 - \$11,600	NO	
Working Disabled MWD	Payment of Medicare Part A premiums	Lost entitlement to free Medicare A due to earnings but still has disabling impairment.	Spouse's income and resources if live together. Parents' income and resources if under age 18 and live with parents.	200% of Poverty Level 1 - \$2,082 2 - \$2,819	2X SSI Limits 1 - \$4,000 2 - \$6,000	NO	

* For Basic Coverage, the beneficiary does not have to meet the Social Security SGA requirement to be disabled. For Medically Improved coverage, the beneficiary does not have to meet the Social Security medical requirements for disability.

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Families & Children MAF	Full Medicaid Coverage	Parents/Caretaker Relatives, and the spouse must be living with and caring for a child to whom they are related who is under age 18. Children must be under age 21.	MAGI Methodology.	1 - \$434 2 - \$569 3 - \$667 4 - \$744 5 - \$824	\$3,000	YES	If income exceeds income limit and the indicator is "yes" the individual or family may be able to be eligible for Medicaid if they he can meet a deductible Medicaid Deductible: When an individual/family is ineligible for Medicaid due to income over the income limit, they may become eligible by meeting a Medicaid deductible. The deductible is determined by subtracting the Medically Needy Income Limit (MNIL) (see limits below) from the countable monthly income to determine the monthly excess income. Medicaid deductibles are generally determined for 6 months, so the monthly excess income is multiplied by 6 to determine the 6-mo. deductible. Once medical bills for which they are responsible totaling the amount of the deductible are incurred, they are authorized for the rest of the 6-mo. period. Medicaid cannot pay for any of the bills applied to the deductible.
Pregnant Women MPW	Coverage is limited to treatment for conditions that affect the pregnancy	A self-attestation of pregnancy and due date can be accepted as proof of pregnancy unless the county has information that contradicts the attestation.	MAGI Methodology	196% of Poverty Level 1 - \$2,041 2 - \$2,762 3 - \$3,484 4 - \$4,206 5 - \$4,928	NO	NO	When determining the family size for the pregnant woman the unborn child is included. For example, the family size for a single pregnant woman would be 2.
Children under age 6 MIC	Full Medicaid Coverage	Must be under age 6.	MAGI Methodology	210% of Poverty Level 1 - \$2,186 2 - \$2,960 3 - \$3,733 4 - \$4,507 5 - \$5,280	NO	NO	
Children age 6 thru 18 MIC	Full Medicaid Coverage	Must be age 6 thru age 18.	MAGI Methodology	133% of Poverty Level 1 - \$1,385 2 - \$1,875 3 - \$2,365 4 - \$2,854 5 - \$3,344	NO	NO	
Title IV-E Children IAS	Full Medicaid Coverage	IV-E Adoption Subsidy and Foster Care for a child residing in NC and receiving IV-E Foster Care regardless of the state providing assistance.	There is no income.		NO	NO	Resource limit: All deductible cases have a resource limit: \$3000 for families and children and \$2,000 (1) and \$3000 (2) for aged, blind and disabled. MNIL: 1 - \$242 2 - \$317 3 - \$367 4 - \$400 5 - \$433
State Foster Care Children	Full Medicaid Coverage	A child under 21 and currently in the legal custody of the state sponsored foster care and ineligible for Title IV-E.	MAGI Methodology	1. MAGI 2. MAF-M 3. NCHC	\$3000 (MAF)	YES	
Expanded Foster Care	Full Medicaid Coverage	Be 18-20 and had been in Foster Care at age 18 and enrolled in Medicaid program.	MAGI Methodology	5. MAGI (excluding NCHC) 2. MAF-M	\$3000 (MAF)	YES	

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Non-IV-E/ Special Needs Adoption	Full Medicaid Coverage	Children with medical or rehabilitative needs, which are barriers to adoption are considered special needs adoption children. These children are ineligible through Title IV-E because at the time of placement in foster care they did not meet IV-E requirements.	MAGI Methodology	1. MAGI 2. MAF-M 3. Authorize ongoing Medicaid (**See Footnote) 4. Evaluate NCHC if not eligible for any categories above.	\$3000 (MAF)	YES	
MFC- Medicaid for Former Foster Care	Full Medicaid Coverage	Be age 18-26 and have been in foster care at age 18 and enrolled in NC Medicaid.	There is no income.		NO	NO	
Breast & Cervical Cancer Medicaid MAF-W	Full Medicaid Coverage	Be under the age 65 and not enrolled in any creditable medical insurance. Breast and Cervical Cancer Control Program (BCCCP) provider determines eligibility for Breast and Cervical Cancer Medicaid (BCCM).	There is no income (BCCM).		NO	NO	
Family Planning MAF-D	Family Planning Program	NO AGE LIMIT	MAGI Methodology	195% of Poverty Level 1 - \$2,030 2 - \$2,748 3 - \$3,467 4 - \$4,185 5 - \$4,903	NO	NO	If a beneficiary's income increases to more than 195%, he/she will be ineligible for family planning coverage.
NC Health Choice (NCHC)	Medicaid-equivalent coverage with four exceptions: no long-term care, no EPSDT, no non-emergency medical transportation, and restricted dental.	Must be age 6 through 18, ineligible for Medicaid, Medicare, or other federal government-sponsored health insurance, be uninsured, a NC resident.	MAGI Methodology	211% of Poverty Level 1 - \$2,197 2 - \$2,974 3 - \$3,751 4 - \$4,528 5 - \$5,305	NO	NO	Beneficiaries with household income over 159% of poverty level must pay enrollment fee. 1- \$1,655.01 2- \$2,241.01 3- \$2,827.01 4- \$3,412.01 5- \$3,998.01

** If ineligible under MAGI, the child must have been enrolled in or eligible for Medicaid immediately before the adoption agreement, is under a Non-IV-E state adoption agreement or determined to be special needs by the State adoption assistance agreement.

***This chart addresses benefits and basic eligibility requirements. Other requirements (such as citizenship/alien status, incarceration, & state residence) which can also affect eligibility, or the level of benefits are not reflected on this chart. Revised 4/1/2019