

**MAABD ELIGIBILITY OVERVIEW CHART (Effective 04/01/16)**

Aid Program/ Category	SSI	Non-SSI					
	MAA, MAD, MAB	MAA, MAD, MAB (Categorically Needy)	MAA, MAD, MAB (Medically needy)	HCWD (Unearned Income Limit)	MQB-Q	MQB-B	MQB-E
<b>Income Limit -- Full</b>	1 - \$733 ----- 2 - \$1,100	1 - \$990 ----- 2 - \$1335	1 - \$242 ----- - 2 - \$317	1 - \$1485 ----- 2- \$2003	1 - \$990 ----- 2 - \$1335	1 - \$991.01-1188 ----- 2 - \$1335.01-1602	1 - \$1188.01-1337 ----- 2 - \$1602.01-1803
<b>Income Limit -- 1/3 reduced</b>	1 - \$489 ----- 2 - \$733	1 - \$661 ----- 2 - \$891	1 - \$161 ----- - 2 - \$211	1 - \$991 ----- 2 - \$1336	1 - \$661 ----- 2 - \$891	1 - \$661.01-793 ----- 2 - \$891.01-1069	1 - \$793.01-892 ----- 2 - \$1069.01-1202
<b>Reserve Limit</b>	1 - \$2,000 ----- 2 - \$3,000	1 - \$2,000 ----- 2 - \$3,000	1 - \$2,000 ----- 2 - \$3,000	\$23,844 ----- \$23,844	1 - \$7,280 ----- 2 - \$10,930	1 - \$7,280 ----- 2 - \$10,930	1 - \$7,280 ----- 2 - \$10,930
<b>Classification</b>	C (Q if Medicare)	N (Q if Medicare)	M (Q or B if Medicare)	N (Q or B if Medicare)	Q	B	E
<b>Individuals covered</b>	SSI recipients	1. Individuals with income at or below 100% of poverty and resources below "C" limits who are not receiving SSI.  2. Passalongs	Individuals not financially eligible for SSI & don't meet criteria for N	Individuals with unearned income at or below 150% of FPL. There is no limit on total countable income. Individuals with total countable income above 150% of FPL pay an enrollment fee. Individuals with total countable income above 200% of FPL pay a monthly premium and enrollment fee.	Medicare beneficiaries with income under 100% of poverty	Medicare beneficiaries with income between 100% and 120% of poverty	Medicare beneficiaries with income between 120% and 135% of poverty
<b>Coverage</b>	Full	Full	Full	Full	Medicare premiums deductibles & coinsurance only	Medicare Part B premiums only	Medicare Part B premiums only
<b>Where to apply</b>	Ongoing = automatic DSS - retroactive	County DSS	County DSS	County DSS	County DSS	County DSS	County DSS
<b>Where to appeal</b>	SSA - ongoing DSS - retroactive	County DSS	County DSS	County DSS	County DSS	County DSS	County DSS
<b>Deductible</b>	Never	Never	Possible	Never	Never	Never	Never
<b>Retro</b>	Yes	Yes	Yes	Yes	No	Yes	Yes
<b>Length of ongoing CP</b>	As long as receives SSI	12 months	6 months	12 months	12 months	12 months	Month of application through December of the current calendar year