

CHART A1.1 - ABD MEDICAID RESOURCE LIMITS				
Type Limit	Individual Limit	Couple Limit	LA-D Individual With a Community Spouse	Effective Date
SSI/LA-D	\$2000	\$3000	N/A	7-88
AMN	\$2000	\$4000	N/A	4-90
QMB/SLMB/ QI-1	\$7280	\$10,930	N/A	1-15
QDWI	\$4000	\$6000	N/A	1-89
Spousal Impoverishment	N/A	N/A	\$119,220 + 2000 = \$121,220.00	1-15

CHART A1.2 - ABD MEDICAID NET INCOME LIMITS (GROSS - \$20)				
Type Limit	LA	Individual Limit	Couple Limit	Effective Date
AMN	All	\$317	\$375	10-90
FBR (SSI Limit)	A	\$733	\$1100	1-15
	B	\$488.67	\$733.33	
	C	\$733	N/A	
	D	\$30	N/A	
Medicaid CAP	D	\$2199	\$4398	1-15
QDWI	A	\$3989	\$5375	3-15 Note: Effective 3-98, ISM no longer applies to this COA eliminating LA-B.
	C	\$3989	N/A	
	D	\$3989	N/A	
QMB	A	\$981	\$1328	4-15
SLMB	A	\$1177	\$1593	4-15
QI-1	A	\$1325	\$1793	3-15

CHART A1.3 - TRANSFER OF RESOURCE PENALTY DETERMINATION		
Averaging Nursing Home Private Pay Billing Rate	\$5931.00	4-15

CHART A1.4 - PRESUMED MAXIMUM VALUE (PMV) OF ISM AND LIVING ALLOWANCE TO EACH INELIGIBLE CHILD				
Income Limit	PMV for an Individual	PMV for a Couple	Living Allowance	Effective Date
AMN	\$264.33	\$386.67	\$366.67	1-15
FBR	\$264.33	\$386.67	\$366.67	1-15
QMB	N/A	N/A	\$437.00	4-14
SLMB	N/A	N/A	\$525.00	4-14
QI-1	N/A	N/A	\$590.00	3-14

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CHART A1.5 - SUBSTANTIAL GAINFUL ACTIVITY		
Category	Income Limit	Effective Date
Non-Blind individuals	\$1090	1-15
Blind individuals	\$1820	

CHART A1.6 – BREAK-EVEN POINTS					
Living Arrangement	Earned Income		Unearned Income		Effective Date
	Individual	Couple	Individual	Couple	
A	\$1271	\$1873	\$603	\$904	1-06
B	\$869	\$1271	\$402	\$603	
D	\$145	\$205	\$50	\$80	7-88

CHART A1.7 – MONTHLY AVERAGED MEDICAID RATES FOR KATIE BECKETT		
Level of Care	Monthly Amount	Effective Date
Skilled Nursing Facility	\$5164.60	04/15
ICF/MR	\$14729.96	
Hospital	\$5432.06	4/15

A1.8 – MEDICARE EXPENSES
Medicare Part B Premium rate: \$104.90 (effective 1-14).

CHART A1.9 - PERSONAL NEEDS ALLOWANCES (PNA) FOR AN LA-D RECIPIENT		
IF the LA-D Recipient is	THEN use the following as the PNA in the Patient Liability/Cost Share Budget:	
an individual in a nursing home or Institutionalized Hospice	\$50	Effective 7-06
a VA pensioner or his/her surviving spouse in a nursing home who has dependents	\$50	Effective 7-06
a VA pensioner or his/her surviving spouse in a nursing home who has no dependents NOTE: The VA check for these individuals is reduced to the amount of the PNA, regardless of other income.	\$90	Effective 1-92 (Effective 1-93 for the Surviving Spouse)
an individual in CCSP	the current amount of the Individual FBR for LA-A	
an individual in ICWP	the current amount of the Community Spouse Maintenance Need Standard	
an individual in NOW/COMP	the current Medicaid Cap	

CHART A1.10 - NEED STANDARDS FOR DIVERSION OF INCOME TO A COMMUNITY SPOUSE OR DEPENDENT FAMILY MEMBER IN A PATIENT LIABILITY/COST SHARE BUDGET		
Diversion Standard	Amount	Effective Date
Community Spouse Maintenance Need Standard	\$2980.00	1-15
Dependent Family Member Need Standard	\$1992.00	4-15

HOUSEHOLD SIZE	100%	135%	150%	EFF. DATE
1	\$11,770.00	\$15,889.00	\$17,655.00	2015
2	15,930.00	21,505.00	23,985.00	
3	20,090.00	27,121.00	30,135.00	
4	24,250.00	32,737.00	36,375.00	
5	28,410.00	38,353.00	42,615.00	

The FPL (100% level) is increased by \$4,060 for each additional person in the household.

CHART A1.12 – COSTS AND GUIDELINES FOR RECEIPT OF MEDICARE PART D - LOW INCOME SUBSIDY				
	Group 1	Group 2	Group 3	Eff. Date
Resource Limit	None	Non Q Track Individual - \$8,780 Non Q Track Couple - \$13,930	Individual - \$13,640 Couple - \$27,250	2015
Income Limit	Full Medicaid	Q Track or Less than 135% of FPL	Less than 150% of FPL	
Monthly Premium	\$0	\$0	Sliding Scale	
Deductible Per Year	\$0	Up to \$66.00	Up to \$66.00	
Coinsurance up to \$3600 Out of Pocket	\$1.20 - \$3.60 Copay	\$2.65 - \$6.60 Copay	15% Coinsurance	
Catastrophic 5% or \$2/\$5 Copay	\$0	\$0	\$2.65 - \$6.60 Copay	

Low-Income Part D Premium Subsidy Amount
2010 – 29.62
2011 – 32.83
2012 – 31.18
2013 – 34.22
2014 – 29.32
2015 – 26.47

A1.13 – Medically Needy Mileage Re-imburement Rate
48.5 cents per mile – 9/10/05 – 12/31/05
44.5 cents per mile – 1/1/06 – 1/31/07
48.5 cents per mile – 2/1/07 – 03/31/08
50.5 cents per mile – 4/1/08 – 7/31/08
58.5 cents per mile – 8/1/08 – 12/31/08
55 cents per mile – 1/1/09 – 12/31/09
50 cents per mile – 1/1/10 – 12/31/2010
51 cents per mile – 01/01/11 – 04/16/2012
55.5 cents per mile – 04/17/2012 – 12/31/2012
56.5 cents per mile – 01/01/2013 – 12/31/2013
56 cents per mile -- 01/01/2014 – 12/31/2014
57.5 cents per mile – 01/01/2015 - Present