

| CHART A1.1 - ABD MEDICAID RESOURCE LIMITS | | | | |
|---|------------------|--------------|---|----------------|
| Type Limit | Individual Limit | Couple Limit | LA-D Individual With a Community Spouse | Effective Date |
| SSI | \$2000 | \$3000 | N/A | 7-88 |
| AMN | \$2000 | \$4000 | N/A | 4-90 |
| QMB/SLMB/QIS/QDWI | \$4000 | \$6000 | N/A | 1-89 |
| Spousal Impoverishment | N/A | N/A | \$89,280 + 2000 = \$91,280.00 | 1-02 |

| CHART A1.2 - ABD MEDICAID INCOME LIMITS | | | | |
|---|-----|------------------|--------------|---|
| Type Limit | LA | Individual Limit | Couple Limit | Effective Date |
| AMN | All | \$317 | \$375 | 10-90 |
| FBR (SSI Limit) | A | \$545 | \$817 | 1-02 |
| | B | \$363.34 | \$545 | |
| | C | \$545 | N/A | |
| | D | \$30 | N/A | |
| Medicaid CAP | D | \$1635 | \$3270 | 1-02 |
| QDWI | A | \$3019 | \$4045 | 3-02 Note: Effective 3-98, ISM no longer applies to this COA eliminating LA-B. |
| | C | \$3019 | N/A | |
| | D | \$3019 | N/A | |
| QMB | A | \$739 | \$995 | 4-02 |
| SLMB | A | \$886 | \$1194 | 4-02 |
| QI-1 | A | \$997 | \$1344 | 3-02 |
| QI-2 | A | \$1293 | \$1742 | 3-02 |

CHART A1.3 - TRANSFER OF RESOURCE PENALTY DETERMINATION

| | | |
|---|--------|------|
| Averaging Nursing Home Private Pay Billing Rate | \$3131 | 4-02 |
|---|--------|------|

**CHART A1.4 - PRESUMED MAXIMUM VALUE (PMV) OF ISM
AND LIVING ALLOWANCE TO EACH INELIGIBLE CHILD**

| Income Limit | PMV for an Individual | PMV for a Couple | Living Allowance | Effective Date |
|--------------|-----------------------|------------------|------------------|----------------|
| AMN | \$201.66 | \$292.33 | \$273 | 1-02 |
| FBR | \$201.66 | \$292.33 | \$273 | 1-02 |
| QDWI | N/A | N/A | \$670 | 3-02 |
| QMB | N/A | N/A | \$339 | 4-02 |
| SLMB | N/A | N/A | \$405 | 4-02 |
| QI-1 | N/A | N/A | \$455 | 3-02 |
| QI-2 | N/A | N/A | \$588 | 3-02 |

QI-2 Refund Amount is \$3.91 effective 1-02.

Medicare Part B Premium rate is \$54.00 effective 1-02.

Maximum earnings for substantial gainful activity (SGA) are \$780.00 per month.

| CHART A1.5 - PERSONAL NEEDS ALLOWANCES (PNA) FOR AN LA-D RECIPIENT | | |
|--|--|---|
| IF the LA-D Recipient is | THEN use the following as the PNA in the Patient Liability/Cost Share Budget: | |
| an individual in a nursing home | \$30 | Effective 1-92 |
| a VA pensioner or his/her surviving spouse in a nursing home who has dependents | \$30 | Effective 1-92 |
| a VA pensioner or his/her surviving spouse in a nursing home who has no dependents NOTE: The VA check for these individuals is reduced to the amount of the PNA, regardless of other income. | \$90 | Effective 1-92 (Effective 1-93 for the Surviving Spouse) |
| an individual in CCSP | the current amount of the Individual FBR for LA-A | |
| an individual in ICWP | the current amount of the Community Spouse Maintenance Need Standard | |
| an individual in MRWP | the current Medicaid Cap | |

| CHART A1.6 - NEED STANDARDS FOR DIVERSION OF INCOME TO A COMMUNITY SPOUSE OR DEPENDENT FAMILY MEMBER IN A PATIENT LIABILITY/COST SHARE BUDGET | | |
|--|---------------|-----------------------|
| Diversion Standard | Amount | Effective Date |
| Community Spouse Maintenance Need Standard | \$2232 | 1-02 |
| Dependent Family Member Need Standard | \$1513 | 4-02 |