BASIC MEDICAID ELIGIBILITY

	BENEFITS	BASIC REQUIREMENTS **						
GROUP		BASIC ELIGIBILITY REQUIREMENT	WHOSE INCOME and RESOURCES COUNT	MONTHLY INCOME LIMIT Updated 04/17	RESOURCE LIMIT Updated 04/17	DED	UCTIBLE/SPEND DOWN	SPECIAL PROVISIONS Updated 07/16
S-ABD, SSI cases	Full Medicaid coverage only if a Medicaid application is submitted	 Beneficiarie: disabled, are Beneficiarie: primarily in a Beneficiarie: eligible. 						
Aged MAA	Full Medicaid Coverage	Age 65 or older	Spouse's income and resources if live together	100% of Poverty Level 1 – \$1,005 2 – \$1,354	SSI Limits 1 - \$2,000 2 - \$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 can meet a deductible. See discussion of <u>Medical</u> <u>Deductible</u> on page 2 of this same column. 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.	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 \$2,003/mo and can be as much as \$2,981 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. 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 \$24,180 or more than \$120,900. The amount protected for the at-home spouse is not countable in determining the eligibility of the spouse in the facility.
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 – \$1,005 2 – \$1,354	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 – \$1,005 2 – \$1,354	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- \$1,508 2- \$2,030	Min. CSRP limit \$24,180	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 – \$1,005 2 – \$1,354	1 - \$7,390 2 - \$11,090	NO		
Specified Low Income Medicare Beneficiaries MQB-B	Payment of Medicare	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 - \$1,206 2 - \$1,624	1 - \$7,390 2 - \$11,090	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 - \$1,357 2 - \$1,827	1 - \$7,390 2 - \$11,090	NO		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
	NOTE: Total number of e	TE: Total number of eligible individuals is limited to available funds.						may be penalized. Medicaid will
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 - \$2,010 2 - \$2,707	2X SSI Limits 1 - \$4,000 2 - \$6,000	NO		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.
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* 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.

		BASIC REQUIREMENTS **						
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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.	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 <u>Medicaid Deductible</u> :	
		Children must be under age 21.					When an individual/family is ineligible for Medicaid due to	
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 - \$1,970 2 - \$2,653 3 - \$3,336 4 - \$4,018 5 - \$4,701	NO	NO	Ineligible for Medicald 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.	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- \$2,111 2 - \$2,842 3 - \$3,574 4 - \$4,305 5 - \$5,037	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 - \$1,337 2 - \$1,800 3 - \$2,264 4 - \$2,727 5 - \$3,190	NO	NO	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.	
Title IV-E Children IAS	Full Medicaid Coverage	Be an Title IV-E adoptive or foster child	Medicaid eligibility is automatic. There is no income or resource determination.			NO	Resource limit: All deductible cases have a resource limit: \$3000	Adoptive Parents income of special needs children adopted under state adoption agreements is not counted when determining Medicaid eligibility.
State Foster Care Children (HSF)	Full Medicaid Coverage	If not eligible for HSF, then evaluate for other children's programs.				NO	MNIL: for families 1 - \$242 and children 2 - \$317 (1) and	
Expanded Foster Care HSF, IAS	Full Medicaid Coverage	Be 18-20 and had been a Title IV-E or State foster child on 18 th birthday	There is no income determination	None	NO	NO	3 - \$367 \$3000 (2) for 4 - \$400 aged, blind 5 - \$433 and disabled.	

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MFC- Medicaid for Former Foster Care	Full Medicaid Coverage	Be age 18-25 and was in NC foster care prior to age 18 and enrolled in NC Medicaid	There is no income determination	None	NO	NO		
Breast & Cervical Cancer Medicaid MAF-W	Full Medicaid Coverage	Must be a woman aged 18 to 64 who has been screened and enrolled in the NC Breast & Cervical Cancer control Program and is otherwise ineligible for Medicaid.	There is no income determination.	NO	NO	NO	NO	To be eligible under the Breast and Cervical cancer Medicaid program, the woman cannot have any type of medical insurance including Medicare
Family Planning MAF-D	Family Planning exams & services. Screening & treatment for STI. Screenings for HIV. Sterilizations.	NO AGE LIMIT	MAGI Methodology	195% of Poverty Level 1 - \$1,960 2 - \$2,639 3 - \$3,319 4 - \$3,998 5 - \$4,677	NO	NO	NO	If a beneficiaries 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.	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 - \$2,121 2 - \$2,856 3 - \$3,591 4 - \$4,326 5 - \$5,061	NO	NO	NO	Beneficiaries with household income over 159% of poverty level must pay enrollment fee. 1- \$1,598.01 2- \$2,152.01 3- \$2,706.01 4- \$3,260.01 5- \$3,814.01

**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 3/10/2017