



# HUMAN SERVICES

DEPARTMENT

Susana Martinez, Governor  
Brent Earnest, Secretary Designate  
Nancy Smith-Leslie, Acting Director

## DEPARTMENTAL MEMORANDUM

**MAD-MR: 18 -**

**DATE:**

**TO: ISD AND MAD STAFF**

**FROM:** *NBL* **NANCY SMITH-LESLIE, DIRECTOR, MEDICAL ASSISTANCE DIVISION  
MARY BROGDON, DIRECTOR, INCOME SUPPORT DIVISION**

**THROUGH: ROY BURT, CHIEF, ELIGIBILITY BUREAU**

**BY: JESSICA GOMEZ, MANAGEMENT ANALYST, ELIGIBILITY BUREAU**

**SUBJECT: April 2018 FPL Update-MAD 222 and MAD 029**

### **GENERAL INFORMATION**

The MAD 222 AFFORDABLE CARE MEDICAID PROGRAMS and the MAD 029 AGED, BLIND, AND DISABLED MEDICAID forms have been updated to reflect 2018 Federal Poverty Level guidelines that are effective on April 1, 2018.

Please update the Forms Manual Index and insert copies of the revised MAD 222 and MAD 029 forms in the manual.

### **FILING INSTRUCTIONS**

Please make the following replacements in the Medical Assistance Eligibility Manual:

DELETE MAD 222 dated 4-1-17

INSERT MAD 222 dated 4-1-18

DELETE MAD 029 dated 11-7-17

INSERT MAD 029 dated 4-1-18

Please address any questions regarding this MR to Jessica Gomez at [Jessica.Gomez2@state.nm.us](mailto:Jessica.Gomez2@state.nm.us) or call (505) 476-6838.

Attachments

MAD 222

MAD 029

## AFFORDABLE CARE MEDICAID PROGRAMS

Federal Poverty Level (FPL)

Effective 4/1/18 – 3/31/19

<p><b>Category 029 - Family Planning</b></p> <ul style="list-style-type: none"> <li>• Family Planning Services Only</li> <li>• 12 months eligibility</li> <li>• Income must be under 250% FPL</li> <li>• No resource standard</li> <li>• No Centennial Care Organization (MCO)</li> </ul>	<p><b>Category 031- Newborn</b> - No application required, no enumeration, Infant eligible for Full Medicaid for 12 months starting with birth with the following:</p> <ul style="list-style-type: none"> <li>• The mother remains, or would be if still pregnant, eligible for Medicaid</li> <li>• The mother was approved for EMSA services for the birth and delivery of the infant</li> <li>• The infant continues to reside in NM</li> </ul>
<p><b>Category 100 – Other Adults</b></p> <ul style="list-style-type: none"> <li>• Alternative Benefit Coverage</li> <li>• Income must be under 133% FPL</li> <li>• No resource standard</li> <li>• No Medicare on this program</li> <li>• No Pregnancy on this program</li> </ul>	<p><b>Category 200 – Parent Caretaker</b></p> <ul style="list-style-type: none"> <li>• Full Medicaid</li> <li>• Income must be under Fixed Standard</li> <li>• Household must have a relative child in household (5<sup>th</sup> degree if not parent)</li> <li>• No resource standard</li> </ul>
<p><b>Category 300 – Full Pregnant Women</b></p> <ul style="list-style-type: none"> <li>• Full Medicaid</li> <li>• Income must be under Fixed Standard</li> <li>• 2 months post-partum</li> <li>• No resource standard</li> </ul>	<p><b>Category 301- Pregnancy Services Only</b></p> <ul style="list-style-type: none"> <li>• Pregnancy Services only</li> <li>• Income must be under 250% FPL</li> <li>• 2 months post-partum</li> <li>• No resource standard</li> </ul>
<p><b>Categories 400, 401, 402, 403– Children’s</b></p> <ul style="list-style-type: none"> <li>• Full Medicaid for children up to age 19</li> <li>• No resource standard</li> <li>• Eligible even if children have health insurance or have voluntarily dropped insurance</li> <li>• Income must be under the following FPL:             <ul style="list-style-type: none"> <li>○ 400 Children 0-5 -----0%-200%</li> <li>○ 401 Children 6-18-----0%-138%</li> <li>○ 402 Children 0-5 ----200%-240%</li> <li>○ 403 Children 6-18---138%-190%</li> </ul> </li> </ul>	<p><b>Categories 420, 421– Children’s Health Insurance Program (CHIP)</b></p> <ul style="list-style-type: none"> <li>• Full Medicaid for children up to age 19</li> <li>• No qualified health insurance plan (QHP)</li> <li>• Co-payments on doctor visits, prescriptions, etc.</li> <li>• No co-payments for Native American children</li> <li>• Income must be under the following FPL:             <ul style="list-style-type: none"> <li>○ 420 Children 0-5 ----- 240%-300%</li> <li>○ 421 Children 6-18 ----- 190%-240%</li> </ul> </li> </ul>

HOUSEHOLD SIZE	Fixed Standard	100%	133%	138%	190%	200%	235%	240%	250%	300%	5% Disregard When Applicable
1	\$451	\$1,012	\$1,346	\$1,397	\$1,923	\$2,024	\$2,378	\$2,428	\$2,530	\$3,035	51.00
2	\$608	\$1,372	\$1,825	\$1,893	\$2,607	\$2,744	\$3,224	\$3,292	\$3,430	\$4,115	69.00
3	\$765	\$1,732	\$2,304	\$2,390	\$3,291	\$3,464	\$4,070	\$4,156	\$4,330	\$5,195	87.00
4	\$923	\$2,092	\$2,782	\$2,887	\$3,975	\$4,184	\$4,916	\$5,020	\$5,230	\$6,275	105.00
5	\$1,080	\$2,452	\$3,261	\$3,384	\$4,659	\$4,904	\$5,762	\$5,884	\$6,130	\$7,355	123.00
6	\$1,238	\$2,812	\$3,740	\$3,881	\$5,343	\$5,624	\$6,608	\$6,748	\$7,030	\$8,435	141.00
7	\$1,395	\$3,172	\$4,219	\$4,377	\$6,027	\$6,344	\$7,454	\$7,612	\$7,930	\$9,515	159.00
8	\$1,553	\$3,532	\$4,698	\$4,874	\$6,711	\$7,064	\$8,300	\$8,476	\$8,830	\$10,595	177.00
+1	\$158	\$360	\$479	\$497	\$684	\$720	\$846	\$864	\$900	\$1,080	18.00

\*COE 402, 403 the 5% Disregard applies only when Qualified Health Plan exists for the client.

\*COE 200 the 5% Disregard applies only if age 65 and above OR Medicare eligible.

## AGED, BLIND, AND DISABLED MEDICAID PROGRAMS

### SSI Extensions, WDI, and IC/Waivers

Effective: 1/1/18

#### SSI Extensions- DAC, Widower, 503 Lead/Pickle

- Income must be below SSI FBR once disregards are deducted
- FBR for SSI recipient
  - Individual \$750
  - Couple \$1,125
- Resources below
  - Individual \$2,000
  - Couple \$3,000
- Full coverage Medicaid category

#### WDI-Working Disabled

- Earned income up to 250% FPL for a single and couple
- Unearned income before disregards and deductions
  - Single \$1,519
  - Couple \$2,269
- Quarterly earnings \$1,320
- Full coverage Medicaid
- Must be working and disabled
- Being over 65 is not equivalent to being disabled. Client has to be disabled through SSA or DDU

#### IC/Waiver

- Income standard \$2,250
- Net income for IDTs \$2,249
- Resource Limit \$2,000
- Average cost of nursing facility \$7,025.00
- MMMNA \$2,030
- Excess shelter Max \$1,060 Min \$609
- MMMNA + Excess Shelter=\$3,090
- **CSRA-Fed Max** \$123,600
- **CSRA-Fed Min** \$31,290
- Personal Needs Allowance=\$70
- Trustee Fee 3% gross income standard=\$67.50
- Excess Home Equity for LTC Services-\$858,000

### Medicare Savings Programs

Federal Poverty Level (FPL)

Effective: 4/1/18-3/31/19

#### Qualified Medicare Beneficiary-QMB

- Income up to 100% FPL
- Will pay conditional Part A premium
- Eligibility begins the month after the month of approval
- No retroactive months

Covers:

- Medicare PT B Premium-\$134 (2018)
- Medicare PT A Premium \$422 (2018)
- Medicare Co-pay amounts
- Medicare deductibles:
  - 2018 Hospital \$1,316
  - 2018 Doctor \$183
- Deemed LIS eligible for Medicare Part D

#### Specified Low Income Medicare Beneficiary (SLIMB)

- Income 100%-120% FPL
- Will NOT pay Conditional PT A
- Eligibility begins the month of approval
- Up to 3 months of retroactive coverage

Covers:

- Medicare PT B Premium Only! No other benefit coverage
- No Medicaid card is issued
- Deemed LIS eligible for Medicare Part D

#### Qualified Individuals (Q1-1)

- Income 120%-135% FPL
- Will NOT pay for Conditional PT A
- Eligibility begins the month of approval
- Up to 3 months of retroactive coverage

Covers:

- Medicare PT B Premium Only! **No** other benefit coverage
- No Medicaid card issued
- Deemed LIS eligible for Medicare Part D

HOUSEHOLD SIZE	100%	120%	135%	250%
1	\$1,012	\$1,214	\$1,366	\$2,530
2	\$1,372	\$1,646	\$1,852	\$3,430
3	\$1,732	\$2,078	\$2,338	\$4,330
4	\$2,092	\$2,510	\$2,824	\$5,230
5	\$2,452	\$2,942	\$3,310	\$6,130
6	\$2,812	\$3,374	\$3,796	\$7,030
7	\$3,172	\$3,806	\$4,282	\$7,930
8	\$3,532	\$4,238	\$4,768	\$8,830
+1	\$360	\$432	\$486	\$900

\*MSP Resource Guideline for Individual \$9,060 and Couple \$14,340