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TITLE 8SOCIAL SERVICESCHAPTER 200MEDICAID ELIGIBILITY - GENERAL RECIPIENT RULESPART 520INCOME STANDARDS

8.200.520.1 ISSUING AGENCY: New Mexico Human Services Department (HSD). [8.200.520.1 NMAC - Rp, 8.200.520.1 NMAC, 8/28/2015]

8.200.520.2 SCOPE: The rule applies to the general public. [8.200.520.2 NMAC - Rp, 8.200.520.2 NMAC, 8/28/2015]

8.200.520.3 STATUTORY AUTHORITY: The New Mexico medicaid program and other health care programs are administered pursuant to regulations promulgated by the federal department of health and human services under Title XIX of the Social Security Act as amended or by state statute. See Section 27-1-12 et seq. NMSA 1978.

[8.200.520.3 NMAC - Rp, 8.200.520.3 NMAC, 8/28/2015]

8.200.520.4 DURATION: Permanent. [8.200.520.4 NMAC - Rp, 8.200.520.4 NMAC, 8/28/2015]

8.200.520.5 EFFECTIVE DATE: August 28, 2015, unless a later date is cited at the end of a section. [8.200.520.5 NMAC - Rp, 8.200.520.5 NMAC, 8/28/2015]

8.200.520.6 OBJECTIVE: The objective of this rule is to provide specific instructions when determining eligibility for the medicaid program and other health care programs. Generally, applicable eligibility rules are detailed in the medical assistance division (MAD) eligibility policy manual, specifically 8.200.400 NMAC, *General Medicaid Eligibility*. Processes for establishing and maintaining MAD eligibility are detailed in the income support division (ISD) general provisions 8.100 NMAC, *General Provisions for Public Assistance Programs*. [8.200.520.6 NMAC - Rp, 8.200.520.6 NMAC, 8/28/2015]

8.200.520.7 DEFINITIONS: [RESERVED]

8.200.520.8 MISSION STATEMENT: To transform lives. Working with our partners, we design and deliver innovative, high quality health and human services that improve the security and promote independence for New Mexicans in their communities.

[8.200.520.8 NMAC - Rp, 8.200.520.8 NMAC, 8/28/2015; Repealed/E, 4/1/2016; A/E, 8/11/2020; A, 12/15/2020]

8.200.520.9 GENERAL NEED DETERMINATION: To be medical assistance division (MAD) eligible, an applicant or a re-determining eligible recipient must meet specific income and as applicable, resource standards. [8.200.520.9 NMAC - Rp, 8.200.520.9 NMAC, 8/28/2015]

8.200.520.10 INCOME STANDARDS: This part contains the federal income poverty rate tables for use with all eligibility categories, cost of living (COLA) disregard calculations and other applicable income tables. [8.200.520.10 NMAC - Rp, 8.200.520.10 NMAC, 8/28/2015]

8.200.520.11 FEDERAL POVERTY INCOME GUIDELINES:

A. On

One hundred percent federal poverty limits (FPL): Size of budget group FPL pe

budget group	FPL per month
1	\$1,064
2	\$1,437
3	\$1,810
4	\$2,184
5	\$2,557
6	\$2,930
7	\$3,304
8	\$3,677
Add \$272 for each addit	ional parson in the hudget grou

Add \$373 for each additional person in the budget group.

*Use only these two standards for the qualified medicare beneficiary (QMB) program. **B.** One hundred twenty percent FPL: This income level is used only in the determination of the maximum income limit for specified low income medicare beneficiaries (SLIMB) applicants or eligible recipients.

- Applicant or eligible recipientAmount1Individual2CoupleAt least \$1,064 per month but no more than \$1,276 per month.At least \$1,437 per month but no more than \$1,724 per month.
 - 2 Couple At least \$1,437 per month but no more than \$1,724 per month. For purposes of this eligibility calculation, "couple" means an applicant couple or an

applicant with an ineligible spouse when income is deemed.

C.	One hundred thirty-three percent FPL:	
	Size of budget group	FPL per month
	1	\$1.415

1	\$1,415
2	\$1,911
3	\$2,408
4	\$2,904
5	\$3,401
6	\$3,897
7	\$4,394
8	\$4,890

Add \$496 for each additional person in the budget group.

D. One hundred thirty-five percent FPL: This income level is used only in the determination of the maximum income limit for a qualified individual 1 (QI1) applicant or eligible recipient. For purposes of this eligibility calculation, "couple" means an applicant couple or an applicant with an ineligible spouse when income is deemed. The following income levels apply:

icu. The l	Applicant or eligi		Amount
	1	Individual	At least \$1,276 per month but no more than \$1,436 per month.
	2	Couple	At least $$1,270$ per month but no more than $$1,940$ per month. At least $$1,724$ per month but no more than $$1,940$ per month.
E.	One hundred eigh		
Ľ,	Size of budget gro		FPL per month
	1	Jup	\$1,968
	2		\$2,658
	3		\$3,349
	4		\$4,040
	4 5		\$4,730
	6		\$5,421
	7		\$6,112
	8		\$6,802
		hadditional no	rson in the budget group.
F.	Two hundred per		ison in the budget group.
г.	Size of budget gro		FPL per month
		Jup	\$2,127
	1		\$2,874
	2 3		\$3,620
	4		\$4,367
	5		\$5,114
	6		\$5,860
	7		\$6,607
	8		\$7,354
	•	hadditional no	rson in the budget group.
G.	Two hundred thir		
0.	Size of budget gro	• •	FPL per month
	1	Jup	\$2,499
	2		\$3,377
	3		\$4,254
	4		\$5,131
	5		\$6,009
	6		\$6,886
	0		ψ0,000

	7	\$7,763
	8	\$8,641
	Add \$878 for each additional pe	rson in the budget group.
H.	Two hundred fifty percent FPL:	
	Size of budget group	FPL per month
	1	\$2,659
	2	\$3,592
	3	\$4,525
	4	\$5,459
	5	\$6,392
	6	\$7,325
	7	\$8,259
	8	\$9,192

Add \$933 for each additional person in the budget group.

[8.200.520.11 NMAC - Rp, 8.200.520.11 NMAC, 8/28/2015; A/E, 4/1/2016; A/E, 9/14/2017; A, 2/1/2018; A/E, 5/17/2018; A, 9/11/2018; A/E, 4/11/2019; A, 7/30/2019, A/E, 8/11/2020; A, 12/15/2020]

8.200.520.12 COST OF LIVING ADJUSTMENT (COLA) DISREGARD COMPUTATION: The

countable social security benefit without the COLA is calculated using the COLA increase table as follows: **A.** divide the current gross social security benefit by the COLA increase in the most current year:

A. divide the current gross social security benefit by the COLA increase in the most current year; the result is the social security benefit before the COLA increase;

B. divide the result from Subsection A above by the COLA increase from the previous period or year; the result is the social security benefit before the increase for that period or year; and

C. repeat Subsection B above for each year, through the year that the applicant or eligible recipient received both social security benefits and supplemental security income (SSI); the final result is the countable social security benefit.

COLA Increase and disregard table						
	Period and year COLA increase = benefit before					
1	2020 Jan - Dec	1.6	Jan 20			
2	2019 Jan - Dec	2.8	Jan 19			
3	2018 Jan - Dec	2.0	Jan 18			
4	2017 Jan - Dec	0.3	Jan 17			
5	2016 Jan - Dec	0	Jan 16			
6	2015 Jan - Dec	1.017	Jan 15			
7	2014 Jan - Dec	1.015	Jan 14			
8	2013 Jan - Dec	1.017	Jan 13			
9	2012 Jan - Dec	1.037	Jan 12			
10	2011 Jan - Dec	0	Jan 11			
11	2010 Jan - Dec	1	Jan 10			
12	2009 Jan - Dec	1	Jan 09			
13	2008 Jan - Dec	1.058	Jan 08			
14	2007 Jan - Dec	1.023	Jan 07			
15	2006 Jan - Dec	1.033	Jan 06			
16	2005 Jan - Dec	1.041	Jan 05			
17	2004 Jan - Dec	1.027	Jan 04			
18	2003 Jan - Dec	1.021	Jan 03			
19	2002 Jan - Dec	1.014	Jan 02			
20	2001 Jan - Dec	1.026	Jan 01			
21	2000 Jan - Dec	1.035	Jan 00			
22	1999 Jan - Dec	1.025	Jan 99			
23	1998 Jan - Dec	1.013	Jan 98			

MEDICAID ELIGIBILITY – GENERAL RECIPIENT RULES EFF: 12/15/2020 **INCOME STANDARDS**

24	1997 Jan - Dec	1.021	Jan 97
25	1996 Jan - Dec	1.029	Jan 96
26	1995 Jan - Dec	1.026	Jan 95
27	1994 Jan - Dec	1.028	Jan 94
28	1993 Jan - Dec	1.026	Jan 93
29	1992 Jan - Dec	1.03	Jan 92
30	1991 Jan - Dec	1.037	Jan 91
31	1990 Jan - Dec	1.054	Jan 90
32	1989 Jan - Dec	1.047	Jan 89
33	1988 Jan - Dec	1.04	Jan 88
34	1987 Jan - Dec	1.042	Jan 87
35	1986 Jan - Dec	1.013	Jan 86
36	1985 Jan - Dec	1.031	Jan 85
37	1984 Jan - Dec	1.035	Jan 84
38	1982 Jul - 1983		
	Dec	1.035	Jul 82
39	1981 Jul - 1982		
	Jun	1.074	Jul 81
40	1980 Jul - 1981		
	Jun	1.112	Jul 80
41	1979 Jul - 1980		
	Jun	1.143	Jul 79
42	1978 Jul - 1979		
	Jun	1.099	Jul 78
43	1977 Jul - 1978		
	Jun	1.065	Jul 77
44	1977 Apr - 1977		
	Jun	1.059	Apr 77

[8.200.520.12 NMAC - Rp, 8.200.520.12 NMAC, 8/28/2015; A/E, 1/1/2016; A/E, 3/1/2017; A/E, 5/17/2018; A, 9/11/2018; A, 4/11/2019; A, 7/30/2019; A/E, 8/11/2020; A, 12/15/2020]

8.200.520.13	FEDERAL BENE	FIT RATES (FBF	R) AND VALUE OF ON	NE-THIRD REDUCTION (VTR):

Year	Individual	Institution	Individual	Couple	Institution	Couple
	FBR	FBR	VTR	FBR	FBR	VTR
1/89 to 1/90	\$368	\$30	\$122.66	\$553	\$60	\$184.33
1/90 to 1/91	\$386	\$30	\$128.66	\$579	\$60	\$193.00
1/91 to 1/92	\$407	\$30	\$135.66	\$610	\$60	\$203.33
1/92 to 1/93	\$422	\$30	\$140.66	\$633	\$60	\$211.00
1/93 to 1/94	\$434	\$30	\$144.66	\$652	\$60	\$217.33
1/94 to 1/95	\$446	\$30	\$148.66	\$669	\$60	\$223.00
1/95 to 1/96	\$458	\$30	\$152.66	\$687	\$60	\$229.00
1/96 to 1/97	\$470	\$30	\$156.66	\$705	\$60	\$235.00
1/97 to 1/98	\$484	\$30	\$161.33	\$726	\$60	\$242.00
1/98 to 1/99	\$494	\$30	\$164.66	\$741	\$60	\$247.00
1/99 to 1/00	\$500	\$30	\$166.66	\$751	\$60	\$250.33
1/00 to 1/01	\$512	\$30	\$170.66	\$769	\$60	\$256.33
1/01 to 1/02	\$530	\$30	\$176.66	\$796	\$60	\$265.33
1/02 to 1/03	\$545	\$30	\$181.66	\$817	\$60	\$272.33
1/03 to 1/04	\$552	\$30	\$184.00	\$829	\$60	\$276.33
1/04 to 1/05	\$564	\$30	\$188	\$846	\$60	\$282.00
1/05 to 1/06	\$579	\$30	\$193	\$869	\$60	\$289.66
1/06 to 1/07	\$603	\$30	\$201	\$904	\$60	\$301.33

1/07 to 1/08	\$623	\$30	\$207.66	\$934	\$60	\$311.33
1/08 to 1/09	\$637	\$30	\$212.33	\$956	\$60	\$318.66
1/09 to 1/10	\$674	\$30	\$224.66	\$1,011	\$60	\$337
1/10 to 1/11	\$674	\$30	\$224.66	\$1,011	\$60	\$337
1/11 to 1/12	\$674	\$30	\$224.66	\$1,011	\$60	\$337
1/12 to 1/13	\$698	\$30	\$232.66	\$1,048	\$60	\$349.33
1/13 to 1/14	\$710	\$30	\$237	\$1,066	\$60	\$355
1/14 to 1/15	\$721	\$30	\$240	\$1082	\$60	\$361
1/15 to 12/15	\$733	\$30	\$244	\$1,100	\$60	\$367
1/16 to 12/16	\$733	\$30	\$244	\$1,100	\$60	\$367
1/17 to 12/17	\$735	\$30	\$245	\$1,103	\$60	\$368
1/18 to 12/18	\$750	\$30	\$250	\$1,125	\$60	\$375
1/19 to 12/19	\$771	\$30	\$257	\$1,157	\$60	\$386
1/20 to 12/20	\$783	\$30	\$261	\$1,175	\$60	\$392

A. Ineligible child deeming allocation is \$392.

B. Part B premium is \$144.60 per month.

C. VTR (value of one third reduction) is used when an individual or a couple lives in the household of another and receives food and shelter from the household or when the individual or the couple is living on his or her own household but receiving support and maintenance from others.

D. The SSI resource standard is \$2000 for an individual and \$3000 for a couple.

[8.200.520.13 NMAC - Rp, 8.200.520.13 NMAC, 8/28/2015; A/E, 1/1/2016; A/E, 3/1/2017; A/E, 5/17/2018; A, 9/11/2018; A/E, 4/11/2019; A, 7/30/2019; A/E, 8/11/2020; A, 12/15/2020]

8.200.520.14 UNISEX LIFE ESTATE AND REMAINDER INTEREST TABLES:

UNDER LIFE EDIATE		EREST IA
Age	Life Estate	Remainder
0	.97188	.02812
1	.98988	.01012
2 3	.99017	.00983
3	.99008	.00992
4	.98981	.01019
5	.98938	.01062
6	.98884	.01116
7	.98822	.01178
8	.98748	.01252
9	.98663	.01337
10	.98565	.01435
11	.98453	.01547
12	.98329	.01671
13	.98198	.01802
14	.98066	.01934
15	.97937	.02063
16	.97815	.02185
17	.97700	.02300
18	.97590	.02410
19	.97480	.02520
20	.97365	.02635
21	.97245	.02755
22	.97120	.02880
23	.96986	.03014
24	.96841	.03159
25	.96678	.03322
26	.96495	.03505
27	.96290	.03710
28	.96062	.03938
29	.95813	.04187

MEDICAID ELIGIBILITY – GENERAL RECIPIENT RULES EFF: 12/15/2020 **INCOME STANDARDS**

30	.95543	.04457
31	.95243	.04746
32	.94942	.05058
33	.94608	.05392
34	.94250	.05750
35	.93868	.06132
36	.93460	.06540
37	.93026	.06974
38	.92567	.07433
39	.92083	.07917
40	.91571	.08429
41	.91030	.08970
42	.90457	.09543
43	.89855	.10145
44	.89221	.10779
45	.88558	.11442
46	.87863	.12137
47	.87137	.12863
48	.86374	.13626
49	.85578	.14422
50	.84743	.15257
51	.83674	.16126
52	.82969	.17031
53	.82028	.17972
54	.81054	.18946
55	.80046	.19954
56	.79006	.20994
57	.77931	.22069
58	.76822	.23178
59	.75675	.24325
60	.74491	.25509
61	.73267	.26733
62	.72002	.27998
63	.70696	.29304
64	.69352	.30648
65	.67970	.32030
66	.66551	.33449
67	.65098	.34902
68	.63610	.36690
69	.62086	.37914
70	.60522	.39478
71	.58914	.41086
72	.57261	.42739
73	.55571	.44429
74	.53862	.46138
75	.52149	.47851
76	.50441	.49559
77	.48742	.51258
78	.47049	.52951
79	.45357	.54643
80	.43659	.56341
81	.41967	.58033
82	.42095	.59705
83	.38642	.61358
84	.36998	.63002
85	.35359	.64641

86	.33764	.66236
87	.32262	.67738
88	.30859	.69141
89	.29526	.70474
90	.28221	.71779
91	.26955	.73045
92	.25771	.74229
93	.24692	.75308
94	.23728	.76272
95	.22887	.77113
96	.22181	.77819
97	.21550	.78450
98	.21000	.79000
99	.20486	.79514
100	.19975	.80025
101	.19532	.80468
102	.19054	.80946
103	.18437	.81563
104	.17856	.82144
105	.16962	.83038
106	.15488	.84512
107	.13409	.86591
108	.10068	.89932
109	.04545	.95455

[8.200.520.14 NMAC - Rp, 8.200.520.14 NMAC, 8/28/2015]

8.200.520.15 SUPPLEMENTAL SECURITY INCOME (SSI) LIVING ARRANGEMENTS:

Individual living in his or her own household who own or rent: Payment amount: \$783 Individual

\$1,175 Couple

B. Individual receiving support and maintenance payments: For an individual or couple living in his or her own household, but receiving support and maintenance from others (such as food, shelter or clothing), subtract the value of one third reduction (VTR). Payment amount: \$783 - \$261 = \$522 Individual

	i ayment amount.	$\psi / 00 = \psi 201 = \psi 022$	marviauai
		1,175 - 392 = 783	Couple
С.	Individual or couple living house	nold of another: For an indi	ividual or couple living in another
person's househ	old and not contributing his or her p	ro-rata share of household of	expenses, subtract the VTR.
	Payment amount:	783 - 261 = 522	Individual
		1,175 - 392 = 783	Couple
D.	Child living in home with his or h	er parent:	
	Payment amount:	\$783	
Е.	Individual in institution:		
	Payment amount:	\$30.00	

[8.200.520.15 NMAC - Rp, 8.200.520.15 NMAC, 8/28/2015; A/E, 3/1/2017; A/E, 5/17/2018; A, 9/11/2018; A/E, 4/11/2019; A, 7/30/2019; A/E, 8/11/2020; A, 12/15/2020]

8.200.520.16 MAXIMUM COUNTABLE INCOME FOR INSTITUTIONAL CARE MEDICAID AND HOME AND COMMUNITY BASED WAIVER SERVICES (HCBS) CATEGORIES: Effective January 1, **2020**, the maximum countable monthly income standard for institutional care medicaid and the home and community based waiver categories is \$2,349.

[8.200.520.16 NMAC - Rp, 8.200.520.16 NMAC, 8/28/2015; A/E, 3/1/2017; A/E, 5/17/2018; A, 9/11/2018; A/E, 4/11/2019; A, 7/30/2019; A/E, 8/11/2020; A, 12/15/2020]

8.200.520.17 MAXIMUM COUNTABLE INCOME FOR CHILDREN YOUTH AND FAMILIES

(**CYFD**): Effective July 1, 1995, the maximum countable monthly income standard for CYFD medicaid is \$231.00. [8.200.520.17 NMAC - Rp, 8.200.520.17 NMAC, 8/28/2015]

A.

8.200.520.18 SSI RELATED CATEGORIES - DEEMING INCOME WHEN AN APPLICANT CHILD **IS LIVING WITH INELIGIBLE PARENT:**

- Monthly computation: A.
 - (1) total gross unearned income of parent:

deduct living allowance for ineligible child and SSI-eligible sponsored alien (one half of (2) the monthly SSI FBR LA code A*) for each ineligible child/SSI-eligible sponsored alien);

- subtotal: (3)
- deduct \$20.00 general income exclusion 20.00; (4)
- unearned income subtotal; (5)
- (6) total gross earned income of parent;

deduct any remaining allocation for ineligible child and/or SSI-eligible sponsored alien; (7) see Paragraph (2) above;

subtotal: (8)

(9) deduct any remaining portion of the \$20.00 general income exclusion only if not already totally deducted in Paragraph (4) above;

- (10)subtotal:
- (11)deduct \$65.00; do not apply this deduction if the only income is unearned - 65.00;
- (12)subtotal;

(13) subtract one-half of Paragraph (12); do not apply this deduction if the only income is

unearned;

- (14)earned income subtotal;
- (15) total of Paragraph (5) plus Paragraph (14);

deduct parental allocation (1 parent = SSI FBR for an individual LA code A*) (2 parents (16) = SSI FBR for an eligible couple LA code A^*);

income deemed to applicant child; if there is more than one applicant child, divide this (17)amount equally between the children: * LA Code A = the full SSI FBR for an individual or a couple.

If the deemed income plus the applicant child's separate income exceeds the income standard for В. an individual, the applicant child is not eligible for that month.

[8.200.520.18 NMAC - Rp, 8.200.520.18 NMAC, 8/28/2015]

8.200.520.19 LIFE EXPECTANCY TABLES: Δ

	. Male	es:
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А.	Males:				
	Life		Life		Life
Age	expectancy	Age	expectancy	Age	expectancy
0	71.80	40	35.05	80	6.98
1	71.53	41	34.15	81	6.59
2	70.58	42	33.26	82	6.21
3	69.62	43	32.37	83	5.85
4	68.65	44	31.49	84	5.51
5	67.67	45	30.61	85	5.19
6	66.69	46	29.74	86	4.89
7	65.71	47	28.88	87	4.61
8	64.73	48	28.02	88	4.34
9	63.74	49	27.17	89	4.09
10	62.75	50	26.32	90	3.86
11	61.76	51	25.48	91	3.64
12	60.78	52	24.65	92	3.43
13	59.79	53	23.82	93	3.24
14	58.82	54	23.01	94	3.06
15	57.85	55	22.21	95	2.90
16	56.91	56	21.43	96	2.74
17	55.97	57	20.66	97	2.60
18	55.05	58	19.90	98	2.47
19	54.13	59	19.15	99	2.34
20	53.21	60	18.42	100	2.22

MEDICAID ELIGIBILITY – GENERAL RECIPIENT RULES EFF: 12/15/2020 **INCOME STANDARDS**

21	52.29	61	17.70	101	2.11
22	51.38	62	16.99	102	1.99
23	50.46	63	16.30	103	1.89
24	49.55	64	15.62	104	1.78
25	48.63	65	14.96	105	1.68
26	47.72	66	14.32	105	1.59
20	46.80	67	13.70	107	1.50
28	45.88	68	13.09	107	1.41
20	44.97	69	12.50	100	1.33
30	44.06	70	11.92	110	1.25
31	43.15	70	11.35	110	1.17
32	42.24	71 72	10.80	111	1.17
33	41.33	72	10.27	112	1.02
33 34	40.23	73	9.27	113	0.96
34 35	40.23 39.52	74 75	9.24	114	0.90
	39.52 38.62	73 76	9.24 8.76	115	0.89
36					
37	37.73	77	8.29	117	0.77
38	36.83	78 70	7.83	118	0.71
39 D	35.94	79	7.40	119	0.66
В.	Females:		T : C		T : C
	Life		Life		Life
Age	expectancy	Age	expectancy	Age	expectancy
0	78.79	40	40.61	80	9.11
1	78.42	41	39.66	81	8.58
2	77.48	42	38.72	82	8.06
3	76.51	43	37.78	83	7.56
4	75.54	44	36.85	84	7.08
5	74.56	45	35.92	85	6.63
6	73.57	46	35.00	86	6.20
7	72.59	47	34.08	87	5.79
8	71.60	48	33.17	88	5.41
9	70.61	49	32.27	89	5.05
10	69.62	50	31.37	90	4.71
11	68.63	51	30.48	91	4.40
12	67.64	52	29.60	92	4.11
13	66.65	53	28.72	93	3.84
14	65.67	54	27.86	94	3.59
15	64.68	55	27.00	95	3.36
16	63.71	56	26.15	96	3.16
17	62.74	57	25.31	97	2.97
18	61.77	58	24.48	98	2.80
19	60.80	59	23.67	99	2.64
20	59.83	60	22.86	100	2.48
21	58.86	61	22.06	101	2.34
22	57.89	62	21.27	102	2.20
23	56.92	63	20.49	103	2.06
24	55.95	64	19.72	104	1.93
25	54.98	65	18.96	105	1.81
26	54.02	66	18.21	106	1.69
27	53.05	67	17.48	107	1.58
28	52.08	68	16.76	108	1.48
29	51.12	69	16.04	109	1.38
30	50.15	70	15.35	110	1.28
31	49.19	70	14.66	111	1.19
32	48.23	72	13.99	112	1.10
33	47.27	72	13.33	112	1.02
	T/.4/	15	15.55	115	1.02

34	46.31	74	12.68	114	0.96
35	45.35	75	12.05	115	0.89
36	44.40	76	11.43	116	0.83
37	43.45	77	10.83	117	0.77
38	42.50	78	10.24	118	0.71
39	41.55	79	9.67	119	0.66

[8.200.520.19 NMAC - Rp, 8.200.520.19 NMAC, 8/28/2015]

8.200.520.20 COVERED QUARTER INCOME STANDARD:

Date	Calendar Quarter Amount
Jan. 2020 - Dec. 2020	\$1,410 per calendar quarter
Jan. 2019 - Dec. 2019	\$1,360 per calendar quarter
Jan. 2018 - Dec. 2018	\$1,320 per calendar quarter
Jan. 2017 - Dec. 2017	\$1,300 per calendar quarter
Jan. 2016 - Dec. 2016	\$1,260 per calendar quarter
Jan. 2015 - Dec. 2015	\$1,220 per calendar quarter
Jan. 2014 - Dec. 2014	\$1,200 per calendar quarter
Jan. 2013 - Dec. 2013	\$1,160 per calendar quarter
Jan. 2012 - Dec. 2012	\$1,130 per calendar quarter
Jan. 2011 - Dec. 2011	\$1,120 per calendar quarter
Jan. 2010 - Dec. 2010	\$1,120 per calendar quarter
Jan. 2009 - Dec. 2009	\$1,090 per calendar quarter
Jan. 2008 - Dec. 2008	\$1,050 per calendar quarter
Jan. 2007 - Dec. 2007	\$1,000 per calendar quarter
Jan. 2006 - Dec. 2006	\$970 per calendar quarter
Jan. 2005 - Dec. 2005	\$920 per calendar quarter
Jan. 2004 - Dec. 2004	\$900 per calendar quarter
Jan. 2003 - Dec. 2003	\$890 per calendar quarter
Jan. 2002 - Dec. 2002	\$870 per calendar quarter
500 00 NB (A G D 0 000 500 00 NB (A G 0/00/0015	

[8.200.520.20 NMAC - Rp, 8.200.520.20 NMAC, 8/28/2015; A/E, 1/1/2016; A/E, 03/01/2017; A/E, 5/17/2018; A, 9/11/2018; A/E, 4/11/2019; A, 7/30/2019; A/E, 8/11/2020; A, 12/15/2020]

	8.200.520.21	STANDARD	OF NEED	(SON):
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	Gross income test	Net income test
Budget group size	One hundred eighty-five percent Standard of need	Standard of need
	049/059 Refugee	049/059 Refugee
1	\$791	\$266
2	\$1,072	\$357
3	\$1,352	\$447
4	\$1,633	\$539
5	\$1,913	\$630
6	\$2,194	\$721
7	\$2,474	\$812
8	\$2,755	\$922
+1	+ \$281	+ \$91

[8.200.520.21 NMAC - Rp, 8.200.520.21 NMAC, 8/28/2015; A/E, 4/1/2016]

HISTORY OF 8.200.520 NMAC: The material in this part was derived from that previously filed with the State Records Center:

8 NMAC 4.MAD.500, Eligibility Policies, Income and Resource Standards, filed 12/30/1994. 8 NMAC 4.MAD.500, Eligibility Policies, Income and Resource Standards, filed 6/20/1995.

History of Repealed Material:

8.200.520 NMAC, Income Standard, filed 12/18/2000 - Repealed effective 1/1/2014. 8.200.520 NMAC, Income Standards, filed 12/2/2013 - Repealed effective 8/28/2015.