

## Common Medicaid Eligibility Categories in Pennsylvania

### Federal Eligibility Categories

GROUP <sup>1</sup>	BENEFITS <sup>2</sup>	ELIGIBILITY REQUIREMENTS <sup>3</sup>	INCOME LIMIT <sup>4</sup>	RESOURCE LIMIT <sup>5</sup>
Children under age 1	All Medically Necessary Services	Be under age 1	185% of FPL	None
Children age 1-5	All Medically Necessary Services	Be at least age 1, but under age 6	133% of FPL	None
Children age 6-19	All Medically Necessary Services	Be age 6-19	100% of FPL	None
Title IV-E Children	All Medically Necessary Services	Be a Title IV-E adoptive or foster child	None	None
Disabled Children	All Medically Necessary Services	Meet the Social Security Administration (SSA) level of disability.	None	None
Pregnant Women	Full Medicaid benefits for duration of pregnancy and through the postpartum period. (60 days after delivery and any additional days to complete the last month of coverage)	Pregnancy verified  (Note: When determining the family size for the income limit, the unborn child is included.)	185% of FPL	None
Temporary Assistance to Needy Families (TANF) Recipients	Children receive full Medicaid benefits, but adults have a less comprehensive benefit package.	Meet the requirements in effect for the Aid to Families with Dependent Children program (AFDC) in 1996, when the AFDC program was terminated and replaced by Temporary Assistance for Needy Families (TANF). Receive TANF cash assistance or meet similar criteria.	25% of FPL	None
Disabled Adults	Full Medicaid benefits, including payment of premiums if eligible for Medicare.	Disabled by Social Security standards	100% of FPL	\$2,000
Workers with Disabilities	Full Medicaid benefits, including payment of premiums if eligible for Medicare.	Age 16 to 64 with a documented disability that would satisfy the Social Security Administration (SSA) definition of a disability. Eligibility is determined by SSA if not receiving Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI).  Work and receive compensation for the work.  Premium Payment: costs 5% of countable income.	250% of FPL	\$10,000

**Federal Eligibility Categories (continued)**

GROUP	BENEFITS	ELIGIBILITY REQUIREMENTS	INCOME LIMIT	RESOURCE LIMIT
Breast and Cervical Cancer Prevention and Treatment Program	Full Medicaid benefits for duration of treatment	Women, under the age of 65, that are uninsured or underinsured. Screened, diagnosed and need treatment for breast or cervical cancer or a pre-cancerous condition of the breast or cervix through a Center for Disease Control approved Healthy Woman site or Prevention's National Breast and Cervical Cancer Early Detection Program.	250% of FPL	None
Supplemental Security Income (SSI) Recipients	Full Medicaid benefits	Receive or are eligible for SSI payments because of age (65 and older), are blind or disabled according to Social Security Disability standards.	76% of FPL	\$2,000/\$3,000
Aged	Full Medicaid benefits, including payment of Medicare premiums	Age 65 and older and have Medicare	76%–100% of FPL	\$2,000/\$3,000
Qualified Medicare Beneficiary Medicare Cost Sharing Program	Payments of Medicare Part A and Part B premiums, deductibles and co-insurance	Entitled to Medicare Parts A and B	100% of FPL	\$4,000/\$6,000
Specified Low Income Medicare Beneficiaries	Payment of Medicare Part B premium	Entitled to Medicare Parts A and B	More than 100% of FPL, but less than 120% of FPL	\$4,000/\$6,000
Qualified Individuals: Group 1	Payment of Medicare Part B premium	Entitled to Medicare Parts A and B	More than 120% of FPL, but less than 135% of FPL	\$4,000/\$6,000
Nursing Facility or Long-term Care Services in the Community (waiver)	Full Medicaid benefits	Qualify for Medically Necessary Long-term Care Services	Limited to the monthly private-pay rate at the nursing facility	\$2,400
Medically Needy	Limited Medicaid benefits	Individuals who would be eligible for Medicaid under one of the mandatory or optional groups, except that their income and/or resources are above the eligibility level. If their medical spending is very high and brings them down to the income and/or resource limits, they can receive care through Medicaid.		
• Children			33%–50% of FPL	None
• Pregnant Women			33% of FPL	None
• TANF Families			33% of FPL	None
• Disabled			50% of FPL	\$2,400/\$3,200
• Seniors			50% of FPL	\$2,400/\$3,200

## State Eligibility Categories

GROUP	BENEFITS	ELIGIBILITY REQUIREMENTS	INCOME LIMIT	RESOURCE LIMIT
General Assistance	State funded benefits that are limited.	<i>Categorically Needy:</i> Individuals who receive state funded cash benefits and meet specifically defined non-financial criteria.	25% of FPL	\$250/\$1,000
		<i>Medically Needy:</i> Individuals who would be eligible for Medicaid, except that their income and/or resources are above the eligibility level. If their medical spending is very high and brings them down to the income and resource limits, they can receive Medicaid benefits through state funds.  Examples: Individuals undergoing drug and alcohol treatment; victims of domestic violence; individuals with documented physical or mental disabilities lasting less than 12 months; and two-parent applicant recipient groups not meeting requirements for other categories.	50% of FPL	\$2,400/\$3,200
Blind	Limited Medicaid benefits. Excludes inpatient hospital; lab and x-ray; and intermediate care.	Receive state blind pension payments.  Meet blind disability standards- vision with best correcting lens does not exceed 3/60 or 10/200 or tunnel vision severe enough to be considered medically blind.	\$4,260	\$7,500

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These data are as of March 27, 2007. It is important to note that eligibility categories and income and resource levels are subject to change.

<sup>1</sup> Description of Medicaid recipients by broad eligibility category.

<sup>2</sup> Description of benefits that particular Medicaid eligibility category receives. Please visit our web site at <http://www.pamedicaid.pitt.edu> to obtain further information on Medicaid benefits and services.

<sup>3</sup> Description of the specific eligibility requirements related to that particular Medicaid eligibility category. In addition to those listed, most Pennsylvania Medicaid recipients must also be a United States citizen or a qualified lawful alien and be a Pennsylvania resident.

<sup>4</sup> Description of the countable income limit for that particular Medicaid eligibility category. "FPL" stands for the Federal Poverty Level.

<sup>5</sup> Description of the countable resource limit for that particular Medicaid eligibility category. If a category contains two figures and a slash, the first figure represents the resource limit for an individual and the second figure represent the resource limit for two individuals.