



SSI-Related Programs & Coverage Groups – Financial Eligibility Standards: April 2024

PROGRAMS & TYPES OF COVERAGE	INCOME		ASSETS		MAINTENANCE NEEDS STANDARDS / OTHER							
	Individual	Couple	Individual	Couple								
PROGRAMS MANAGED BY SOCIAL SECURITY (eff 04/01/2023)					Disregards: Standard Disregard = \$20 Earned Income Disregard = \$65 + 1/2 Student Earned Income Disregard = \$2,220 monthly, maximum \$8,950 for calendar year Ineligible Spouse Deeming: 1/2 FBR = \$457 Child Allocation = \$457/child (Difference between the couple and single FBR) Parent to Disabled Child Deeming: Parent Allocation = \$841 Disability Substantial Gainful Activity (SGA) = \$1,470 non-blind \$2,460 blind Medicare Part B Premium = \$174.70, Part A free for most or \$505 *Interim figures are calculated based on the 2022 8.7 % Cost of Living Adjustment (COLA) until the official Federal Poverty Levels (FPL) are published in the Spring of 2023. **These Standards change effective April 1 of each year in accordance with federal law							
Supplemental Security Income (SSI) Federal Benefit Rate (FBR) Cash payment of SSI from SSA; Includes Full Medicaid	\$943 (FBR)	\$1,415 (FBR)	\$2,000	\$3,000								
**Low Income Subsidy (LIS) or Extra Help (150% FPL) Helps with costs associated with Medicare Prescription Drug Plans Automatic with full Medicaid or Medicare Savings Programs (QMB, SLMB, QI1). Income asset limits change annually	\$1,882.50	\$2,555	\$15,510 (w/ Burial Exc)	\$30,950 (w/ Burial Exc)								
COVERAGE GROUPS FOR PEOPLE 65+ OR DISABLED (Community Medicaid Programs) (interim 04/01/2023) *												
**MEDS-AD (MM S) (88% FPL) Full Community Medicaid	\$1,104	\$1,492	\$5,000	\$6,000								
Medically Needy (No Income Limit) Medically Needy Income Level (MNIL) Full Community Medicaid <u>when</u> Share of Cost is met	Subtract \$180 from gross income	Subtract \$241 from gross income										
PROGRAMS FOR PEOPLE WITH MEDICARE (Medicare Savings Programs/Buy-In) (interim 04/01/2023) * not incl. \$20 disregard												
**QMB (100% FPL) Pays Medicare A & B premiums, coinsurance & deductibles only	\$1,255	\$1,703	\$9,430	\$14,130								
**SLMB (120% FPL) Pays for Medicare Part B premium only	\$1,506	\$2,044										
**QI1 (135% FPL) Pays for Medicare Part B premium only	\$1,694	\$2,300										
**Working Disabled (200% FPL) Qualified Disabled Working Individuals (QDWI) Program Pays for Medicare Part A only . Must have lost SSDI due to employment	\$2,510	\$3,407	\$5,000	\$6,000								
PROGRAMS BASED ON INSTITUTIONAL POLICY – Patient Responsibility and Income Trusts may apply. (eff 01/01/2023)					PERSONAL NEEDS ALLOWANCE <table border="1"> <thead> <tr> <th>Individual</th> <th>Couple</th> </tr> </thead> <tbody> <tr> <td>\$160</td> <td>\$320</td> </tr> <tr> <td>Community NH \$1,133 ↓ \$130</td> <td>Community NH \$1,456 ↓ \$260</td> </tr> </tbody> </table>		Individual	Couple	\$160	\$320	Community NH \$1,133 ↓ \$130	Community NH \$1,456 ↓ \$260
Individual	Couple											
\$160	\$320											
Community NH \$1,133 ↓ \$130	Community NH \$1,456 ↓ \$260											
*Institutional Care Program (ICP) Pays Nursing Home (NH) room, board & care Pays Medicare A & B premiums, coinsurance & deductibles	\$2,829 (MEDS-AD Institutional Income Limit \$1,104)	\$5,658 (MEDS-AD Institutional Income Limit \$1,492)	\$2,000 (\$5,000 if MEDS-AD eligible)	\$3,000 (\$6,000 if MEDS-AD eligible)	SSI Individual \$30 only in NH = \$100 (SPS) Transfer of Asset Divisor = \$10,809 (eff 8/2022) Community Hospice Allocations: Spouse only = FBR (\$914) Spouse + Dependents or Dependents Only = CNS Standard Spousal Impoverishment: (eff 07/01/2022) MMMNA = \$2,289 Excess shelter = \$687** Standard Utility Allowance = \$376 (eff 1/1/2023) Maximum Income Allowance = \$3,716 Community Spouse Resource Allowance = \$148,620 Family Members Allowance with Spouse = (MMMNA-income) divided by 3 Dependents with no Spouse = CNS Standard Home Equity Interest Limit = \$688,000							
*Hospice Pays Hospice services related to terminal illness Pays Medicare A & B premiums, coinsurance & deductibles												
*Home and Community Based Services (HCBS) Waivers or PACE Pays Medicare A & B premiums, coinsurance & deductibles												
STATE FUNDED PROGRAMS (eff 01/01/2023)												
*OPTIONAL STATE SUPPLEMENT (OSS) REDESIGN Maximum Payment = \$78.40 single / \$156.80 Couple Assists with paying room & board at alternate living facilities	\$992.40	\$1,911.80	\$2,000	\$3,000	\$54 Provider rate \$938.40	\$108 Provider rate \$1,803.80						
*PROTECTED OSS (Reference OLM 2040.0822) Maximum Payment = \$239 single / \$478 Couple Assists with paying room & board at alternate living facilities	\$1,099	\$2,125										
HOME CARE FOR DISABLED ADULTS (HCDA) Pays small stipend to caregivers of disabled	\$2,742	\$5,484										