



NON-MAGI POPULATION

CATEGORY	INCOME COMPARED TO	HOUSEHOLD SIZE		RESOURCE LEVEL		SPECIAL NOTES
		1	2	1	2	
		UNDER 21, ADC-RELATED	MEDICAID LEVEL	859	1,267	
SSI-RELATED	MEDICAID LEVEL	859	1,267	15,450	22,800	Household size is always one or two.
COBRA CONTINUATION COVERAGE	100% FPL	1,041	1,410	4,000	6,000	A/R may be eligible for Medicaid to pay the COBRA premium.
AIDS INSURANCE	185% FPL	1,926	2,607	NO RESOURCE TEST		A/R must be ineligible for Medicaid, including COBRA continuation.
QUALIFIED MEDICARE BENEFICIARY (QMB)	AT OR BELOW 100% FPL	1,041	1,410	NO RESOURCE TEST		If the A/R is determined eligible, Medicaid will pay Part B and/or A premium, coinsurance and deductible.
SPECIFIED LOW-INCOME MEDICARE BENEFICIARY (SLMB)	OVER 100% BUT BELOW 120% FPL	1,041	1,410	NO RESOURCE TEST		If the A/R is determined eligible, Medicaid will pay Medicare Part B premium. The A/R must have part A to qualify.
		1,249	1,691			
QUALIFIED INDIVIDUALS (QI)	GREATER THAN OR EQUAL TO 120% BUT LESS THAN 135% FPL	1,249	1,691	NO RESOURCE TEST		If the A/R is determined eligible, Medicaid will pay Medicare Part B premium. The A/R must have part A to qualify.
		1,406	1,903			
QUALIFIED DISABLED & WORKING INDIVIDUAL (QDWI)	200% FPL	2,082	2,819	4,000	6,000	If the A/R is determined eligible, Medicaid will pay Medicare Part A premium.
MEDICAID BUY-IN PROGRAM FOR WORKING PEOPLE WITH DISABILITIES (MBI-WPD)	250% FPL	2,603	3,523	20,000	30,000	Countable retirement accounts are disregarded as resources effective 10/01/11.