

# MEDICAID STANDARDS HELP SHEET

MAGI

Medicaid HH Size	Ribicoff Kids 44%	MAGI Adult 66%	Parents/ Caretaker Relatives 90%	Federal Poverty Level 100%	MAGI Child 107%	Expansion Adults 133%	MAGI Child 141%	MBIWD Premium Calculation 150%	Children with Insurance 156%	Pregnant Women 200%	Children without Insurance 206%	5% of FPL for Family Size*
1	\$432	\$648	\$883	\$981	\$1,050	\$1,305	\$1,383	\$1,472	\$1,531	\$1,962	\$2,021	\$50
2	\$585	\$877	\$1,195	\$1,328	\$1,421	\$1,766	\$1,872	\$1,992	\$2,071	\$2,655	\$2,735	\$67
3	\$737	\$1,105	\$1,507	\$1,675	\$1,792	\$2,227	\$2,361	\$2,512	\$2,612	\$3,349	\$3,449	\$84
4	\$890	\$1,334	\$1,819	\$2,021	\$2,163	\$2,688	\$2,850	\$3,032	\$3,153	\$4,042	\$4,163	\$102
5	\$1,042	\$1,563	\$2,131	\$2,368	\$2,534	\$3,149	\$3,339	\$3,552	\$3,694	\$4,735	\$4,878	\$119
6	\$1,195	\$1,792	\$2,443	\$2,715	\$2,905	\$3,610	\$3,827	\$4,072	\$4,235	\$5,429	\$5,592	\$136
7	\$1,347	\$2,021	\$2,755	\$3,061	\$3,276	\$4,071	\$4,316	\$4,592	\$4,775	\$6,122	\$6,306	\$154
8	\$1,500	\$2,249	\$3,067	\$3,408	\$3,647	\$4,532	\$4,805	\$5,112	\$5,316	\$6,815	\$7,020	\$171
9	\$1,652	\$2,478	\$3,379	\$3,755	\$4,017	\$4,994	\$5,294	\$5,632	\$5,857	\$7,509	\$7,734	\$188
10	\$1,805	\$2,707	\$3,691	\$4,101	\$4,388	\$5,455	\$5,783	\$6,152	\$6,398	\$8,202	\$8,448	\$206
11	\$1,957	\$2,936	\$4,003	\$4,448	\$4,759	\$5,916	\$6,271	\$6,672	\$6,939	\$8,895	\$9,162	\$223
12	\$2,110	\$3,165	\$4,315	\$4,795	\$5,130	\$6,377	\$6,760	\$7,192	\$7,479	\$9,589	\$9,876	\$240

\* Use 5% deduction ONLY when  
comparing income to highest FPL for  
family size

## MEDICAID NEED STD 1-1-15

Single	\$643
Couple	\$1,100

## QMB NEED STD 3-1-15

Single	\$981
Couple	\$1,328

## SLMB NEED STD 3-1-15

Single	\$1,177
Couple	\$1,593

## QI-1 3-1-15

Single	\$1,325
Couple	\$1,793

## SSI PMT (FBR) 1-1-15

Single	\$733
Couple	\$1,100

## MEDICAID RESOURCE LIMIT

Single	\$1,500
Couple	\$2,250

## QMB/SLMB RESOURCE LIMIT

Single	\$7,280
Couple	\$10,930

## MEDICARE DEDUCTIBLE 1-1-14

Part A	\$1,216
Part B	\$147

## MEDICARE PREMIUM

1-1-15	\$104.90
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## DEEMING

Spouse to Child	\$367
1 Parent	\$733
2 Parents	\$1,100

## NURSING HOMES (TMPE & TMNA)

SIL Special Income Level (Eff. 1/1/15)	\$2,199
PNA NF (Eff. 1/1/15)	\$50 (to \$115)
PNA ICF/IID (Eff. 1/1/15)	\$40 (to \$105)
SIMNA HCBS Waiver (Eff. 1/1/15)	\$1,430
ALMNA Assisted Living Maintenance Need	\$733
PRA Protected Resource Amount Min (Eff.	\$23,844
PRA Protected Resource Amount Max (Eff.	\$119,220
MMMNA Maximum (Eff. 1/1/15)	\$2,981
MMMNA (Eff. 7/1/14)	\$1,967
ESA Standard (Eff. 7/1/14)	\$590
Avg. Monthly Private Pay Rate (Eff. 9/1/14)	\$6,327
Home Equity Limit (Eff. 2/1/15)	\$552,000
SUA Standard Utility Allowance (Eff. 10/1/	\$498
MBIWD Individual Resource Limit (Eff. 1/1,	\$11,473
MBIWD 250% FPL (Eff. 3/1/15)	\$2,453

ABD