<u>477-000-012 – Income levels/Federal Poverty Levels and Resources</u>

Program Standards, Federal Poverty Levels, and Maximum Income (Unless otherwise noted figures are effective 1/1/2024)

Figures listed are representative of dollar amounts

Income Limits for MAGI Based Programs and Transitional Medical Assistance

F P L	23%	51%	58%	194%	185%	133%	162%	145%	133%	197%	213%
HH SIZE	SAGA	FORMER WARD/ IMD	PARENT/ CARETAKE R RELATIVE	PREGNANT WOMEN	ТМА	Heritage Health Adult (HHA)	NEWBORN TO AGE 1	CHILDREN AGES 1-5	CHILDREN AGES 6-18	599 CHIP	СНІР
1	289	641	728	2,435	2,322	1,670	2,034	1,820	1,670	2,473	2,674
2	392	870	989	3,306	3,153	2,267	2,761	2,470	2,267	3,357	3,630
3	495	1,098	1,249	4,175	3,982	2,863	3,487	3,121	2,863	4,240	4,584
4	598	1,326	1,508	5,044	4,810	3,458	4,212	3,770	3,458	5,122	5,538
5	702	1,555	1,769	5,916	5,641	4,056	4,940	4,422	4,056	6,007	6,495
6	805	1,784	2,029	6,785	6,470	4,652	5,666	5,071	4,652	6,890	7,449
7	908	2,012	2,289	7,654	7,299	5,247	6,391	5,721	5,247	7,772	8,403
8	1,011	2,241	2,549	8,525	8,129	5,845	7,119	6,372	5,845	8,657	9,360
9	1,114	2,470	2,809	9,394	8,958	6,440	7,845	7,021	6,440	9,539	10,314
10	1,217	2,698	3,069	10,263	9,787	7,036	8,570	7,671	7,036	10,422	11,268

Resource and Income Limits for Aged, Blind and Disabled Programs

MIWD and MIWD with Premium Income Limits

FPL	200%	250%	
풒	MIWD	MIWD PREMIUM	
1	2,510	3,138	
2	3,407	4,260	

Medically Needy, ABD/OMB, MSP/QMB and ABD/QMB Income Limits

FPL	-	100%
HH SIZE	MNIL MA	ABD/OMB MSP/QMB
1	392	1,255
2	392	1,704
3	492	2,152
4	584	2,600
5	675	3,049
6	775	3,497
7	867	3,945
8	967	4,394
9	1,059	4,842
10	1,150	5,290
	+91	

SLMB and QI-1 Income Limits

FPL	120%	135%
HH	SLMB	QI-1
1	1,506	1,695
2	2,045	2,301

Eligibility for the payment of the Part B by the State for QMB is effective the first of the month following the month that initial eligibility determination is processed. For example, if you determine an individual meets all eligibility requirements for QMB status on August 15th, the effective date of eligibility for payment of premiums, deductibles, and co-insurance is September 1. However, in no case are benefits effective prior to January 1, 1989, which is the effective date of this provision. Retroactive eligibility is precluded under this provision.

QI's cannot be otherwise eligible for any other Medicaid category. The individual must choose either medically needy/SOC or QI. Retroactive eligibility (up to 3 months prior to application) applies if:

- 1. The individual met all QI eligibility criteria in the retroactive period; and
- 2. The retroactive period is no earlier than January 1 of that calendar year.

Qls are eligible if their incomes are at least 120% of the FPL, but less than 135% of the FPL

Resource Limits

SIZE	RESOURCE LIMITS		
HH SI	AABD/MA	MSP/QMB SLMB/QI-1	
1	4,000	9,430	
2	6,000	14,130	
	Dependent Adult Child (DAC)	Maximum for Burial Trust Effective 9/1/24	
1	2,000	6,507	

Spousal Impoverishment

Spousai impoverisnment				
SPOUSAL IMPOVERISHMENT				
Reserved Amount (IM-73)	MIN	29,724		
Effective through 12/31/23	MAX	148,620		
Reserved Amount	MIN	30,828		
(IM-73) Effective 1/1/24	MAX	154,140		
Community Spouse 150% FP		2,465*		
*Effective 7/1/23 through 6/30/24 **Effective 7/1/24		2,555**		
Excess Shelter Limit		740*		
*Effective 7/1/23 through 6/30/24 **Effective 7/1/24		767**		
Utility Standard	553*			
*Effective through 12/31/23 **Effective 1/1/24		580**		
Max Maintenance Allowanc Ineligible Spouse	3,716*			
*Effective through 12/31/23 **Effective 1/1/24		3,854**		

Facility Standard of Need - Effective 1/1/23

FACILITY STANDARDS			
NURSING HOME	SON	Vets Personal Needs	
NONSING HOME	\$60	\$90 (Excl.)	
ASSISTED LIVING	SON	\$850 R&B	
WAIVER	\$914	+ \$64 Personal Needs	
ASSISTED LIVING	SON	\$392 MNIL	
(NO WAIVER)	\$392*	+ \$964 Remedial Care	

Facility Standard of Need - Effective 9/1/23

FACILITY STANDARDS			
NURSING HOME	SON	Vets Personal Needs	
NONSING HOME	\$75	\$90 (Excl.)	
ASSISTED LIVING	SON	\$839 R&B	
WAIVER	\$914	+ \$75 Personal Needs	
ASSISTED LIVING	SON	\$392 MNIL	
(NO WAIVER)	\$392*	+ \$975 Remedial Care	

Facility Standard of Need – Effective 1/1/24

FACILITY STANDARDS			
NURSING HOME	SON	Vets Personal Needs	
NORSING HOME	\$75	\$90 (Excl.)	
ASSISTED LIVING	SON	\$868 R&B	
WAIVER	\$943	+ \$75 Personal Needs	
ASSISTED LIVING	SON	\$392 MNIL	
(NO WAIVER)	ć202*	+ \$1004 Remedial	
(ITO VVAIVER)	\$392*	Care	

Social Security Income (SSI)

ZE	SSI LEVELS			
HH SIZE		al Benefit e (FBR)	Referral Level	
Year	2023	Effective 1/1/24	2023	Effective 1/1/24
1	914	943	934	963
2	1,371	1,415	1,391	1,435

Medicare Premium

Standard Medicare Part B Premium for 2023	Standard Medicare Part B Premium for dual eligible 2023
170.10	170.10

Standard Medicare Part B Premium Effective 1/1/24	Standard Medicare Part B Premium for dual eligible Effective 1/1/24
174.70	174.70

The premium amount for dual eligibles is assessed for those newly enrolled in part B in 2021, not receiving social security, being directly billed for Part B, having Part B paid by Medicaid, and whose modified adjusted gross income on IRS tax return from 2 years ago is below a certain amount.

Social Security can tell the exact amount the individual is responsible for. See Medicare for more information on Part B costs at: <a href="https://www.medicare.gov/your-medicare-costs/part-b-costs/pa

Other Limits

OTHER LIMITS
Shelter
Allowance
281
349

<u>Premium Charts for Medical Insurance for Workers with Disabilities (MIWD) and Transitional Medical Assistance (TMA)</u>

MIWD Premium Payment Chart - Effective 5/1/24

	HH Size - 1						
	1111 5125 2						
Monthly Annual Low High Premium Premiur							
	\$1,255	\$2,509	\$0	\$0			
	\$2,510	\$2,635	\$38	\$456			
	\$2,636	\$2,760	\$92	\$1,104			
	\$2,761	\$2,886	\$152	\$1,824			
	\$2,887	\$3,011	\$188	\$2,256			
	\$3,012	\$3,138	\$226	\$2,712			

HH Size - 2

Low	High	Monthly Premium	Annual Premium
\$1,704	\$3,407	\$0	\$0
\$3,408	\$3,577	\$51	\$612
\$3,578	\$3,748	\$125	\$1,500
\$3,749	\$3,918	\$206	\$2,472
\$3,919	\$4,089	\$255	\$3,060
\$4,090	\$4,260	\$307	\$3,684

HH Size - 3

Low	High	Monthly Premium	Annual Premium
\$2,152	\$4,303	\$0	\$0
\$4,304	\$4,518	\$65	\$780
\$4,519	\$4,733	\$158	\$1,896
\$4,734	\$4,949	\$260	\$3,120
\$4,950	\$5,164	\$322	\$3,864
\$5,165	\$5,380	\$387	\$4,644

HH Size - 4

Low	High	Monthly Premium	Annual Premium
\$2,600	\$5,199	\$0	\$0
\$5,200	\$5,459	\$78	\$936
\$5,460	\$5,719	\$191	\$2,292
\$5,720	\$5,979	\$315	\$3,780
\$5,980	\$6,239	\$389	\$4,668
\$6,240	\$6,500	\$468	\$5,616

HH Size - 5

Low	High	Monthly Premium	Annual Premium
\$3,049	\$6,097	\$0	\$0
\$6,098	\$6,402	\$91	\$1,092
\$6,403	\$6,707	\$224	\$2,688
\$6,708	\$7,012	\$369	\$4,428
\$7,013	\$7,317	\$456	\$5,472
\$7,318	\$7,623	\$549	\$6,588

HH Size - 6

_		Monthly	Annual
Low	High	Premium	Premium
\$3,497	\$6,993	\$0	\$0
\$6,994	\$7,343	\$105	\$1,260
\$7,344	\$7,692	\$257	\$3,084
\$7,693	\$8,042	\$423	\$5,076
\$8,043	\$8,392	\$523	\$6,276
\$8,393	\$8,743	\$629	\$7,548

HH Size - 7

Low	High	Monthly Premium	Annual Premium
\$3,945	\$7,889	\$0	\$0
\$7,890	\$8,284	\$118	\$1,416
\$8,285	\$8,678	\$290	\$3,480
\$8,679	\$9,073	\$477	\$5,724
\$9,074	\$9,467	\$590	\$7,080
\$9,468	\$9,863	\$710	\$8,520

HH Size - 8

Low	High	Monthly Premium	Annual Premium
\$4,394	\$8,787	\$0	\$0
\$8,788	\$9,226	\$132	\$1,584
\$9,227	\$9,666	\$323	\$3,876
\$9,667	\$10,105	\$532	\$6,384
\$10,106	\$10,545	\$657	\$7,884
\$10,546	\$10,985	\$791	\$9,492

HH Size - 9

Low	High	Monthly Premium	Annual Premium
\$4,842	\$9,683	\$0	\$0
\$9,684	\$10,167	\$145	\$1,740
\$10,168	\$10,651	\$356	\$4,272
\$10,652	\$11,136	\$586	\$7,032
\$11,137	\$11,620	\$724	\$8,688
\$11,621	\$12,105	\$872	\$10,464

HH Size - 10

Low	High	Monthly Premium	Annual Premium
\$5,290	\$10,579	\$0	\$0
\$10,580	\$11,108	\$159	\$1,908
\$11,109	\$11,637	\$389	\$4,668
\$11,638	\$12,166	\$640	\$7,680
\$12,167	\$12,695	\$791	\$9,492
\$12,696	\$13,225	\$952	\$11,424

Premium Payment Process:

Medicaid Insurance for Workers with Disabilities will work much like TMA Premium Payments.

The client must pay the full premium no later than the 21st of the month following the month for which the payment is designated.

TMA Premium Payment Chart – Effective 10/1/24

FAMILY SIZE 1					
	Adjuste Earne	Fee			
\$	1,255.01	-	\$	1,317.99	\$ 36.00
\$	1,318.00	-	\$	1,380.99	\$ 38.00
\$	1,381.00	-	\$	1,443.99	\$ 40.00
\$	1,444.00	-	\$	1,505.99	\$ 42.00
\$	1,506.00	-	\$	1,568.99	\$ 44.00
\$	1,569.00	-	\$	1,631.99	\$ 46.00
\$	1,632.00	-	\$	1,694.99	\$ 47.00
\$	1,695.00	-	\$	1,756.99	\$ 49.00
\$	1,757.00	-	\$	1,819.99	\$ 51.00
\$	1,820.00	-	\$	1,882.99	\$ 53.00
\$	1,883.00	-	\$	1,945.99	\$ 55.00
\$	1,946.00	-	\$	2,007.99	\$ 56.00
\$	2,008.00	-	\$	2,070.99	\$ 58.00
\$	2,071.00	-	\$	2,133.99	\$ 60.00
\$	2,134.00	-	\$	2,196.99	\$ 62.00
\$	2,197.00	-	\$	2,258.99	\$ 64.00
\$	2 259 00	_	\$	2.322.00	\$ 66.00

FAMILY SIZ			
Adjuste Earne	Fee		
\$1,704.01	-	\$1,789.99	\$ 49.00
\$1,790.00	-	\$1,874.99	\$ 52.00
\$1,875.00	-	\$1,959.99	\$ 54.00
\$1,960.00	-	\$2,044.99	\$
\$2,045.00	-	\$2,129.99	\$
\$2,130.00	-	\$2,215.99	\$ 62.00
\$2,216.00	-	\$2,300.99	\$ 64.00
\$2,301.00	-	\$2,385.99	\$ 67.00
\$2,386.00	-	\$2,470.99	\$ 69.00
\$2,471.00	-	\$2,555.99	\$ 71.00
\$2,556.00	-	\$2,641.99	\$ 74.00
\$2,642.00	-	\$2,726.99	\$ 76.00
\$2,727.00	-	\$2,811.99	\$ 79.00
\$2,812.00	-	\$2,896.99	\$ 81.00
\$2,897.00	-	\$2,981.99	\$ 84.00
\$2,982.00	-	\$3,067.99	\$ 86.00
\$3,068.00	-	\$3,153.00	\$ 89.00

FAMILY SIZ					
Adjuste Earne	Fee				
\$2,152.01	-	\$2,259.99	\$ 62.00		
\$2,260.00	-	\$2,367.99	\$ 65.00		
\$2,368.00	-	\$2,474.99	\$ 68.00		
\$2,475.00	-	\$2,582.99	\$ 71.00		
\$2,583.00	-	\$2,689.99	\$ 75.00		
\$2,690.00	\$2,690.00 - \$2,797.99				
\$2,798.00	\$ 81.00				
\$2,906.00	-	\$3,012.99	\$ 84.00		
\$3,013.00	-	\$3,120.99	\$ 87.00		
\$3,121.00	-	\$3,227.99	\$ 90.00		
\$3,228.00	-	\$3,335.99	\$ 93.00		
\$3,336.00	-	\$3,443.99	\$ 96.00		
\$3,444.00	-	\$3,550.99	\$ 99.00		
\$3,551.00	\$ 103.00				
\$3,659.00	\$ 106.00				
\$3,766.00	\$ 109.00				
\$3,874.00	\$ 112.00				

FAMILY SIZ				
Adjuste Earne	Fee			
\$2,600.01	-	\$2,729.99	\$ 75.00	
\$2,730.00	-	\$2,859.99	\$ 79.00	
\$2,860.00	-	\$2,989.99	\$ 83.00	
\$2,990.00	-	\$3,119.99	\$ 86.00	
\$3,120.00	-	\$3,249.99	\$ 90.00	
\$3,250.00	-	\$3,379.99	\$ 94.00	
\$3,380.00	\$3,380.00 - \$3,509.99			
\$3,510.00	-	\$3,639.99	\$ 101.00	
\$3,640.00	-	\$3,769.99	\$ 105.00	
\$3,770.00	-	\$3,899.99	\$ 109.00	
\$3,900.00	-	\$4,029.99	\$ 113.00	
\$4,030.00	-	\$4,159.99	\$ 116.00	
\$4,160.00	-	\$4,289.99	\$ 120.00	
\$4,290.00	-	\$4,419.99	\$ 124.00	
\$4,420.00	-	\$4,549.99	\$ 128.00	
\$4,550.00	-	\$4,679.99	\$ 131.00	
\$4,680.00	\$ 135.00			

	FΑ	MILY SIZE	5		
		Adjuste Earned	Fee		
:	\$	3,049.01	-	\$ 3,201.99	\$ 88.00
1	\$	3,202.00	-	\$ 3,353.99	\$ 92.00
1	\$	3,354.00	-	\$ 3,506.99	\$ 97.00
1	\$	3,507.00	-	\$ 3,658.99	\$101.00
1	\$	3,659.00	-	\$ 3,811.99	\$105.00
1	\$	3,812.00	-	\$ 3,963.99	\$110.00
1	\$	3,964.00	-	\$ 4,116.99	\$114.00
1	\$	4,117.00	-	\$ 4,268.99	\$119.00
1	\$	4,269.00	-	\$ 4,421.99	\$123.00
1	\$	4,422.00	-	\$ 4,573.99	\$127.00
1	\$	4,574.00	-	\$ 4,725.99	\$132.00
1	\$	4,726.00	-	\$ 4,878.99	\$136.00
1	\$	4,879.00	-	\$ 5,030.99	\$141.00
1	\$	5,031.00	-	\$ 5,183.99	\$145.00
1	\$	5,184.00	-	\$ 5,335.99	\$149.00
1	\$	5,336.00	-	\$ 5,488.99	\$154.00
1 :	\$	5,489.00	-	\$ 5,641.00	\$158.00

FAMILY SIZ					
Adjuste Earne	Fee				
\$3,497.01	_	\$3,671.99	\$ 101.00		
\$3,497.01	-	\$3,846.99	\$ 101.00		
,	-	,			
\$3,847.00	-	\$4,021.99	\$ 111.00		
\$4,022.00	-	\$4,196.99	\$ 116.00		
\$4,197.00	-	\$4,371.99	\$ 121.00		
\$4,372.00	-	\$4,546.99	\$ 126.00		
\$4,547.00	\$ 131.00				
\$4,721.00	-	\$4,895.99	\$ 136.00		
\$4,896.00	-	\$5,070.99	\$ 141.00		
\$5,071.00	-	\$5,245.99	\$ 146.00		
\$5,246.00	-	\$5,420.99	\$ 151.00		
\$5,421.00	-	\$5,595.99	\$ 156.00		
\$5,596.00	-	\$5,770.99	\$ 161.00		
\$5,771.00	-	\$5,944.99	\$ 166.00		
\$5,945.00	\$5,945.00 - \$6,119.99				
\$6,120.00	-	\$6,294.99	\$ 176.00		
\$6,295.00	\$ 181.00				

FAMILY SIZ					
Adjuste Earne	Fee				
\$3,945.01	-	\$4,142.99	\$ 114.00		
\$4,143.00	-	\$4,339.99	\$ 119.00		
\$4,340.00	-	\$4,536.99	\$ 125.00		
\$4,537.00	-	\$4,733.99	\$ 131.00		
\$4,734.00	-	\$4,931.99	\$ 136.00		
\$4,932.00	-	\$5,128.99	\$ 142.00		
\$5,129.00	\$ 148.00				
\$5,326.00	-	\$5,522.99	\$ 153.00		
\$5,523.00	-	\$5,720.99	\$ 159.00		
\$5,721.00	-	\$5,917.99	\$ 165.00		
\$5,918.00	-	\$6,114.99	\$ 170.00		
\$6,115.00	-	\$6,311.99	\$ 176.00		
\$6,312.00	-	\$6,509.99	\$ 182.00		
\$6,510.00	-	\$6,706.99	\$ 187.00		
\$6,707.00	\$6,707.00 - \$6,903.99				
\$6,904.00	-	\$7,100.99	\$ 199.00		
\$7,101.00	\$ 204.00				

FAMILY SIZ			
Adjuste Earne	Fee		
\$4,394.01	-	\$4,613.99	\$ 126.00
\$4,614.00	-	\$4,833.99	\$ 133.00
\$4,834.00	-	\$5,053.99	\$ 139.00
\$5,054.00	-	\$5,272.99	\$ 145.00
\$5,273.00	-	\$5,492.99	\$ 152.00
\$5,493.00	-	\$5,712.99	\$ 158.00
\$5,713.00	-	\$5,931.99	\$ 164.00
\$5,932.00	-	\$6,151.99	\$ 171.00
\$6,152.00	-	\$6,371.99	\$ 177.00
\$6,372.00	-	\$6,590.99	\$ 183.00
\$6,591.00	-	\$6,810.99	\$ 190.00
\$6,811.00	-	\$7,030.99	\$ 196.00
\$7,031.00	-	\$7,250.99	\$ 202.00
\$7,251.00	-	\$7,469.99	\$ 209.00
\$7,470.00	-	\$7,689.99	\$ 215.00
\$7,690.00	-	\$7,909.99	\$ 221.00
\$7,910.00	_	\$8,129,00	\$ 228.00