Appendix 6: Medicaid Mandatory and Major Optional Eligibility Groups

**Medicaid Mandatory Eligibility Groups**

- Low-income families with children
- Persons receiving Supplemental Security Income (SSI), although a few states have more restrictive requirements than the SSI program
- Infants born to Medicaid-eligible pregnant women, birth through age 1, if the mother remains eligible, or would be eligible if she were still pregnant
- Children under age 6 and pregnant women whose family income is at or below 133 percent of the Federal Poverty Level (FPL)
- Recipients of adoption assistance and foster care under Title IV-E of the Social Security Act;
- “Dual eligible” Medicare beneficiaries
- Special protected groups – for example individuals who were SSI recipients, who work and lose SSI because of their earned income but who can keep Medicaid up to a specific income level.

**Medicaid Optional Eligibility Groups**

- The Poverty Level group (also known as the Aged and Disabled group, comprised of individuals over age 65 or with a disability who have incomes up to 100 percent of the FPL).

**NOTE:** The FPL limit varies by state

- The Medically Needy group (beneficiaries with higher incomes than in the mandatory coverage groups who also have very high medical expenses)
- The TEFRA group (children who need institutional care who may be served in their home for less than the cost of institutional care and whose family income is not counted. Sometimes called the “Katie-Beckett option” after the child whose situation prompted authorization of this coverage group)
- Pregnant women with income between 150 and 185 percent of the FPL
- Optional, targeted low-income children – income limit determined by each state
- Individuals who require hospice care (not otherwise Medicaid eligible – with income up to 300 percent of the SSI benefit rate)
- The “special income group” (individuals who receive care in a nursing facility or ICF/MR or alternatively in HCBS Waivers and who are not otherwise Medicaid eligible – with income up to 300 percent of the SSI Federal Benefit Rate)
- Medicaid “buy-in” program participants, also known as the Ticket to Work Group
- Low-income Breast and Cervical Cancer Program treatment participants
- Recipients of state supplementary payments (supplemental to SSI)

---

4. States have additional options when specifying eligibility groups including the types of amount of income that may be disregarded, resulting in higher FPL limits for certain persons.