

MAGI MEDICAID INCOME ELIGIBILITY STANDARDS – FPL BASED				
Effective 4/01/2020				
Household Size	Pregnant Women	Children-Under age 19 With Insurance	Children-Under age 19 Without Insurance	Expansion Group
	200% of FPL	177% of FPL	203% of FPL	133% of FPL
1	n/a	\$2,353	\$2,699	\$1,768
2	\$3,592	\$3,179	\$3,646	\$2,389
3	\$4,525	\$4,005	\$4,593	\$3,010
4	\$5,459	\$4,831	\$5,541	\$3,630
5	\$6,392	\$5,657	\$6,488	\$4,251
6	\$7,325	\$6,483	\$7,435	\$4,872
7	\$8,259	\$7,309	\$8,383	\$5,492
8	\$9,192	\$8,135	\$9,330	\$6,113
Each	\$934	\$826	\$948	\$621

HISTORICAL MAGI MEDICAID INCOME ELIGIBILITY STANDARDS – FPL BASED				
Effective 4/01/2019 - 3/31/2020				
Household Size	Pregnant Women	Children-Under age 19 With Insurance	Children-Under age 19 Without Insurance	Expansion Group
	200% of FPL	177% of FPL	203% of FPL	
1	n/a	\$2,301	\$2,639	\$1,729
2	\$3,522	\$3,117	\$3,575	\$2,342
3	\$4,444	\$3,933	\$4,510	\$2,955
4	\$5,365	\$4,749	\$5,446	\$3,568
5	\$6,287	\$5,564	\$6,381	\$4,181
6	\$7,209	\$6,380	\$7,317	\$4,794
7	\$8,130	\$7,196	\$8,252	\$5,407
8	\$9,052	\$8,011	\$9,188	\$6,020
Each	\$922	\$816	\$936	\$613

HISTORICAL MAGI MEDICAID INCOME ELIGIBILITY STANDARDS – FPL BASED				
Effective 4/01/2018 – 3/31/19				
Household Size	Pregnant Women	Children-Under age 19 With Insurance	Children-Under age 19 Without Insurance	Expansion Group
	200% of FPL	177% of FPL	203% of FPL	133% of FPL
1	n/a	\$2,240	\$2,568	\$1,683
2	\$3,430	\$3,036	\$3,482	\$2,281
3	\$4,330	\$3,833	\$4,395	\$2,880
4	\$5,230	\$4,629	\$5,309	\$3,478
5	\$6,130	\$5,426	\$6,222	\$4,077
6	\$7,030	\$6,222	\$7,136	\$4,675
7	\$7,930	\$7,019	\$8,049	\$5,274
8	\$8,830	\$7,815	\$8,963	\$5,872
Each	\$900	\$797	\$914	\$599

HISTORICAL MAGI MEDICAID INCOME ELIGIBILITY STANDARDS – FPL BASED				
Effective 4/01/2017 – 3/31/18				
Household Size	Pregnant Women	Children-Under age 19 With Insurance	Children-Under age 19 Without Insurance	Expansion Group
	200% of FPL	177% of FPL	203% of FPL	133% of FPL
1	n/a	\$2,222	\$2,548	\$1,670
2	\$3,382	\$2,993	\$3,433	\$2,249
3	\$4,254	\$3,765	\$4,318	\$2,829
4	\$5,125	\$4,536	\$5,202	\$3,409
5	\$5,997	\$5,308	\$6,087	\$3,988
6	\$6,869	\$6,079	\$6,972	\$4,568
7	\$7,740	\$6,850	\$7,857	\$5,148
8	\$8,612	\$7,622	\$8,741	\$5,727
Each	\$872	\$772	\$885	\$580

HISTORICAL MAGI MEDICAID INCOME ELIGIBILITY STANDARDS – FPL BASED				
Effective 4/01/2016 – 3/31/17				
Household Size	Pregnant Women	Children-Under age 19 With Insurance	Children-Under age 19 Without Insurance	Expansion Group
	200% of FPL	177% of FPL	203% of FPL	133% of FPL
1	n/a	\$2,189	\$2,511	\$1,645
2	\$3,337	\$2,953	\$3,387	\$2,219
3	\$4,200	\$3,717	\$4,263	\$2,793
4	\$5,064	\$4,482	\$5,140	\$3,368
5	\$5,927	\$5,246	\$6,016	\$3,942
6	\$6,790	\$6,010	\$6,892	\$4,516
7	\$7,654	\$6,774	\$7,769	\$5,090
8	\$8,520	\$7,541	\$8,648	\$5,666
Each	\$867	\$767	\$880	\$577

2017 – 2020 MAGI MEDICAID INCOME ELIGIBILITY STANDARDS – COLA BASED				
Parents / Caretaker Relatives and Under 21				
Household Size	Income Standard Effective 1/01/17	Income Standard Effective 1/01/18	Income Standard Effective 1/01/19	Income Standard Effective 1/01/20
1	\$1,487	\$1,487	\$1,487	\$1,487
2	\$2,370	\$2,370	\$2,370	\$2,370
3	\$2,904	\$2,904	\$2,904	\$2,904
4	\$3,437	\$3,437	\$3,437	\$3,437
5	\$3,972	\$3,972	\$3,972	\$3,972
6	\$4,505	\$4,505	\$4,505	\$4,505
7	\$5,038	\$5,038	\$5,038	\$5,038
8	\$5,571	\$5,571	\$5,571	\$5,571
9	\$6,105	\$6,105	\$6,105	\$6,105
10	\$6,638	\$6,638	\$6,638	\$6,638
Each Additional	\$534	\$534	\$534	\$534

2017 – 2020 MAGI MEDICAID INCOME DISREGARD 5% of FPL				
Household Size	Income Standard 4/01/2017 – 3/31/2018	Income Standard 4/01/2018 – 3/31/2019	Income Standard 4/01/2019 – 3/31/2020	Income Standard Effective 4/01/2020
1	\$63	\$64	\$65	\$67
2	\$85	\$86	\$89	\$90
3	\$107	\$109	\$112	\$114
4	\$129	\$131	\$135	\$137
5	\$150	\$154	\$158	\$160
6	\$172	\$176	\$181	\$184
7	\$194	\$199	\$204	\$207
8	\$216	\$221	\$227	\$230
9	\$238	\$244	\$251	\$254
10	\$260	\$267	\$275	\$278
Each	\$22	\$23	\$24	\$24

2017 – 2020 NON-MAGI MEDICAID INCOME ELIGIBILITY STANDARDS (Institutionalized Children)				
Household Size	Income Standard Effective 1/01/2017	Income Standard Effective 1/01/2018	Income Standard Effective 1/01/2019	Income Standard Effective 1/01/2020
	300% of SSI	300% of SSI	300% of SSI	300% of SSI
1	\$2,205	\$2,250	\$2,313	\$2,349

OLD AGE AND DISABLED INCOME ELIGIBILITY STANDARDS Effective 4/01/2020					
HOUSEHOLD SIZE	WORKING DISABLED	QMB	SLMB BASE	SLMB PLUS	QDWI
	250% of FPL	100% of FPL	120% of FPL	135% of FPL	200% of FPL
1	\$3,323	\$1,330	\$1,595	\$1,795	\$2,659
2	\$4,490	\$1,796	\$2,155	\$2,425	\$3,592
3	\$5,657				
4	\$6,823				
5	\$7,990				
6	\$9,157				
7	\$10,323				
8	\$11,490				
Each Additional	\$1,167				

2020 REFUSED CASH MEDICAID INCOME LIMITS	
HOUSEHOLD TYPE	1/01/2020
A Individual (A1E)	\$1,455
B Individual (B1E)	\$1,455
ALH Individual (H1E)	\$1,455
A Couple, 1 Eligible (A2S)	\$2,155
B Couple, 1 Eligible (B2S)	\$2,155
ALH Couple, 1 Eligible (H2S)	\$2,155
A Couple, Both Eligible (A2C)	\$2,155
B Couple, Both Eligible (B2C)	\$2,155
ALH Couple, Both Eligible (H2C)	\$2,155
Nursing Home Regular (NHR)	\$1,455

2017 – 2020 SSI PAYMENT STANDARDS				
SSI COLA INCREASE	0.0%	0.3%	2.0%	1.6%
HOUSEHOLD TYPE	1/01/2017	1/01/2018	1/01/2019	1/01/2020
A Individual	\$735	\$750	\$771	\$783
B Individual	\$490	\$500	\$514	\$522
A Couple, Both Eligible	\$1,103	\$1,125	\$1,157	\$1,175
B Couple, Both Eligible	\$735	\$750	\$771	\$783
NH Personal Needs Allowance	\$30	\$30	\$30	\$30
2017 – 2020 LONG TERM CARE STANDARDS				
	1/01/2017	1/01/2018	1/01/2019	1/01/2020
NH, HCB Waiver, TEFRA Income Standard	\$2,205	\$2,250	\$2,313	\$2,349
Alaska NH Personal Needs Allowance	\$200	\$200	\$200	\$200
Alaska HCB Personal Needs Allowance	\$1,656	\$1,656	\$1,656	\$1,656
Alaska ALH Personal Needs Allowance	\$1,396	\$1,396	\$1,396	\$1,396
Maximum Community Spouse Resource Allowance	\$120,900	\$123,600	\$126,420	\$128,640
Community Spouse Monthly Income Maintenance Standard	\$3,022.50	\$3,090	\$3,160.50	\$3,216.50
Monthly Income Standard for Additional Members	\$1,007.50	\$1,030	\$1,053.50	\$1,072.00



HISTORICAL OLD AGE AND DISABLED INCOME ELIGIBILITY STANDARDS					
Effective 4/01/2018 – 3/31/2019					
HOUSEHOLD SIZE	WORKING DISABLED	QMB	SLMB BASE	SLMB PLUS	QDWI
	250% of FPL	100% of FPL	120% of FPL	135% of FPL	200% of FPL
1	\$3,163	\$1,265	\$1,518	\$1,708	\$2,530
2	\$4,288	\$1,715	\$2,058	\$2,316	\$3,430
3	\$5,413				
4	\$6,538				
5	\$7,663				
6	\$8,788				
7	\$9,913				
8	\$11,038				
Each Additional	\$1,125				

HISTORICAL OLD AGE AND DISABLED INCOME ELIGIBILITY STANDARDS					
Effective 4/01/2017 – 3/31/2018					
HOUSEHOLD SIZE	WORKING DISABLED	QMB	SLMB BASE	SLMB PLUS	QDWI
	250% of FPL	100% of FPL	120% of FPL	135% of FPL	200% of FPL
1	\$3,138	\$1,255	\$1,506	\$1,695	\$2,510
2	\$4,228	\$1,691	\$2,029	\$2,283	\$3,382
3	\$5,317				
4	\$6,407				
5	\$7,496				
6	\$8,586				
7	\$9,675				
8	\$10,765				
Each Additional	\$1,090				

HISTORICAL OLD AGE AND DISABLED INCOME ELIGIBILITY STANDARDS					
Effective 4/01/2016 – 3/31/2017					
HOUSEHOLD SIZE	WORKING DISABLED	QMB	SLMB BASE	SLMB PLUS	QDWI
	250% of FPL	100% of FPL	120% of FPL	135% of FPL	200% of FPL
1	\$3,092	\$1,237	\$1,484	\$1,670	\$2,474
2	\$4,171	\$1,669	\$2,002	\$2,253	\$3,337
3	\$5,250				
4	\$6,330				
5	\$7,409				
6	\$8,488				
7	\$9,567				
8	\$10,650				
Each Additional	\$1,084				