

2018 NYS INCOME AND RESOURCE STANDARDS AND FEDERAL POVERTY LEVELS (FPL)



MAPDR-01 12/29/2017
(Obsoletes MAPDR-71)

Reference Documents: GIS 17 MA/19, MBL-Transmittal 2017-1, WLM 2017-00059-03.

Note:* Items that are highlighted in yellow are the 2017 levels that are awaiting 2018 levels to be announced. The Items that are highlighted in green are the 2018 levels. Also note that sections have shifted from prior year releases.

Financial Levels for Medicaid and Related Program Eligibility

1. Non-MAGI Medicaid Levels (SSI and SSI-Related Consumers With or Without A Surplus)											
Family Size	1	2	3	4	5	6	7	8	9	10	Each Additional Person
Monthly Income	\$842	\$1,233	\$1,418	\$1,603	\$1,788	\$1,973	\$2,158	\$2,343	\$2,528	\$2,713	\$185

2. Non-MAGI Resource Levels											
Family Size	1	2	3	4	5	6	7	8	9	10	Each Additional Person
Resource Level	\$15,150	\$22,200	\$25,014	\$28,275	\$31,539	\$34,800	\$38,064	\$41,325	\$44,588	\$47,850	\$3,263

3. Spousal Support and Resource Levels		
Income (MMMNA) - \$3,090.00 (Inst Spouse) - \$50	Resources – (Minimum) - \$74,820 (Maximum) - \$123,600 (Inst Spouse) - \$14,850	Family Member Allowance Formula: Use - \$2,030 \$677 is the maximum family member allowance

4. MBI-WPD (Persons 16-64)		
Family Size	1	2
Monthly Income 250% FPL	\$2,513	\$3,384
Resources	\$20,000	\$30,000

5. Family Planning Benefit Program Income Levels (No Resource Test)							
Family Size	1	2	3	4	5	6	Each Additional Person
FPBP 223% FPL (Child Bearing Age)	\$2,242	\$3,018	\$3,795	\$4,572	\$5,349	\$6,126	\$777

Note: FPBP eligibility is to be determined using only the applicant's income. The applicant's income is then compared to 223% of the federal poverty level for the appropriate family size. Family size continues to be determined using legal responsibility.

6. Medicare Savings Program (Buy-In)				7. Other Important Figures		
	Income					
	Family of 1		Family of 2			
QMB 100% FPL	Annual	\$12,060	\$16,240	<p>Medicare Part A Premium: \$227.00 (30-39 Quarters) \$413.00 (Less than 30 Quarters)</p> <p>Medicare Part B Premium: (Rates based upon 2014 income tax filings)</p> <ul style="list-style-type: none"> The Cost of Living adjustment (COLA) for Social Security will be 0.2 percent for 2018. Medicare consumers whose Part B premium increased by the same amount as their Social Security benefit will not see the full 2% increase in their monthly benefit. The 2% COLA increase is expected to be enough to cover the difference between a consumer's previous premium and the Standard Part B Medicare Premium, which is expected to stay at around \$134.00 per month. The Part B Medicare Premium will be 109.00 for most Medicare Part B recipients in receipt of benefits. This includes individuals with an annual income of \$85,000 or less and couples with joint annual incomes of \$170,000 or less. <p>Under federal law commonly known as the "hold harmless" provision, Medicare Part B premiums cannot raise more than the COLA in any year for most consumers. However, this provision does not apply to the consumers listed below. Their Part B premium increased to \$134.00.</p> <ul style="list-style-type: none"> Individuals whose income is above \$85,000 or a married individual when the couple's combined income is over \$170,000 will pay the higher premium. New Medicare Part B beneficiaries will pay the higher premium. Since they did not pay the premium the previous year. Individuals who do not have the Part B premium deducted from their Social Security benefit. This includes individuals who are in the Medicare Buy-In program. These individuals will not to be directly affected, as the increase premium will be paid by the State. <p>Standard Allocation: From non-SSI-related parent to non-SSI- related child \$384</p> <p>PASS-THROUGH FACTORS: .968 and .159</p>		
	Monthly	\$1,005	\$1,354			
SLIMB 120% FPL	Annual	\$14,472	\$19,488	Family Size		
	Monthly	\$1,206	\$1,624	COBRA (100% FPL)	\$1,005	\$1,354
QI-1 135% FPL	Annual	\$16,281	\$21,924	AIDS Health Ins. Program (AHIP) (185% FPL)	\$1,860	\$2,504
	Monthly	\$1,357	\$1,827	QWDI (200% FPL)	\$2,010	\$2,707
NO RESOURCE TEST FOR ANY MSP PROGRAM				COBRA, QWDI (Resource Level)	\$4,000	\$6,000
				Pickle/DAC/SSI (Resource Level)	\$2,000	\$3,000

8. Monthly Regional Nursing Home Rates (Use the rate for the region in which the facility is located)	
NEW YORK CITY (All boroughs) - \$12,319	LONG ISLAND - \$13,053 Nassau, Suffolk
NORTHEASTERN - \$10,719 Albany, Clinton, Columbia, Delaware, Essex, Franklin, Fulton, Greene, Hamilton, Montgomery, Otsego, Rensselaer, Saratoga, Schenectady, Schoharie, Warren, Washington	NORTHERN METROPOLITAN - \$12,428 Duchess, Orange, Putnam, Rockland, Sullivan, Ulster, Westchester
WESTERN - \$10,239 Allegany, Cattaraugus, Chautauqua, Erie, Genesee, Niagara, Orleans, Wyoming	ROCHESTER - \$11,692 Chemung, Livingston, Monroe, Ontario, Schuyler, Seneca, Steuben, Wayne, Yates
CENTRAL - \$9,722 Broome, Cayuga, Chenango, Cortland, Herkimer, Jefferson, Lewis, Madison, Oneida, Onondaga, Oswego, St. Lawrence, Tioga, Tompkins	

9. Fair Market Regional Rates (Averages) / Special Standards for Housing Expenses

NEW YORK CITY (All boroughs) (Shelter = 59) - \$1305	LONG ISLAND (Shelter = 60) - \$1274
NORTHEASTERN (Shelter = 54) - \$467	NORTHERN METROPOLITAN (Shelter = 58) - \$935
WESTERN (Shelter = 57) - \$365	ROCHESTER (Shelter = 56) - \$424
CENTRAL (Shelter = 55) - \$417	
CONGREGATE CARE LEVEL III - (42+ Regional Rate for County) - \$1,809 - \$2,749	

In determining the community resource allowance on and after January 1, 2016, the community spouse is permitted to retain resources in an amount equal to the greater of the following: **\$74,820** or the amount of the spousal share up to **\$123,600**. The spousal share is the amount equal to one-half of the total value of the countable resources of the couple as of the beginning of the most recent continuous period of institutionalization of the institutionalized spouse. The look-back period is anchored in the month the A/R is both institutionalized and applying for MA.

10. MAGI Levels for Medicaid and Related Program Eligibility

Family Size	1	2	3	4	5	6	7	8	9	10	Each Add'l Person
Pregnant Women and Infants Under Age 1 (223% FPL)	\$2,242	\$3,018	\$3,795	\$4,572	\$5,349	\$6,126	\$6,902	\$7,679	\$8,456	\$9,233	\$777
Infants Under Age 1 223% FPL	\$2,242	\$3,018	\$3,795	\$4,572	\$5,349	\$6,126	\$6,902	\$7,679	\$8,456	\$9,233	\$777
Children Age 1-5 154% FPL	\$1,548	\$2,085	\$2,621	\$3,157	\$3,694	\$4,230	\$4,767	\$5,303	\$5,840	\$6,376	\$537
Children Age 6 -19 110% FPL	\$1,106	\$1,489	\$1,872	\$2,255	\$2,639	\$3,022	\$3,405	\$3,788	\$4,171	\$4,554	\$384
Children Age 6-19 (Expanded - 154% FPL)	\$1,548	\$2,085	\$2,621	\$3,157	\$3,694	\$4,230	\$4,767	\$5,303	\$5,840	\$6,376	\$537
Parents and Caretaker Relatives 138% FPL	\$1,387	\$1,868	\$2,349	\$2,829	\$3,310	\$3,791	\$4,272	\$4,752	\$5,233	\$5,714	\$481
19 and 20 Year Olds Living With Parents 138% FPL	\$1,387	\$1,868	\$2,349	\$2,829	\$3,310	\$3,791	\$4,272	\$4,752	\$5,233	\$5,714	\$481
19 and 20 Year Olds Living With Parents (Expanded - 155% FPL)	\$1,558	\$2,098	\$2,638	\$3,178	\$3,718	\$4,258	\$4,798	\$5,338	\$5,878	\$6,417	\$540
S/CCs and 19 and 20 Year Olds Living Alone (100% FPL)	\$1,005	\$1,354	\$1,702	\$2,050	\$2,399	\$2,747	\$3,095	\$3,444	\$3,792	\$4,140	\$349
S/CCs and 19 and 20 Year Olds Living Alone (Expanded 138% FPL)	\$1,387	\$1,868	\$2,349	\$2,829	\$3,310	\$3,791	\$4,272	\$4,752	\$5,233	\$5,714	\$481

11. Children's Medicaid Income Eligibility Levels

Family Size	1	2	3	4	5	6	7	8	Each Additional Person
Children Under 1 year; Pregnant Women*	\$2,242	\$3,018	\$3,795	\$4,572	\$5,349	\$6,126	\$6,902	\$7,679	\$777
Children 1-18 Years	\$1,548	\$2,085	\$2,621	\$3,157	\$3,694	\$4,230	\$4,767	\$5,303	\$537

Note: *Pregnant women household size calculation includes all expected children.

12. Child Health Plus Premium Levels – Monthly Income by Family Size (Children Under 19 Not Medicaid Eligible)

Premium Categories	1	2	3	4	5	6	Each Add'l Person
Free Insurance (under 222% FPL)	\$1,607	\$2,165	\$2,722	\$3,279	\$3,837	\$4,394	\$557
\$9 per child per month (Max. \$27 per family) (222% - 249% FPL)	\$2,232	\$3,005	\$3,778	\$4,551	\$5,325	\$6,098	\$774
\$15 per child per month (Max \$45/Family) (250% - 299% FPL)	\$2,513	\$3,384	\$4,255	\$5,125	\$5,996	\$6,867	\$871
\$30 per child per month (Max. \$90 per family) (300% - 349% FPL)	\$3,015	\$4,060	\$5,105	\$6,150	\$7,195	\$8,240	\$1,045
\$45 per child per month (Max. \$135 per family) (350% - 399% FPL)	\$3,518	\$4,737	\$5,956	\$7,175	\$8,395	\$9,614	\$1,220
\$60 per child per month (Max. \$180 per family) (400% FPL)	\$4,020	\$5,414	\$6,807	\$8,200	\$9,594	\$10,987	\$1,394
Full Premium per child/month if over 400% FPL (Premium amount varies from plan to plan)	Over \$4,020	Over \$5,414	Over \$6,807	Over \$8,200	Over \$9,594	Over \$10,987	Over 1,394

13. Disabled Adult Children (DAC) Levels

Living Arrangements	Shelter Types	Amount
1	15	\$1,016.48
1	28	\$978.48
1	16	\$1,185.00
1	29	\$1,155.00
1	42	\$1,444.00
1 or 5	Other than: 15, 16, 28, 29 or 42	\$837.00
2	15	\$2,032.96
2	28	\$1,956.96
2	16	\$2,370.00
2	29	\$2,310.00
2	42	\$2,888.00
2 or 6	Other than: 15, 16, 28, 29 or 42	\$1,229.00
3	All	\$978.48
4	All	\$1,016.48

14. Congregate Care Level I, II and III Levels		
Shelter Codes	PNA	Shelter Amount
15 - (NYC, Nassau, Suffolk, Westchester, Rockland Counties) Level I	\$144.00	\$872.48
16 - (NYC, Nassau, Suffolk, Westchester, Rockland Counties) Level II	\$166.00	\$1,019.00
28 - (Rest of State) Level I	\$144.00	\$834.48
29 - (Rest of State) Level II	\$166.00	\$989.00
42 - (NYC, Nassau, Suffolk, Westchester, Rockland Counties) Level III	\$198.00	\$1,246.00
42 - (Rest of State) Level III	\$198.00	\$1,246.00

15. SSI Levels				
SSI Consumer	Amount			
Allocation Amount (The difference between the regular Medicaid levels for a household of two [\$1,209.00] and a household of one [\$825.00])	\$391.00			
Personal Needs Allowance (Certain waiver participants subject to spousal impoverishment budgeting)	\$391.00			
Maximum Social Security Benefit at Full Retirement Age	\$2,788			
State Supplement	Individual	\$87.00	Couple	\$104.00
Federal Benefit Rate	Individual	\$750.00	Couple	\$1,125.00
SSI Resource Levels	Individual	\$2,000.00	Couple	\$3,000.00
Family Care Level (LA 3 & 4)	NYC and Nassau, Suffolk, Westchester and Rockland	1016.48	Upstate	978.48
SSI Related Student Earned Income Disregard	Monthly	\$1,790.00	Annual Max.	\$7,200.00

16. Substantial Gainful Activity (SGA) Levels		
Category	Amount	Payment Occurrence
Non-Blind	\$1,170.00	Monthly
Blind	\$1,950.00	Monthly
Month Trial Work Period	\$840.00	Monthly

17. Home Equity Maximum	
Medicaid Coverage Limit (RVI 1 and 2 cases)	\$840,000