**EBD Programs Desk Aid**

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| Program | Category | Coverage  | Medicare Premium Paid? | Backdate Eligible? |
| SSI related MA – Categorically Needy | MS | Full Benefit Medicaid | No | Yes |
| SSI related MA – Medically Needy | NS Deductible | Must meet the deductible to gain eligibility | No | Yes |
| SSI related MA – Medically Needy | NS | Full Benefit Medicaid | No | Yes beginning 9/1/19 |
| MAPP\* | MAPP | Full Benefit Medicaid | No | Yes |
| QMB\*\* | QMB | Pays Medicare deductibles, copays, and coinsurance | Yes | No – Eligibility begins the month after all eligibility requirements are met. |
| SLMB | SLB | No Medicaid Eligibility | Yes | Yes |
| SLMB+ | SLB | No Medicaid Eligibility, Cannot have full benefit MA and this program | Yes | Yes |

**\*MAPP** – Must be engage in a work activity at least once per month. If they are using in-kind income, we must use the prevailing wage (not less than minimum wage) in the community for the type of work the person does to earn the benefits (MEH 26.3.3).

**\*\*QMB** – Pays 20% of the copay, deductible, or coinsurance that Medicare does not pay for Medicare eligible services.