

PENNSYLVANIA MEDICAID/MEDICAL ASSISTANCE (MA) MATRIX

CATEGORICALLY NEEDY

CASH PAYMENT/MEDICAID

CATEGORICALLY NEEDY MEDICAID

C	U	D	B	PC	PU	PD	PS	PH	PI	PW
00	00	00(S)	00(S)	00	00	00(S)	16	00	00	00
04	04	02	80	02	21	21(S)	17	20	66	66
06	06	05		03	22	22(S)	18	80	80	80
07	07	15		21	23	29(S)		95		
08	08	50		22	27			97*		
09	09			23	71					
				27						
				30						
				31						
				32						
				33						
				34						
				35						
				36						
				37						
				71						

SSI CASH PAYMENT/MEDICAID

SSI – MA RELATED CATEGORICALLY NEEDY

A	J	M	PA	PJ	PM
00	00	00	00	00	00
44	31	44	21	21	21
45	32	45	22	22	22
46	33	46	81	81	81
60	35	60	84	83	84
62	36	62	85	84	85
	37			85	
	44			98	
	45				
	46				
	60				
	62				

Legend

*97 - Pilot Project in Philadelphia CAO

(S) = State Funding Only - D Category receives GA Basic Health Care Package MA benefits
B Category – State Blind Pension – receives a limited Health Care

Package

Note: Unless designated with (S), the category/program status code receives Federal funding for Medicaid services.

PENNSYLVANIA MEDICAID/MEDICAL ASSISTANCE (MA) MATRIX

CATEGORICALLY NEEDY

SSI – MA RELATED/WAIVER SERVICES

PAW	PCW	PJW	PMW
00	00	00	00
66	02	66	66
80		80	80
81		81	81
84		83	83
85		84	84
		85	85

SSI – MA RELATED/LONG TERM CARE FACILITY (NURSING HOME)

PAN	PCN	PJN	PMN	PVN
00	00	00	00	00
66	02	66	66	66
80	31	80	80	80
	32			
	33			
	34			
	35			
	36			
	37			

MEDICALLY NEEDY ONLY (MNO)

TA	TB	TC	TD	TJ	TU
00	00	00	00(S)	00	00
22	80	22	22(S)	22	22
66			55(S)	66	
80				80	

SSI-MA RELATED/WAIVER SERVICES

TAW	TJW
00	00
66	66
80	80

PENNSYLVANIA MEDICAID/MEDICAL ASSISTANCE (MA) MATRIX

SSI-MA RELATED/LONG TERM CARE FACILITY (NURSING HOME)

TAN	TJN	TVN
00	00	00
66	66	66
80	80	80

HEALTHY HORIZONS

COST-SHARING QMBs (QUALIFIED MEDICARE BENEFICIARIES) (Buy-In of Medicare Part A and Part B, Medicare deductibles and coinsurance)

ELDERLY/DISABLED
PG
00

SelectPlan for Women (Family Planning Waiver benefits only)

PSF
00

PENNSYLVANIA
MEDICAID/MEDICAL ASSISTANCE (MA) MATRIX

No MA Services or ACCESS Card

**SPECIFIED LOW INCOME MEDICARE BENEFICIARIES
SLMBs
BUY-IN (MEDICARE PART B)**

TA	TJ
65	65

**QUALIFYING INDIVIDUALS BUY-IN (MEDICARE PART B)
QI1s**

TA	TJ
67	67

EMERGENCY SHELTER GRANTS

E (Food Stamp Only)
00

BRIDGE PROGRAM

PA	PJ
87	87

**QUALIFIED DISABLED WORKING INDIVIDUALS (QDWI)
BUY-IN (MEDICARE PART A)**

PA	PJ	PM
86	86	86

PENNSYLVANIA
MEDICAID/MEDICAL ASSISTANCE (MA) MATRIX

No MA Services or ACCESS Card

TANF DIVERSION

C	U
47	47
48	48
49	49

**OMR – BASE ELIGIBILITY
STATE FUNDED MR BASE PROGRAMS**

MRX
00

FAMILY WORKS

SC
82

OFFICE OF SPECIAL PROGRAMS ELIGIBILITY

ACX
00

PENNSYLVANIA MEDICAID/MEDICAL ASSISTANCE (MA) MATRIX

CASH/ MEDICAL	NMP	MNO	OTHER	DESCRIPTION OF CATEGORY
C	PC	TC		TANF
U	PU	TU		TANF-U
D	PD	TD		General Assistance (GA)
B		TB		State Blind Pension (SBP)
	PH			BCCPT (Breast & Cervical Cancer Prevention & Treatment Program) Eff. 1/1/02 Healthy Horizons (Elderly/Disabled)** Children with Disabilities**
	PS			Healthy Beginnings (Pregnant Women/Child)
	PI			MAWD Worker with a Medically Improved Disability Eff. 1/1/02
			PG	Medicare Cost Sharing – Elderly/Disabled
	PW			MAWD Worker with a Disability Eff. 1/1/02
			PSF	SelectPlan for Women
<u>SSI</u>				
A	PA	TA		Old Age Assistance
J	PJ	TJ		Aid to the Disabled SSI Ineligibles/MA Eligibles (children)**
M	PM			Aid to the Blind

* Add N (Nursing Home)/W (Waiver) to PA, PJ, PM & TA, TJ

** Effective 1/21/03. Prior to 1/21/03, groups identified by PS.

PENNSYLVANIA MEDICAID/MEDICAL ASSISTANCE (MA) MATRIX

CASH/ MEDICAL	OTHER	DESCRIPTION OF CATEGORY
E		Emergency Assistance/FS Food Stamps – E is for Food Stamps only budgets. EA authorized for cash and/or MA by reason codes.
	MRX	MRX identifies individuals who are eligible for services provided through MR programs but not Medicaid eligible. D1965 effective 11/1/2004, pilot program implemented in four counties to determine feasibility of processing medical claims for State-funded MR base programs through Promise.
	N	SBP Nursing Home Ended 6/4/99 DSD565
	PL	Medicare Cost Sharing Disabled-Category Ended 1/21/03 – PG is now used.
	SC	Family Works Effective 6/10/2000 No Medicaid benefits
	TR	SPOC Health Insurance Last budget closed 3/3/2004.
	ACX	ACX identifies individuals who are eligible for services provided under the auspices of the Office of Social Programs. D2392 effective 6/28/06, implemented in order to facilitate PROMISE claims processing. ACX is a non-Public Assistance category and does not affect eligibility for Medicaid.
	EIX	Early Intervention-non public assistance category to aid in PROMISE claims processing.
	MHX	Mental Health—non public assistance category to aid in PROMISE claims processing.