

## Appendix J: Eligibility Standards for Non-MAGI Programs

Program	Monthly income limit	Effective date	Asset maximum	Effective date
<b>Spend Down</b> (includes disabled child) - MHNS, MHSD, MHDC				
1 person – aged or disabled	\$ 1,067	04-01-24	\$ 5,726.00	07-01-23
2 people – aged or disabled	1,448	04-01-24	11,452.00	07-01-23
1 person – blind	1,255	04-01-24	5,726.00	07-01-23
2 people – blind	1,704	04-01-24	11,452.00	07-01-23
SGA (Substantial Gainful Activity) – aged or disabled	1,550	01-01-24		
SGA – blind	2,590	01-01-24		
<b>SSI (Supplemental Security Income)</b>				
1 person in own household	943	01-01-24		
2 people in own household	1,415	01-01-24		
1 person in another's household	629	01-01-24		
2 people in another's household	943	01-01-24		
SSI essential person in own household	472	01-01-24		
SSI 1619 (a) and (b)	3,690	01-01-24	2,000 individual 3,000 couple	
<b>Qualified Medicare Beneficiary (QMB)</b>				
1 person	1,255	04-01-24	9,430	01-01-24
2 people	1,704	04-01-24	14,130	01-01-24
3 People	2,152	04-01-24	14,130	01-01-24
<b>Specified Low-Income Medicare Beneficiary 1 (SLMB or SLMB1)</b>				
1 person	1,506	04-01-24	9,430	01-01-24
2 people	2,044	04-01-24	14,130	01-01-24
3 people	2,582	04-01-24	14,130	01-01-24
<b>Specified Low-Income Medicare Beneficiary 2 (SLMB2 or QI-1)</b>				
1 person	1,695	04-01-24	9,430	01-01-24
2 people	2,300	04-01-24	14,130	01-01-24
3 people	2,905	04-01-24	14,130	01-01-24

## Appendix J: Eligibility Standards for MHABD

Program	Monthly income limit	Effective date	Asset maximum	Effective date
<b>Blind Pension (BP)</b>	\$ 8,517 (sighted spouse)	04-01-24	\$ 29,999	2018
<b>Supplemental Aid to the Blind (SAB) consolidated standard</b>	\$ 1,019	01-01-24	\$ 5,726.00 indiv. 11,452.00 couple	07-01-23
<b>Qualified Disabled and Working Individuals (QDWI)</b>				
1 person	\$ 2,510	04-01-24	\$ 4,000	
2 people	3,407	04-01-24	6,000	
<b>Ticket to Work Health Assurance (TWHA)</b>				
1 person	\$ 3,765	04-01-24	\$ 5,726.00	07-01-23
2 people	5,110	04-01-24	11,452.00	07-01-23

<b>TWHA – Income effective 04-01-2024, Premiums effective 04-01-2019</b>			
Percent of FPL	Single or couple	Monthly income	Monthly premium
Less than 100%	Single	\$ 1,255.00 or less	\$ 0
	Couple	1,704.00 or less	0
100% up to but not including 150%	Single	1,255.01 – 1,882.99	42
	Couple	1,704.01 – 2,554.99	56
150% up to but not including 200%	Single	1,883.00 – 2,509.99	62
	Couple	2,555.00 – 3,406.99	85
200% up to but not including 250%	Single	2,510.00 – 3,137.99	104
	Couple	3,407.00 – 4,258.99	141
250% up to and including 300%	Single	3,138.00 – 3,765.00	156
	Couple	4,259.00 – 5,110.00	211

Other expenses	Amount	Effective Date
Supplementary Medical Insurance (SMI) Medicare Part B monthly premium	\$ 174.70	01-01-24
State mileage rate (per mile)	\$ 0.655	04-01-23

## Appendix J: Eligibility Standards for MHABD

<b>Vendor Care</b> - in a nursing facility, institution for the intellectually disabled, or mental or psychiatric hospital			
Vendor Surplus Calculation		Asset Maximum	Effective Date
All income paid to the facility as surplus minus \$50 personal needs allowance and allowable deductions: medical insurance premiums, allotments, child support		\$5,726.00 after Division of Assets	07-01-23
<b>Home and Community Based Services (HCB)</b> – nursing facility care in your own home			
Monthly income limit for eligible individual (not including spouse)	Effective date	Asset Maximum	Effective Date
\$1,649	01-01-24	\$5,726.00 after Division of Assets	07-01-23
<b>Other numbers used for Vendor and HCB calculations</b>			
<b>Spousal share</b> – used to determine Division of Assets		Available assets	Effective Date
• Minimum		\$ 30,828	01-01-24
• Maximum		154,140	01-01-24
<b>Allotment of income</b> – used to determine allotments to a community spouse or dependents		Monthly amount	Effective Date
• Minimum monthly maintenance needs allowance (MMMNA)		\$ 2,465	07-01-23
• Maximum MMMNA		3,854	01-01-24
• Maximum allocation to a child		472	01-01-24
<b>Shelter Expenses</b> – used to determine allotments to a community spouse			
Allowable Expense		Monthly limit	Effective Date
• Shelter standard		\$ 740	07-01-23
• Utility standard		475	10-01-23
• Telephone standard		76	10-01-23
<b>Maximum home equity</b> – For Vendor, HCB, or PACE		Asset Maximum	Effective Date
		\$ 713,000	01-01-24
<b>Transfer of property penalty</b>			
• Average monthly private pay nursing rate		\$ 7,536	04-01-24

## Appendix J: Eligibility Standards for MHABD

<b>Supplemental Nursing Care (SNC) – cash grant to participants living in supported living facilities</b>		
SNC income eligibility determination	Asset Maximum	Effective Date
SNC grant is available if the facility’s monthly residential care expense exceeds the participant’s countable income. The grant amount is the deficit up to the maximum monthly grant amount.	\$5,726.00 indiv \$11,452.00 couple	07-01-23
Grant type	Maximum monthly grant amount	Effective Date
<ul style="list-style-type: none"> <li>Residential care facility I</li> </ul>	\$ 156	07-01-00
<ul style="list-style-type: none"> <li>Residential care facility II</li> <li>Assisted living facility</li> <li>Intermediate or skilled without a level of care determination</li> </ul>	292	07-01-00
<ul style="list-style-type: none"> <li>Intermediate or skilled with a level of care determination</li> </ul>	390	07-01-00
<ul style="list-style-type: none"> <li>Personal needs allowance paid to all SNC participants</li> </ul>	50	01-01-15