



# EXPANSION PROGRAM ELIGIBILITY REFERENCE GUIDE

	<b>Working Adults with Disabilities (WAwD)</b>	<b>Children with Disabilities (CBwD)</b>	<b>Adults Without Dependent Children (AwDC)*</b>
<b>Program Effective Date</b>	March 1, 2012	July 1, 2012	May 1, 2012
<b>Known as</b>	Adult Buy-In	Children's Buy-In	AwDC
<b>HLPG</b>	AM	FM	AM
<b>Age Requirement</b>	Ages 16 through 64	Children under age 19	Ages 19 through 64
<b>Household Size</b>	Only includes applicant	Includes entire family	Includes spouse and dependent children *
<b>Income Limit</b>	Income up to <b>450%</b> of current Federal Poverty Level (FPL) based on a household size of 1 (household size only includes applicant)	Income up to <b>300%</b> of current FPL based on household size	Income up to <b>10%</b> of current FPL based on household size
<b>Spouse's Income</b>	<b>IS NOT</b> countable	<b>IS</b> countable within the household	<b>IS</b> countable

\* A dependent child refers to children that are Medicaid eligible. Adults may have children that are not eligible for Medicaid.



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<b>Earned Income Disregards</b>	<b>Adult Medical (AM)</b> income disregards apply (-\$65/2)	<b>Family Medicaid (FM)</b> income disregards apply (-\$90)	<b>Earned</b> income disregards apply (-\$90)
<b>Unearned Income Disregards</b>	<b>AM</b> income disregards apply (-\$20)	<b>NO</b> unearned income disregard; <b>DOES</b> apply 33% disregard to total household income	<b>Unearned</b> income disregards apply (-\$20)
<b>Employment</b>	<b>IS</b> required	<b>IS NOT</b> allowed between ages 16 through 18 (if the child is employed, they may be eligible for Adult Buy-In)	<b>IS NOT</b> required
<b>Resources</b>	<b>ARE NOT</b> countable	<b>ARE NOT</b> countable	<b>ARE NOT</b> countable
<b>Retroactive Coverage</b>	<b>IS</b> available (not prior to 3/1/12)	<b>IS</b> available (not prior to 7/1/12)	<b>IS NOT</b> available
<b>Disability</b>	<b>IS</b> Required	<b>IS</b> Required	<b>IS NOT</b> Required
<b>Citizenship Status</b>	Must meet <b>ALL</b> requirements	Must meet <b>ALL</b> requirements	Must meet <b>ALL</b> requirements
<b>Pregnancy</b>	<b>CAN</b> be pregnant	<b>CAN</b> be pregnant	<b>CANNOT</b> be pregnant



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<b>Medicare Eligibility</b>	CAN be enrolled	CAN be enrolled	CANNOT be enrolled
<b>Private Insurance</b>	CAN be enrolled	CAN be enrolled	CAN be enrolled
<b>Current Medicaid Eligibility Applicant Status</b>	<p>CANNOT receive aid in another Medicaid category including Child Health Plan <i>Plus</i> (CHP+)</p> <p>CAN receive aid in the Qualified Medicare Beneficiary (QMB) or Medicare Savings Program (MSP) category</p>	<p>CANNOT receive aid in another Medicaid category</p> <p>CAN receive aid in the Qualified Medicare Beneficiary (QMB) or Medicare Savings Program (MSP) category</p> <p>CAN receive aid in Child Health Plan <i>Plus</i> and switch to CBwD</p>	CANNOT receive aid in another Medicaid category including Child Health Plan <i>Plus</i> (CHP+) or MSP categories
<b>Dependent Child's Current Medicaid Eligibility Status</b>	CAN have a dependent child who is receiving aid in a Medicaid category including CHP+	<b>Not Applicable</b>	<p>CANNOT have a dependent child who is eligible for a Medicaid category including MSP categories</p> <p>CAN have a dependent child who is receiving aid in CHP+*</p>

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<b>Monthly Premium</b>	There <b>IS</b> a premium for this category (managed by the eligibility enrollment vendor)	There <b>IS</b> a premium for this category (managed by the eligibility enrollment vendor)	There is <b>NO</b> premium for this category
<b>Waitlist</b>	There is <b>NO</b> waitlist for this category	There is <b>NO</b> waitlist for this category	There <b>IS</b> a waitlist for this category
<b>Ongoing Case Maintenance</b>	Managed by eligibility site that authorized approval	Managed by eligibility site that authorized approval	Cases with <b>waitlist</b> clients managed by eligibility site that authorized approval  Cases with AwDC clients <b>receiving benefits</b> managed by eligibility enrollment vendor (moved from the waitlist to receiving benefits)
<b>Benefit Begin Date</b>	1 <sup>st</sup> of the month in which the client <b>Applied</b> (not prior to program effective date)	1 <sup>st</sup> of the month in which the client <b>Applied</b> (not prior to program effective date)	1 <sup>st</sup> of the month in which the client is <b>Selected</b> (not prior to program effective date)



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<b>Income Limit Amounts</b>	\$4,198 monthly (Based on 450.999%)	<b>Family Size</b>	<b>Monthly Amount</b>	<b>Family Size</b>	<b>Monthly Amount</b>
		1	\$2,802	1	\$102
		2	\$3,795	2	\$138
		3	\$4,788	3	\$174
		4	\$5,782	4	\$211
		5	\$6,775	5	\$247
		6	\$7,768	6	\$283
		7	\$8,762	7	\$320
		8	\$9,755	8	\$356
		9	\$10,748	9	\$392
		10	\$11,741	10	\$429
				(Based on 300.999%)	