General Eligibility Information About Medicaid

Medicaid helps pay medical bills for low-income individuals who meet eligibility criteria. There are three agencies in Alabama that certify individuals for Medicaid. These agencies are the Social Security Administration, the Department of Human Resources, and the Alabama Medicaid Agency. Each of these agencies certifies certain groups of individuals for Medicaid based on their circumstances.

The Alabama Medicaid Agency certifies individuals for the following programs:
**MAGI: Pregnant Women/Plan First and Children Program** - Pregnant women and children under age 19 in families who have income below certain limits may be eligible for Medicaid.

Income is based on 146% (the 5% FPL disregard is included) of the Federal Poverty Level (FPL) for pregnant women/Plan First and children ages 0 – 18 effective 2/2017. (For example, the income limit for a family of 4 is $2,993). There is no resource test for this program.

**MAGI: Parents and Other Caretaker Relatives Program** - Households with related children under age 19 living in the home, may be eligible for Medicaid if the household has very low income. Income is based on MAGI (Modified Adjusted Gross Income) effective 2/2017. (For example, the income limit for a family of four is $369). There is no resource test for this program.

**Breast and Cervical Cancer Program** - Women under age 65 who have been screened through the Centers for Disease Control and Prevention’s National Breast & Cervical Cancer Early Detection Program may be eligible for this program. Call 1-877-252-3324 for information about this program. There is no income limit or resource test for this program.

**Institutional Programs:**
**Nursing Home Program** - Medicaid may pay for the cost of nursing home care for individuals meeting certain income, resource, age or disability, and medical criteria. Nursing homes and hospitals usually have Medicaid applications, or you may contact the Medicaid District Office serving the county of the nursing home to apply for this program. Income is based on 300% of the Federal Benefit Rate. The current income limit is $2,205. The resource limit is $2,000.

**Hospital Program** - Medicaid may cover the cost of care for individuals who meet certain income, resource, age or disability, and medical criteria. To qualify, the individual must be institutionalized for 30 continuous days. Contact the Medicaid District Office serving...
the individual’s county of residence to apply for this program. Income is based on 300% of the Federal Benefit Rate. The current income limit is $2,205. The resource limit is $2,000.

**Post Hospital Extended Care (PEC) Program** - Individuals who are hospitalized and are awaiting placement in a nursing home may be eligible for Medicaid. Eligibility requirements are similar to the nursing home requirements. These individuals must be institutionalized for at least 30 continuous days. The individual must also have been under acute care for at least 3 days while in the hospital, but currently does not require acute care. Contact the Medicaid District Office serving the county of the hospital to apply for this program. Income is based on 300% of the Federal Benefit Rate. The current income limit is $2,205 per month. The resource limit is $2,000.

**Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID) Program** - Residents of state facilities for individuals with intellectual disabilities may be eligible to have Medicaid cover the cost of their care. Eligibility requirements are similar to those of the nursing home program. The state facilities have Medicaid applications, or you may contact the Medicaid District Office serving the county of the facility to apply for this program. Income is based on 300% of the Federal Benefit Rate. The current income limit is $2,205 per month. The resource limit is $2,000.

**Home and Community Based Waivers:**

**State of Alabama Independent Living (SAIL) Waiver Program** - Individuals who are at least 18 years of age, and meet the criteria for Medicaid coverage in a nursing home, but prefer to remain at home, may be eligible for full Medicaid coverage at home through the Independent Living Waiver program. Limited funds are available for this waiver. Contact your local Department of Rehabilitation Services to apply for this waiver. Income is based on 300% of the Federal Benefit Rate. The current income limit is $2,205 per month. The resource limit is $2,000.

**Intellectual Disabilities (ID) Waiver Program** - Individuals with a diagnosis of Intellectual Disabilities (ID) may apply for this waiver. These individuals must meet the income, resource, disability, and medical criteria for an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID). These individuals would receive Medicaid coverage in the community and not be placed in an institution. Limited funds are available for this waiver. Contact your local Department of Mental Health to apply for this waiver. Income is based on 300% of the Federal Benefit Rate. The current income limit is $2,205 per month. The resource limit is $2,000.

**HIV/AIDS Waiver Program** - Individuals who are age 21 or above with a primary diagnosis of HIV/AIDS and would be eligible for Medicaid if they were in a medical
institution and who need home and community-based services in order to remain in the community, may be eligible for this program. Contact Area on Agency on Aging at 1-800-243-5463 serving your county of residence to apply for this program. Income is based on 300% of the Federal Benefit Rate. The current income limit is $2,205 per month. The resource limit is $2,000.

**Technology Assisted (TA) Waiver for Adults Program.** Individuals who are 21 years of age or older with complex skilled medical conditions who are ventilator-dependent or who have a tracheostomy. The TA Waiver is a community-based alternative for these adults who would otherwise require the nursing facility level of care if the TA Waiver services were not available. Financial eligibility is limited to those individuals receiving SSI, SSI related protected groups deemed to be eligible for SSI/Medicaid (widow/widower, Disabled Adult Child, Continuous (Pickle) Medicaid), and disabled individuals with income up to 300% of the SSI income level. Contact the Department of Rehabilitation Services to apply for this waiver at 1-800-441-7607. The current income limit is $2,205 per month. The resource limit is $2,000.

**Elderly and Disabled (E&D) Waiver Program** - Individuals who are disabled or elderly and are ineligible for SSI because of deemed income of a spouse or a parent, may apply for this program through one of the agencies listed below. One of these agencies will determine if a slot is available and if the individual meets medical criteria for this waiver. The Medicaid District Office will make an eligibility determination after the agency listed below approves a slot and the individual qualifies medically. The funds available for this waiver are limited. Contact your local Area Agency on Aging at 1-800-243-5463 to apply for this waiver. Income is based on the Supplemental Security Income limit (SSI) which is $755.

**Alabama Community Transition (ACT) Waiver** - Individuals with disabilities or long-term care illnesses who currently reside in an institution and who desire to transition to the home or community setting. This waiver will offer a consumer directed option which will give individuals the opportunity to have greater involvement, control, and choice in identifying, assisting, and managing long term services and supports. You must meet the financial requirement and be eligible for one of the following groups: SSI recipients, disabled individuals with income up to 300% of the SSI income level, individuals determined to be eligible for transition into the community based upon an assessment, individuals that have been in an institution for 90 days or more, and individuals expected to move into the community within 180 days. The current income limit is $2,205 per month. The resource limit is $2,000 as of the first day of each month. Contact the Department of Rehabilitation Services at 1-800-441-7607 to apply for this waiver.

**Living at Home (LAH) Waiver for Persons with Intellectual Disabilities** - Individuals, age 3 and above, who have a diagnosis of intellectual disabilities may apply for this
waiver. These individuals would receive Medicaid coverage in the community and not be placed in an institution. You must meet the financial requirement and be eligible for one of the following groups: SSI recipients, SSI-related protected groups deemed to be eligible for SSI/Medicaid, Low Income Families with Children, Federal or State Adoption Subsidy, and Individuals with income up to 300% of the SSI level. Limited funds are available for this waiver. Contact your local Department of Mental Health to apply for this waiver. For additional information contact the Division of Intellectual Disabilities’ Call Center at 1-800-361-4491.

**Some Medicaid Programs Are Related to Supplemental Security Income (SSI)**

**Eligibility:**
These programs include the Disabled Adult Child Program, the Retroactive SSI Medicaid Program, the Continuous Medicaid (or Pickle) Program, and the Widows or Widowers Program. Income for these programs is based on the SSI limit of $755. The resource limit is $2,000 for an individual or $3,000 for a couple.

**Newborn Program** - Children under 1 year of age, born to mothers certified for Medicaid, may be eligible for Medicaid up to the child’s first birthday. The mother should contact her Medicaid Eligibility Worker or call the Alabama Medicaid Agency at 1-800-362-1504 and ask for the Certification Support Division, SSI contact person. There is no income limit or resource test for this program.

**Disabled Adult Child Program** - An individual whose Supplemental Security Income (SSI) stopped, after he or she attained the age of 18, because he or she began receiving benefits as a Disabled Adult Child, or if SSI stopped as a result of an increase in Social Security benefits as a Disabled Adult Child may be eligible to continue Medicaid coverage. Contact the Medicaid District Office serving your county of residence to apply for this program.

**Retroactive SSI Medicaid Program** - An individual who has incurred medical expenses during the 3-month period prior to receipt of their first SSI check may be eligible for Medicaid coverage during those months. A person has six months after being awarded SSI to apply for Retroactive SSI Medicaid. Contact the Medicaid District Office serving your county of residence to apply for this program.

**Continuous Medicaid (or Pickle) Program** - Individuals who become ineligible for SSI as a result of Social Security cost-of-living increases may be eligible for Medicaid. Any person who received an SSI check and was entitled to Social Security in the same month may be eligible, if the deduction of Social Security cost-of-living increases from the date of SSI termination would make the individual eligible for SSI. Contact the Medicaid District Office serving your county of residence to apply for this program.
**Widows or Widowers Program** - In some instances, it is possible for widows or widowers who are not eligible for Medicare to continue Medicaid eligibility. The widow/widower must be over the age of 50, but not yet 65. He or she must have lost SSI eligibility because his or her Social Security benefits increased above the SSI limit when his or her spouse died. Contact the Medicaid District Office serving your county of residence to apply for this program.

NOTE: You cannot have Medicare and be eligible for this program.

**Some Limited Medicaid Programs Only Supplement Your Medicare Coverage (known as Medicare Savings Programs in Alabama) (income limits effective 2/2017):**

**Qualified Medicare Beneficiary (QMB) Program** - Medicaid may pay Medicare premiums, deductibles, and coinsurance (not to exceed the Medicaid rate) for some low-income Medicare beneficiaries. Individuals whose income is below a certain limit and who have Medicare Part A, may be eligible. Income is based on 100% of the Federal Poverty Level which is $1,025 for an individual or $1,374 for a couple.

**Specified Low-Income Medicare Beneficiary (SLMB) Program** - Medicaid may pay the Medicare Part B premium only for some low-income Medicare beneficiaries. Individuals whose income is below a certain limit, who have Medicare Part A and meet other criteria, may be eligible. Income is based on 120% of the Federal Poverty Level which is $1,025.01 - $1,226.00 for an individual or $1,374.01 - $1,644.00 for a couple.

**Qualifying Individuals-1 (QI-1) Program** - Medicaid may pay the Medicare Part B premium only for some low-income Medicare beneficiaries. The same criteria for the SLMB program apply, except the income limit is higher. Income is based on 135% of the Federal Poverty Level which is $1,226.01 - $1,375.00 for an individual or $1,644.01 - $1,847.00 for a couple.

**Qualified Disabled Working Individuals (QDWI) Program** - Individuals who are under age 65, terminated from Title II Disability Insurance Benefits due to earnings exceeding the Substantial Gainful Activity level, and who continues to have the same physical or mental condition not expected to improve, may be eligible for this program if they are entitled to enroll in Medicare Part A benefits under certain rules. Income is based on 200% of the Federal Poverty Level which is $4,105.00 for an individual or $5,499.00 for a couple.

**NOTE:** These Medicare Savings Programs, QMB, SLMB, QI-1, and QDWI, do not cover drugs.

**The Social Security Administration certifies individuals for the following programs:**
Aged, blind, or disabled persons who have very low income may qualify for cash assistance through the Supplemental Security Income (SSI) program. Individuals eligible for SSI are automatically eligible for Medicaid. To apply for SSI, contact the Social Security Office serving your area.

**The Department of Human Resources certifies individuals for the following program:**
Foster children, children who receive State or Federal Adoption Assistance may also be eligible for Medicaid. Persons should contact the Department of Human Resources (DHR) Office in the county in which they live to apply for this program.

**How to get Medicaid applications:**

Medicaid has a website, www.medicaid.alabama.gov, where you can download an application to apply for Medicaid. From the Home Page, click on “Apply for Medicaid,” then “Applications and Forms.” (For income guidelines, click on “Apply for Medicaid,” then “Qualifying for Medicaid,” then “Medicaid Income Limits.”)

Form 204/205 is for the Elderly & Disabled Programs.
Form 211 is for the Medicare Related Programs.
Joint application for pregnant women, children under 19 and Parents and Other Caretaker Relatives.
Form 357 is for the Plan First Program.
You may also apply on-line for Pregnant women, Plan First, children under 19 and Parents and Other Caretaker Relative programs at www.insurealabama.org.