

Good Life. Great Mission.

DEPT. OF HEALTH AND HUMAN SERVICES



PROGRAM INSTRUCTION

SUA-24-PI-0	3 February 5, 2024
TO:	Sub-recipients of the State Unit on Aging
FROM:	Penny Clark, Interim Administrator, State Unit on Aging \mathcal{PC}
BY:	Cheryl Kirby, Program Coordinator, State Unit on Aging <i>CK</i>
SUBJECT:	2024 Poverty Income Guidelines
CONTENT:	A revised Care Management sliding fee scale is being issued to assure accurate coverage consistent with PeerPlace.

The poverty income levels for 2024 are as follows:

2024 Poverty Guideline

Size of Family	<u>100%</u>
1	\$15,060
2	\$20,440
3	\$25,820
4	\$31,200
5	\$36,580
6	\$41,960
7	\$47,340
8	\$52,720

For each additional Family member add \$5,380

Effective immediately, please use the following sliding fee scale to determine the client's fee for Care Management services:

This guidance document is advisory in nature but is binding on an agency until amended by such agency. A guidance document does not include internal procedural documents that only affect the internal operations of the agency and does not impose additional requirements or penalties on regulated parties or

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include confidential information or rules and regulations made in accordance with the Administrative Procedure Act. If you believe that this guidance document imposes additional requirements or penalties on regulated parties, you may request a review of the document.

One-Person Household

Fee %
0%
10%
20%
30%
40%
50%
60%
70%
80%
90%
100%
Fee %
0%
10%
20%
30%
40%
50%
60%
70%
80%
90%
100%

<u>Five-Person Household</u> <u>Six-Person Household</u>

Monthly Income	Fee %
\$0 - \$4,572	0%
\$4,573- \$5,090	10%
\$5,091- \$5,577	20%
\$5,578 - \$6,096	30%
\$6,097 - \$6,614	40%
\$6,615 - \$7,102	50%
\$7,103 - \$7,620	60%
\$7,621 - \$8,138	70%
\$8,139 - \$8,626	80%
\$8,627 - \$9,144	90%

Two-Person Household

Monthly Income	Fee %
\$0 - \$2,554	0%
\$2,555 - \$2,844	10%
\$2,845 - \$3,116	20%
\$3,117 - \$3,406	30%
\$3,407 - \$3,695	40%
\$3,696- \$3,968	50%
\$3,969 - \$4,257	60%
\$4,258 - \$4,547	70%
\$4,548-\$4,819	80%
\$4,820 - \$5,109	90%
\$5,110 - above	100%

<u>Three-Person Household</u> <u>Four-Person Household</u>

Fee %
0%
10%
20%
30%
40%
50%
60%
70%
80%
90%
100%

Monthly Income	Fee %
\$0 - \$5,244	0%
\$5,245 - \$5,838	10%
\$5,839 - \$6,398	20%
\$6,399 - \$6,992	30%
\$6,993 - \$7,587	40%
\$7,588 - \$8,146	50%
\$8,147 - \$8,741	60%
\$8,742 - \$9,335	70%
\$9,336 - \$9,895	80%
\$9,896 - \$10,489	90%
\$10,490- above	100%

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\$9,145 - above 100%

The revised sliding fee scale will be effective immediately. It should be used in the development of your Fiscal Year 2025 budget. The attached spreadsheet can be used by care managers to calculate fee percentages based on monthly or annual income.

If you have questions, please feel free to contact Cheryl Kirby 402-314-5155 or via email at DHHS.Aging@nebraska.gov.