

NON-MAGI POPULATION						
CATEGORY	INCOME COMPARED	HOUSEHOLD SIZE				SPECIAL NOTES
UNDER 21, ADC-RELATED		1 842	2			
,	MEDICAID LEVEL MEDICAID LEVEL			NO RESOURCE TEST 15,150 22,200		Household size is always one or two.
SSI-RELATED	MEDICAID LEVEL	842	1,233	15,150	22,200	Household size is always one of two.
Qualified Medicare Beneficiary (QMB)	AT OR BELOW 100% FPL	1,012	1,372			Medicare Part A & B, coinsurance, deductible and premium will be paid if eligible.
COBRA CONTINUATION COVERAGE	100% FPL	1,012	1,372	4,000	6,000	A/R may be eligible for Medicaid to pay the COBRA premium.
AIDS INSURANCE	185% FPL	1,872	2,538			A/R must be ineligible for Medicaid, including COBRA continuation.
QUALIFIED DISABLED & WORKING INDIVIDUAL	200% FPL	2,024	2,744	4,000	6,000	Medicaid will pay Medicare Part A premium.
SPECIFIED LOW INCOME MEDICARE BENEFICIARIES (SLIMBS)	OVER 100% BUT BELOW 120% FPL	1,012	1,372	NO RESOURCE TEST		If the A/R is determined eligible, Medicaid will pay Medicare Part B premium.
		1,214	1,646			
QUALIFIED INDIVIDUALS (QI-1)	GREATER THAN OR EQUAL TO 120% BUT LESS THAN 135% FPL	1,214	1,646	NO RESOURCE TEST		If the A/R is determined eligible, Medicaid will pay Medicare Part B premium.
		1,366	1,852			
MEDICAID BUY-IN PROGRAM FOR WORKING PEOPLE WITH DISABILITIES (MBI-WPD)	250%	2,530	3,430	20,000	30,000	Countable retirement accounts are disregarded as resources effective 10/01/11.