



NON-MAGI POPULATION

CATEGORY	INCOME COMPARED TO	HOUSEHOLD SIZE		RESOURCE LEVEL		SPECIAL NOTES
		1	2	1	2	
UNDER 21, ADC-RELATED	MEDICAID LEVEL	842	1,233	NO RESOURCE TEST		
SSI-RELATED	MEDICAID LEVEL	842	1,233	15,150	22,200	Household size is always one or two.
Qualified Medicare Beneficiary (QMB)	AT OR BELOW 100% FPL	1,005	1,354	NO RESOURCE TEST		Medicare Part A & B, coinsurance, deductible and premium will be paid if eligible.
COBRA CONTINUATION COVERAGE	100% FPL	1,005	1,354	4,000	6,000	A/R may be eligible for Medicaid to pay the COBRA premium.
AIDS INSURANCE	185% FPL	1,860	2,504	NO RESOURCE TEST		A/R must be ineligible for Medicaid, including COBRA continuation.
QUALIFIED DISABLED & WORKING INDIVIDUAL	200% FPL	2,010	2,707	4,000	6,000	Medicaid will pay Medicare Part A premium.
SPECIFIED LOW INCOME MEDICARE BENEFICIARIES (SLIMBS)	OVER 100% BUT BELOW 120% FPL	1,005	1,354	NO RESOURCE TEST		If the A/R is determined eligible, Medicaid will pay Medicare Part B premium.
		1,206	1,624			
QUALIFIED INDIVIDUALS (QI-1)	GREATER THAN OR EQUAL TO	1,206	1,624	NO RESOURCE TEST		If the A/R is determined eligible, Medicaid will pay Medicare Part B premium.
	120% BUT LESS THAN 135% FPL	1,357	1,827			
MEDICAID BUY-IN PROGRAM FOR WORKING PEOPLE WITH DISABILITIES (MBI-WPD)	250%	2,513	3,384	20,000	30,000	Countable retirement accounts are disregarded as resources effective 10/01/11.