APPLE HEALTH (MEDICAID) MANUAL REVISION

Revision # 74
Chapter / Section Standards - LTSS | Washington State Health Care Authority
Issued Date 7/1/2022
Revision Author Ty Mosley
Division Aging and Long Term Supports Administration (ALTSA)
Home and Community Services (HCS)
Phone 425-330-0630
Email tyrone.mosley@dshs.wa.gov

MANUAL PAGE TITLE HERE

Standards – LTSS | Washington State Health Care Authority
Long Term Services and Supports Standards
Summary of Revision

Removing the institutional standards chart and referencing the link to the Apple Health program standard for income and resources. This manual page has the historical and current Washington Apple Health income and resource standards chart posted. This standard chart includes all institutional standards used in long term services and supports.

Program standard for income and resources | Washington State Health Care Authority

Clarifying information remains.

Apple Health (Medicaid) Manual revision via track changes:

Attach PDF of the word document with track changes.

Commented [RL(1)]: I spelled these out.
Commented [RL(2)]: Make sure the correct link is used here.
https://www.hca.wa.gov/health-care-services-supports/program-administration/standards-ltss
Commented [RL(3)]: Make sure the correct link is included.
Program standard for income and resources | Washington State Health Care Authority
Commented [RL(4)]: Attach both the PDF and word document for Tristan to update the manual.
# Standards - LTSS

**Revised Date:**
July 14, 2022

**Purpose:** This chart includes standards for LTSS income and resource eligibility. The personal needs allowance (PNA) chart defines the amount of money a client is allowed to keep for their personal use.

**Note:**

- Personal Needs Allowance (PNA) chart
- Program standard for income and resources (WAC references and historical standards charts)

## Long-Term Care Resource Standards

Resource standards WAC [82-513-1350](https://www.hca.wa.gov/health-care-services-supports/program-standard-income-and-resources) Defining the resource standard and determining resource eligibility for long-term care (LTC) services, Standards can be found on the Program standard for income and resources.

<table>
<thead>
<tr>
<th>Description</th>
<th>Effective</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resource standard for error! Hyperlink reference not valid. <em>applicant</em></td>
<td>1/1/1989</td>
<td>2,000</td>
</tr>
<tr>
<td>Resource standard for error! Hyperlink reference not valid. <em>couple, both applying in same month</em></td>
<td>1/1/1989</td>
<td>3,000</td>
</tr>
<tr>
<td>Federal maximum spousal resource standard community spouse resource allowance (CSRA) changes January 1 based on the consumer price index.</td>
<td>1/1/2022</td>
<td>137,400</td>
</tr>
</tbody>
</table>
**State spousal resource standard-community spouse resource allowance (minimum)** Updates on July 1 every odd year based on Error! Hyperlink reference not valid.. Effective Amount

<table>
<thead>
<tr>
<th>Description</th>
<th>Effective</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>State spousal resource standard-community spouse resource allowance (minimum) Updates on July 1 every odd year based on Error! Hyperlink reference not valid..</td>
<td>7/1/2021</td>
<td>59,890</td>
</tr>
<tr>
<td>Tailored supports for older adults (TSOA) single (resource standard does not change)</td>
<td>9/7/2017</td>
<td>53,100</td>
</tr>
<tr>
<td>Tailored supports for older adults (TSOA) with a community spouse. Updates on July 1 every odd year based on Error! Hyperlink reference not valid.</td>
<td>7/1/2024</td>
<td>112,990</td>
</tr>
</tbody>
</table>

**Excess Home Equity Standards**

Excess home equity limits. Applies to institutional Medicaid programs per WAC 182-513-1350. These limits may change on January 1 based on the consumer price index-Urban (CPIU).

Excess home equity limits. Applies to institutional Medicaid programs per WAC-Error! Hyperlink reference not valid. These limits may change on January 1 based on the Error! Hyperlink reference not valid. Urban (CPIU). Due to decrease in CPI, there was no change 1/1/2016. Effective Amount

<table>
<thead>
<tr>
<th>Description</th>
<th>Effective</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Excess home equity limits. Applies to institutional Medicaid programs per WAC-Error! Hyperlink reference not valid. These limits may change on January 1 based on the Error! Hyperlink reference not valid. Urban (CPIU). Due to decrease in CPI, there was no change 1/1/2016.</td>
<td>7/1/2022</td>
<td>955,000</td>
</tr>
</tbody>
</table>

**Long-Term Care Income Standards**

Income standards Used to determine income and resource eligibility in long-term care. Standards can be found on the Program standard for income and resources. Medicaid special income level (SIL) 300% of the FBR. May change annually on January 1 based on consumer price index. Maximum gross income level for institutional Medicaid. Federal Benefit Rate (FBR) The Federal Benefit Rate (FBR) is the maximum dollar amount paid to an aged, blind, or disabled person who receives Social Security Disability benefits under SSI.
**Medically Needy Income Level (MNIL)**

**Categorically Needy Income Level (CNIL)**

**Federal Poverty Level (FPL)** may change annually on April 1.

**CS Maintenance Needs Allowance Maximum** 150% of the 2-person FPL may change annually on July 1.

**CS Maintenance Needs Allowance Maximum** may change annually on January 1 based on the consumer price index. (with excess shelter costs)

**Excess shelter cost standard** may change annually on July 1. 30% of 150% of the 2-person

**Utility standard** for determining excess shelter costs for a community spouse. Food Assistance Utility Standard (SUA) for a 4-person household. May change annually on 10/1

<table>
<thead>
<tr>
<th>Description</th>
<th>Effective</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicaid special income level (SIL) 300% of the Error! Hyperlink reference not valid. May change annually on January 1 based on consumer price index. Maximum gross income level for institutional Medicaid.</td>
<td>1/1/2022</td>
<td>2523</td>
</tr>
<tr>
<td>Federal-Benefit-Rate Error! Hyperlink reference not valid.</td>
<td>4/4/2022</td>
<td>544</td>
</tr>
<tr>
<td>Medically-Needy-Income-Level Error! Hyperlink reference not valid.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Categorically-Needy-Income-Level Error! Hyperlink reference not valid.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HCA Medical Standards chart</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Federal-Poverty-Level Error! Hyperlink reference not valid. May change annually on April 1</strong></td>
<td>4/1/2022</td>
<td>1133</td>
</tr>
<tr>
<td><strong>CS Maintenance Needs Allowance Maximum 150% of the Error! Hyperlink reference not valid. May change annually on July 1.</strong></td>
<td>7/1/2022</td>
<td>2289</td>
</tr>
<tr>
<td>Description</td>
<td>Effective</td>
<td>Amount</td>
</tr>
<tr>
<td>----------------------------------------------------------------------------</td>
<td>-----------</td>
<td>--------</td>
</tr>
<tr>
<td><strong>CS Maintenance Needs Allowance Maximum</strong> may change annually on January 1, based on the consumer price index. (with excess shelter costs)</td>
<td>1/1/2022</td>
<td>3435</td>
</tr>
<tr>
<td><strong>Excess shelter cost standard</strong> may change annually on July 1, 30% of 150% of the 2-person</td>
<td>7/1/2022</td>
<td>687</td>
</tr>
<tr>
<td><strong>Utility standard</strong> for determining excess shelter costs for a community spouse. Food Assistance Error! Hyperlink reference not valid. (SUA) for a 4-person household. May change annually on 10/1</td>
<td>10/1/2021</td>
<td>459</td>
</tr>
</tbody>
</table>

**Nursing Facility average state rate. Used to determine income eligibility for HCS HCB Waivers when gross income is over the Medicaid SIL**

Nursing Facility average state rate. This is used to determine eligibility for HCB Waivers authorized by HCS when the gross income is over the Medicaid SIL. This is described in WAC 182-515-1508.

Rate is updated annually on October 1st.

Standards can be found on the [Program standard for income and resources](https://www.hca.wa.gov/health-care-services-supports/program-standard-income-and-resources).

| Monthly state average nursing facility rate | 10/1/2021 | 8086   |

**Nursing facility private rate standard. Used to determine period of ineligibility due to asset transfers**

Reference WAC 182-513-1363 Transfer of an asset. This rate may change annually on October 1. It is calculated using the reported date from...
Medicaid cost reports and determined by ALTSA. This standard is used to
determine a period of ineligibility due to a resource transfer.

Standards can be found on the [Program standard for income and resources](https://www.hca.wa.gov/health-care-services-supports/program-standard-income-and-resources)

<table>
<thead>
<tr>
<th></th>
<th>Effective Date</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Daily private nursing facility rate</td>
<td>10/1/2021</td>
<td>355</td>
</tr>
<tr>
<td>Monthly private nursing facility rate</td>
<td>10/1/2021</td>
<td>10,785</td>
</tr>
</tbody>
</table>

Special Income Level (SIL) 300 percent of the FBR

1. The agency compares an individual's available income to the SIL to
determine whether a client is eligible for LTC services under the CN
program.

2. The SIL is equal to 300% of the annually adjusted SSI Federal Benefit
Rate (FBR).

3. The agency does not allow income disregards when determining eligibility
for CN institutional services. It reduces an individual's gross income only
by the exclusions allowed by federal statute as described in WAC 182-513-1340.

Clarifying Information

1. **Special Income Level (SIL)**: The agency compares a person's
nonexcluded income to the SIL to determine whether a person is eligible
for LTC services under the institutional CN program.

   1. The SIL is equal to 300% of the annually adjusted SSI [Federal
      Benefit Rate](https://www.hca.wa.gov/health-care-services-supports/program-standard-income-and-resources) (FBR).
2. The agency does not allow income disregards when determining eligibility for CN services. It reduces a person's gross income only by the exclusions allowed by federal statute as described in WAC 182-513-1340.

3. All income disregards under section 1612(b) of the Social Security Act aren't allowed before doing the SIL comparison. Examples are the $20 disregard and 65 ½ earned income deduction and Impairment Related Work Expenses (IRWE).

4. The SIL is the maximum amount allowed by law as the CN income standard for institutional Medicaid.

2. Disabled Adult Children (DAC), Pickle/COLA, Widowers, SSI individuals and SSI individuals because of 1619(b) status. How does the SIL affect their eligibility for HCBS Waiver programs?

1. Clients who are on SSI, or are considered eligible for SSI by Social Security Administration (1619(b)) or Deemed eligible for SSI (Protected DAC, Widowers, Pickle/COLA ) have countable income under the SSI Standard. These clients may have gross income above the SIL.

2. For an SSI client who has 1619(b) status with Social Security Administration, it is possible that a 1619(b) status individual can have gross income over the SIL because of their earnings. A 1619(b) client is treated just like an SSI client. Their eligibility is maintained by the Social Security Administration and they do not need to submit eligibility reviews to the agency for Medicaid eligibility. The SDX gives information on clients having 1619(b) status and to continue the CN Medicaid eligibility.

3. Not all clients receiving DAC are deemed SSI clients. If their SSI was lost due to receipt of DAC and their non-DAC countable income is under the SSI standard, they are deemed eligible "protected DAC". If their SSI was not lost due to receipt of DAC income, or if their other income exceeds the SSI standard, they are not deemed eligible for SSI.

4. These clients do need to meet specific eligibility criteria for LTSS such as Transfer of asset penalties under WAC 182-513-1363 and excess home equity under WAC 182-513-1350.