

# WASHINGTON APPLE HEALTH INCOME AND RESOURCE STANDARDS

\*July 1, 2016 Changes

## Modified Adjusted Gross Income (MAGI) and Classic Medicaid

| PROGRAM STANDARDS                          | 1    | 2    | 3    | 4    | 5    | 6    | 7    | 8     | 9     | 10    | 11+  |
|--------------------------------------------|------|------|------|------|------|------|------|-------|-------|-------|------|
| FAMILY (N01)                               | 511  | 658  | 820  | 972  | 1127 | 1284 | 1471 | 1631  | 1792  | 1951  | N/A  |
| 133% FPL NEW ADULT (N05)                   | 1317 | 1776 | 2235 | 2694 | 3153 | 3611 | 4071 | 4532  | 4994  | 5455  | 462  |
| 193% FPL PREGNANCY (N03/N23)               | 1911 | 2577 | 3243 | 3909 | 4575 | 5240 | 5908 | 6577  | 7246  | 7915  | 670  |
| 210% FPL CHILDREN (N11/N31)                | 2079 | 2804 | 3528 | 4253 | 4977 | 5702 | 6428 | 7156  | 7884  | 8612  | 728  |
| 220% FPL HWD (S08) (SSI-related)           | 2178 | 2937 | NA   | NA   | NA   | NA   | NA   | NA    | NA    | NA    | NA   |
| 260% FPL TAKE CHARGE                       | 2574 | 3471 | 4368 | 5265 | 6162 | 7059 | 7959 | 8860  | 9761  | 10663 | 902  |
| 260% FPL CHIP T1 (N13/N33) \$20 mo/premium | 2574 | 3471 | 4368 | 5265 | 6162 | 7059 | 7959 | 8860  | 9761  | 10663 | 902  |
| 312% FPL CHIP T2 (N13/N33) \$30 mo/premium | 3089 | 4166 | 5242 | 6318 | 7395 | 8471 | 9550 | 10632 | 11713 | 12795 | 1082 |

|                     |      |      |      |      |      |      |      |      |      |      |      |
|---------------------|------|------|------|------|------|------|------|------|------|------|------|
| <b>MN INCOME</b>    | 733  | 733  | 733  | 742  | 858  | 975  | 1125 | 1242 | 1358 | 1483 | 1483 |
| <b>MN RESOURCES</b> | 2000 | 3000 | 3050 | 3100 | 3150 | 3200 | 3250 | 3300 | 3350 | 3400 | 50   |

| SSI / CNIL STANDARDS<br>1/1/2016 | Single Eligible | Eligible Couple |
|----------------------------------|-----------------|-----------------|
| <b>CNIL INCOME</b>               | 733             | 1,100           |
| <b>FBR (SSI Standard)</b>        | 733             | 1,100           |
| <b>1/2 FBR</b>                   | 366.50          |                 |
| <b>SHARED LIVING FBR</b>         | 489             | 733             |
| <b>SSI RESOURCES</b>             | 2000            | 3000            |

| MEDICARE SAVINGS PROGRAMS<br>Income 4/1/2016                                  | People       |               |
|-------------------------------------------------------------------------------|--------------|---------------|
|                                                                               | 1            | 2             |
| <b>QMB (S03) 100% FPL</b>                                                     | <b>990</b>   | <b>1,335</b>  |
| <b>SLMB (S05) 120% FPL</b>                                                    | <b>1,188</b> | <b>1,602</b>  |
| <b>QI-1 (ESLMB) (S06) 135% FPL</b>                                            | <b>1,337</b> | <b>1,803</b>  |
| <b>QDWI (S04) 200% FPL</b><br><small>Must be employed for eligibility</small> | <b>1,980</b> | <b>2,670</b>  |
| <b>QMB, SLMB, QI-1 Resources</b>                                              | <b>7,280</b> | <b>10,930</b> |
| <b>QDWI Resources</b>                                                         | <b>4,000</b> | <b>6,000</b>  |

| MEDICARE STANDARDS 1/1/2016                                                                                          |                                   |
|----------------------------------------------------------------------------------------------------------------------|-----------------------------------|
| <b>PART A PREMIUM: 40+ wk qtrs = Free Part A; if &gt;29 wk qtrs, but &lt; 40 = \$226; if &lt; 30 wk qtrs = \$411</b> | <b>PART B PREMIUM</b><br>\$121.80 |
| <b>Part A Deductible:</b><br>Inpatient Hospital = \$1,288/ benefit period                                            | <b>Part B Deductible</b> \$166    |
| <b>Part A coinsurance for Inpatient hospital</b><br>\$322/day for 61st - 90th day; \$644/day for over 90 days        |                                   |
| <b>Part A coinsurance for NF</b><br>\$161/day for 21st - 90th day                                                    |                                   |

| INSTITUTIONAL STANDARDS                                                      | Date of last change | AMT       |
|------------------------------------------------------------------------------|---------------------|-----------|
| <b>Medicaid Special Income Level (SIL)</b>                                   | 1/1/2015            | \$2,199   |
| <b>DDA PNA at home</b>                                                       | 1/1/2015            | \$2,199   |
| <b>Cash PNA ALF</b>                                                          |                     | \$38.84   |
| <b>Cash PNA Medical Institution</b>                                          |                     | \$41.62   |
| <b>PNA State Veterans Home Maximum</b>                                       |                     | \$160     |
| <b>All other PNA Medical Institution</b>                                     | 7/1/2009            | \$57.28   |
| <b>HCS, DDA HCB Waivers, CFC &amp; MPC PNA in ALF</b>                        | 1/1/2010            | \$62.79   |
| <b>HCS, DDA HCB Waivers, CFC &amp; MPC R&amp;B in ALF</b>                    | 1/1/2015            | \$670.21  |
| <b>HCS HCB Waivers at home PNA with CS</b>                                   | 1/1/2015            | \$733     |
| <b>HCS HCB Waivers at home PNA without CS, or both spouses on HCB Waiver</b> | 4/1/2016            | \$990     |
| <b>Housing Maintenance Allowance Maximum</b>                                 | 4/1/2016            | \$990     |
| <b>CS Maintenance Needs Allowance Maximum</b>                                | 1/1/2015            | \$2,981   |
| <b>CS &amp; Dependent Allowance Standard</b>                                 | 7/1/2016*           | \$2,003   |
| <b>Standard Utility Allowance</b>                                            | 10/1/2015           | \$420     |
| <b>CS Excess Shelter</b>                                                     | 7/1/2016*           | \$601     |
| <b>Home Equity Limit</b>                                                     | 1/1/2015            | \$552,000 |
| <b>State Spousal Resource Standard</b>                                       | 7/1/2015            | \$54,726  |
| <b>Federal Spousal Resource Maximum</b>                                      | 1/1/2015            | \$119,220 |
| <b>Daily Private NF Rate</b>                                                 | 10/1/2015           | \$285     |
| <b>Monthly Private NF Rate</b>                                               | 10/1/2015           | \$8,670   |
| <b>Monthly State NF Rate</b>                                                 | 10/1/2015           | \$5,872   |

An unborn child is included in H/H size for family medical and pregnancy AUs.

| Substantial Gainful Activity (SGA) 1/1/2016 | Non-Blind | Blind   |
|---------------------------------------------|-----------|---------|
|                                             |           | \$1,130 |