

TO: Local District Commissioners, Medicaid Directors

FROM: Kathryn Kuhmerker, Deputy Commissioner
Office of Medicaid Management

SUBJECT: 2005 Medicaid Only Income Exemption and Resource Levels

EFFECTIVE DATE: January 1, 2005

CONTACT PERSON: Local District Support Unit 518-474-8216 Upstate
212-268-6855 NYC

Due to a 2.7% cost of living adjustment for SSA payments effective January 1, 2005, several figures used in determining Medicaid eligibility must be updated. Effective January 1, 2005, Medicaid eligibility must be determined using the following updated figures:

1. Medicaid income level for 1 is \$667/month or \$8,000/year.
2. Medicaid income level for 2 is \$975/month or \$11,700/year.
3. Medicaid income level for 3 is \$984/month or \$11,800/year.
4. Medicaid income level for 4 is \$992/month or \$11,900/year.
5. Medicaid income level for 5 is \$1,000/month or \$12,000/year.
6. Medicaid resource levels increase to \$4,000, \$5,850, \$5,900, \$5,950 and \$6,000 for households 1, 2, 3, 4 and 5 respectively. The income and resource levels for other size households remain the same as 2004.
7. The FBR for an individual is \$579/single and \$869/couple.
8. The allocation amount is \$308.
9. The 249e factors are .960 and .202.
10. The SSI resource levels remain \$2,000 for individuals and \$3,000 for couples.
11. The state supplement is \$87 for an individual and \$104 for a couple.
12. The Medicare Part A premium is \$375 per month.
13. The Medicare Part B premium increases to \$78.20 per month.
14. Maximum Community Spouse Resource Allowance is \$95,100.
15. Minimum Monthly Maintenance Needs Allowance is \$2,378.
16. Maximum Family Member Allowance is \$533/month.
17. Substantial Gainful Activity (SGA): Non-Blind \$830/month, Blind \$1,380/month, Trial Work Period (TWP) \$590/month.
18. SSI-related student earned income disregard limit of \$1,410 monthly up to a maximum of \$5,670 annually.
19. Please refer to MBL Transmittal 04-2 for the 2005 federal poverty levels and SSI Benefit Levels.

A chart with the new Medicaid levels and the estimated federal poverty levels is attached.

MBL has been programmed to use these figures when a From Date of January 1, 2005 or greater is entered. Upstate mass rebudgeting occurred the weekend of November 27-28, 2004. For Upstate, these changes were available on production November 29, 2004. For New York City, these changes will be available on production December 13, 2004.

Please direct any questions to the Local District Liaison Unit at 518-474-8216 Upstate and 212-268-6855 for NYC.

Medicaid-Only, Annual and (**Monthly**) Income and Resource
Standards and Federal Poverty Lines Effective January 2005

HOUSEHOLD SIZE	ONE	TWO	THREE	FOUR	FIVE	SIX	SEVEN	EIGHT	EACH ADDITIONAL PERSON
MA INCOME	8000 667	11700 975	11800 984	11900 992	12000 1000	13600 1134	15300 1275	17000 1417	1700 142
100% FPL	9520 794	12780 1065	16040 1337	19300 1609	22560 1880	25820 2152	29080 2424	32340 2695	3260 272
120% FPL	11424 952	15336 1278							
133% FPL	12662 1056	16998 1417	21334 1778	25669 2140	30005 2501	34341 2862	38677 3224	43013 3585	4336 362
135% FPL	12852 1071	17253 1438							
150% FPL	14280 1190	19170 1598	24060 2005	28950 2413	33840 2820	38730 3228	43620 3635	48510 4043	4890 408
185% FPL	17612 1468	23643 1971	29674 2473	35705 2976	41736 3478	47767 3981	53798 4484	59829 4986	6031 503
200% FPL	19040 1587	25560 2130	32080 2674	38600 3217	45120 3760	51640 4304	58160 4847	64680 5390	6520 544
250% FPL	23800 1984	31950 2663	40100 3342	48250 4021	56400 4700	64550 5380	72700 6059	80850 6738	8150 680
RESOURCES (ASSETS)	4000	5850	5900	5950	6000	6800	7650	8500	850