

MAABD ELIGIBILITY OVERVIEW CHART (Effective 04/01/2023)

	SSI	Non-SSI					
Aid Program/ Category	MAA, MAD, MAB	MAA, MAD, MAB (Categorically Needy)	MAA, MAD, MAB (Medically needy)	HCWD	MQB-Q	MQB-B	MQB-E
Income Limit -- Full	1 - \$914 ----- 2 - \$1,371	1 - \$1,215 ----- 2 - \$1,644	1 - \$242 ----- 2 - \$317	1 - \$1,823 (150%) \$2,430 (200%) ----- 2 - \$2,465 (150%) \$3,287 (200%)	1 - \$1,215 ----- 2 - \$1,644	1 - \$1,215.01-1,458 ----- 2 - \$1,644.01-1,972	1 - \$1,458.01-1,641 ----- 2 - \$1,972.01-2,219
Income Limit -- 1/3 reduced	1 - \$609 ----- 2 - \$914	1 - \$811 ----- 2 - \$1,096	1 - \$161 ----- 2 - \$211	1 - \$1,216 (150%) \$1,621 (200%) ----- 2 - \$1,644 (150%) \$2,192 (200%)	1 - \$811 ----- 2 - \$1,096	1 - \$811.01-973 ----- 2 - \$1,096.01-1,315	1 - \$973.01-1,094 ----- 2 - \$1,315.01-1,480
Reserve Limit	1 - \$2,000 ----- 2 - \$3,000	1 - \$2,000 ----- 2 - \$3,000	1 - \$2,000 ----- 2 - \$3,000	\$29,724 ----- \$29,724	1 - \$9,090 ----- 2 - \$13,630	1 - \$9,090 ----- 2 - \$13,630	1 - \$9,090 ----- 2 - \$13,630
<i>Classification</i>	C (Q if Medicare)	N (Q if Medicare)	M (Q or B if Medicare)	N (Q or B if Medicare)	Q	B	E
<i>Individuals covered</i>	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
<i>Coverage</i>	Full	Full	Full	Full	Medicare premiums deductibles & coinsurance only	Medicare Part B premiums only	Medicare Part B premiums only
<i>Where to apply</i>	Ongoing = automatic DSS - retroactive	County DSS	County DSS	County DSS	County DSS	County DSS	County DSS
<i>Where to appeal</i>	SSA - ongoing DSS - retroactive	County DSS	County DSS	County DSS	County DSS	County DSS	County DSS
<i>Deductible</i>	Never	Never	Possible	Never	Never	Never	Never
<i>Retro</i>	Yes	Yes	Yes	Yes	No	Yes	Yes
<i>Length of ongoing CP</i>	As long as beneficiary receives SSI	12 months	6 months	12 months	12 months	12 months	Month of application through December of the current calendar year