

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

DEPARTMENTAL MEMO MAD-MR: 15-05 DATE: 04-01-15

TO:

MEDICAL ASSISTANCE DIVISION PROVIDERS, MAD AND ISD STAFF

FROM:

NANCY SMITH-LESLIE, ACTING DIRECTOR, MEDICAL ASSISTANCE

DIVISION

THROUGH: ROBERT STEVENS, BUREAU CHIEF, PROGRAM POLICY BUREAU

BY:

CECELIA SALAZAR, PROGRAM MANAGER

SUBJECT:

8.200.520 NMAC Medicaid Eligibility-Income Standards and 8.291.430 NMAC

Medicaid Eligibility-Affordable Care

GENERAL INFORMATION

The New Mexico Human Services Department through the Medical Assistance Division (MAD) has issued two emergency rules to reflect the current FPL and SSI rates and guidance: 8.200.520 Sections 11 and 15 8.291.430 Section 10.

FILING INSTRUCTIONS

Remove 8.200.520 dated 5-1-14 *Insert* 8.200.520 dated 4-1-15

Remove 8.291.430 dated 7-14-2014 Insert 8.291.430 dated 4-1-15

Please address any questions concerning these rules to Lori Pena 827-1336 or Sonya Pierce at 827-7777.

MEDICAL ASSISTANCE FOR WOMEN AND CHILDREN (MAWC)



Federal Income Guidelines

Effective 4/1/15 - 3/31/16

		
CATEGORY 300 – Full Coverage for Pregnant Women	CATEGORY 301 Pregnancy Services ONLY	CATEGORY Family Planning
 Full Medicaid Pregnant woman, income must be under Standard of Need No resource standard 	 Pregnancy Services ONLY 2 mos. Post Partum Income must be under 250% Of Federal Income Guidelines No resource standard 	Services ONLY • Family Planning Services ONLY
Size of Must Be Assistance Unit Less	Size of Assistance	• 12 months Eligibility
Than 2 \$ 608 3 \$ 765 4 \$ 923 5 \$ 1,080 6 \$ 1,238 7 \$ 1,395 8 \$ 1,553	Unit Must Be Less Than 2 \$ 3,319 3 \$ 4,186 4 \$ 5,053 5 \$ 5,919 6 \$ 6,786 7 \$ 7,653 8 \$ 8,519 For each extra person add \$ 866	● Income must be under 235% of Federal Income Guidelines ● No resource Standard

CATEGORY- Newborn: Full Medicaid, no application required, no enumeration -Infant eligible for Medicaid for 12 months starting with birth, as long as the following conditions are met:

The mother remains eligible for Medicaid or would be eligible if she were still pregnant

\$ 158

- The mother was approved from EMSA alien services for the birth and delivery of the infant
- The infant continues to reside in NM

For each extra person add

CATEGORY 400 - Medicaid for Children

- Full Medicaid
- Children under 19 years of age
- Income under the following FPL:
 - ❖ Children ages 0-5 ----0%-240%
 - ❖ Children ages 6-18 ----0%-190%
- No resource standard
- Eligible even if children have health insurance or have voluntarily dropped insurance

8 - - - - - - - \$ 1,553

CATEGORY 420 - Children's Health Insurance Program (CHIP)

- Income under the following FPL:
 - ❖ Children ages 0-5 ----240%-300%
 - ❖ Children ages 6-18 ----190%-240%
- Do not have existing health insurance
- Have not voluntarily dropped insurance coverage within the last six months
- Co-payments on doctor visits, prescriptions, visits, prescriptions, etc.
- Native American children do not make Co-payments

Household	Monthly	Gross Income
Size	<u>240%</u>	<u>300%</u>
1	\$2,354	\$2,943
2	\$3,186	\$3,989
3	\$4,019	\$5,023
4	\$4,850	\$6,063
5	\$5,682	\$7,103
6	\$6,515	\$8,143
7	\$7,346	\$9,183
8	\$8,178	\$10,223
+1	\$832	\$1,040
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HUMAN SERVICES DEPARTMENT MEDICAL ASSISTANCE DIVISION

AFFORDABLE CARE MEDICAID PROGRAMS

Federal Poverty Guidelines (FPL)

Effective 4/1/15 - 3/31/16

CATEGORY 100 – Coverage for Adults

- Alternative Benefit Coverage
- Income must be under 133% FPL
- No resource standard
- No Medicare

HOUSEHOLD SIZE	MONTHLY INCOME
1	\$ 1,305
2	\$ 1,766
3	\$ 2,227
4	\$ 2,688
5	\$ 3,149
6	\$ 3,610
7	\$ 4,071
8	\$ 4,532
+1	\$ 461

CATEGORY 301 – Pregnancy Services Only

- Pregnancy Services
- Income must be under 250% FPL
- 2 months post partum
- No resource standard

HOUSEHOLD SIZE	MONTHLY INCOME
2	\$ 3,319
3	\$ 4,186
4	\$ 5,053
5	\$ 5,919
6	
7	\$ 7,653
8	\$ 8,519
+1	

5% DISREGARD - Amount Disregarded when Applicable

- Category 100
- Category 200 (only if Medicare eligible)
- Category 300
- Category 301
- Category 400
- Category 420

HOUSEHOLD SIZE	MONTHLY DISREGARD
1	- \$49
2	- \$ 66
3	- \$83
4	\$ 101
5	- \$ 118
6	- \$ 135
7	- \$ 153
8	- \$ 170
+1	\$ 17

CATEGORY 200 - Parent

Caretaker

- Full Medicaid
- Income must be under fixed standard
- Household must have a relative child in household
- No resource standard

HOUSEHOLD SIZE MONTHLY INCOME

1	\$ 451
2	\$ 608
3	\$ 765
4	\$ 923
5	\$ 1,080
6	\$ 1,238
7	\$ 1,395
8	\$ 1.553
+1	

CATEGORY 300 - Full

Coverage for Pregnant Women

- Fuli Medicaid
- Income must be under Standard of Need
- 2 months post partum
- No resource standard

Category 400 - Medicaid for Children

- Full Medicaid
- · Children under 19 years of age
- Income under the following FPL:

•	Children	ages	0-5	0%-240%

• Children ages 6-18-----0%-190%

No resource Standard

• Eligible even if children have health insurance or have voluntarily dropped insurance

Category 420 - Children's Health Insurance Program (CHIP)

- Full Medicaid
- Income under the following FPL:
 - Children ages 0-5 -----240%-300%
 - Children ages 6-18-----190%-240%
- Do <u>NOT</u> have existing insurance
- Co-payments on doctor visits, prescriptions, etc.
- Native American children do not make co-payments

 2----- \$3,186
 \$3,989

 3----- \$4,019
 \$5,023

 4----- \$4,850
 \$6,063

 5----- \$5,682
 \$7,103

 6----- \$6,515
 \$8,143

MEDICARE SAVINGS PROGRAMS ELIGIBILITY CRITERIA AND PROCESSING COMPARISON FOR CATEGORIES 40 AND 45

	QUALIFIED MEDICARE BENEFICIARY (QMB)	SPECIFIED LOW INCOME MEDICARE BENEFICIARY (SLIMB)	QUALIFIED INDIVIDUALS (QI-1)
MEDICARE PART A	Will pay Conditional Part A premium	Will NOT pay Conditional Part A premium	Will NOT pay Conditional Part A premium
ELIGIBILITY BEGINS	The month after the month of approval	The month of approval	The month of approval
RETROACTIVE COVERAGE	None	Up to 3 months may be entered in ASPEN	Up to 3 months may be entered in ASPEN
COVERED SERVICE	✓ Medicare Part B Premium \$104.90 (2015) ✓ Medicare Part A Premium \$407 (2015) ✓ Medicare Co-pay amounts	Medicare Part B Premium Only! No other benefit coverage	Medicare Part B Premium Only! No other benefit coverage
	 ✓ Medicare Deductibles: 2015 Hospital \$1,260 2015 Doctor \$147 	NO Medicaid card is issued	NO Medicaid card is issued
	Deemed LIS eligible for Medicare Part D	Deemed LIS eligible for Medicare Part D	Deemed LIS eligible for Medicare Part D
INCOME LIMIT (one \$20 deduction per household is allowed before the	100 % Federal Poverty Guidelines ✓ Individual \$981	100% - 120% Federal Poverty Guidelines ✓ Individual	120% - 135% Federal Poverty Guidelines: ✓ Individual
federal guidelines apply.) FPL Guidelines are revised every April	✓ Couple \$1,328	At least \$981 but no more than \$1,177 Couple At least \$1,328 but no more than \$1,593	At least \$1,177 but no more than \$1,325 ✓ Couple At least \$1,593 but no more than \$1,793
RESOURCE LIMIT		Individual - \$8,780 Couple - \$13,930	
	* These resource lim	its include \$1,500 per pers used for burial expense	

TITLE 8 SOCIAL SERVICES

CHAPTER 200 MEDICAID ELIGIBILITY - GENERAL RECIPIENT POLICIES

PART 520 INCOME STANDARDS

8.200.520.1 ISSUING AGENCY: New Mexico Human Services Department (HSD).

[8.200.520.1 NMAC - Rp, 8.200.520.1 NMAC, 1-1-14]

8.200.520.2 SCOPE: The rule applies to the general public.

[8.200.520.2 NMAC - Rp, 8.200.520.2 NMAC, 1-1-14]

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 NMSA 1978, Section 27-1-12 et seq.

[8.200.520.3 NMAC - Rp, 8.200.520.3 NMAC, 1-1-14]

8,200.520.4 DURATION: Permanent.

[8.200.520.4 NMAC - Rp, 8.200.520.4 NMAC, 1-1-14]

8.200.520.5 EFFECTIVE DATE: January 1, 2014, unless a later date is cited at the end of a section. [8.200.520.5 NMAC - Rp, 8.200.520.5 NMAC, 1-1-14]

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, 1-1-14]

8.200.520.7 DEFINITIONS: [RESERVED]

8.200.520.8 MISSION: To reduce the impact of poverty on people living in New Mexico by providing support services that help families break the cycle of dependency on public assistance.

[8.200.520.8 NMAC - N, 1-1-14]

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, I-1-14]

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, 1-1-14]

8.200.520.11 FEDERAL POVERTY INCOME GUIDELINES:

A. 100% federal poverty limit (FPL):

Size of budget group	FPL per month
1	[\$ 973*] <u>\$981*</u>
2	[\$ 1,311*] <u>\$1,328*</u>
3	[\$ 1,650] <u>\$1,675</u>
4	[\$ 1,988] <u>\$2,021</u>
5	[\$ 2,326] <u>\$2,368</u>
6	[\$ 2,665] <u>\$2,715</u>
7	[\$ 3,003] <u>\$3,061</u>
8	[\$ 3,341] <u>\$3.408</u>

Add [\$338] \$347 for each additional person in the budget group.

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^{*}Use only these two standards for the qualified medicare beneficiary (QMB) program.

120% 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 recipient **Amount** Individual 1. At least [\$973] \$981 per month but no more than [\$1,167] \$1.177 per month. 2. Couple At least [\$1,311] \$1,328 per month but no more than [\$1,573] \$1,593 per month. For purposes of this eligibility calculation, "couple" means an applicant couple or an applicant with an ineligible spouse when income is deemed. 133% FPL: Size of budget group FPL per month 1 [\$1,294] \$1,305 2 [\$1,744] \$1,766 3 [\$2,194] \$2,227 4 [\$2,644] \$2,688 5 [\$3,094] \$3,149 [\$3,544] **\$**3.610 6 7 [\$3,994] \$4,071 [\$4,444] <u>\$4,532</u> Add \$[450] 461 for each additional person in the budget group. 135% FPL: This income level is used only in the determination of the maximum income limit for a qualified individual 1 (QII) 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: Applicant or eligible recipient **Amount** 1. Individual At least [\$1,294] \$1,177 per month but no more than [\$1,313] 1,325 per month. 2. Couple At least [\$1,744] \$1,593 per month but no more than [\$1,770] \$1,793 per month. 185% FPL: E. Size of budget group FPL per month 1 [\$1,800] \$1,815 2 [\$2,426] \$<u>2,456</u> 3 [\$3,051] \$3,098 4 [\$3,677] \$<u>3.739</u> 5 [\$4,303] \$<u>4,380</u> 6 [\$4,929] \$<u>5,022</u> [\$5,555] \$5,663 [\$6,181] \$6,304 Add \$[626]-641 for each additional person in the budget group. F. 200% FPL: Size of budget group FPL per month 1 [\$1,945] \$1,962 2 [\$2,622] \$2,655 3 [\$3,299] \$3,349 4 [\$3,975] \$4,042 5 [\$4,652] \$4,735 6 [\$5,329] \$5,429 7 [\$6,005] \$6,122 [\$6,682] \$6,815 Add \$677[693] for each additional person in the budget group. G. 235% FPL: Size of budget group FPL per month [\$2,286] \$2,305 2 [\$3,081] \$3,120 3

[\$3,876] \$3,935

4	[\$4, 671] <u>\$4,74</u>	9
5	[\$ 5, 466] <u>\$5.56</u>	
6	[\$6,261] <u>\$6.37</u>	
7	[\$7,056] <u>\$7.19</u>	
8	[\$7,851] \$8,00	

Add \$815 for each additional person in the budget group.

H. 250% FPL:

Size of budget group	FPL per month
1	[\$2,432] \$2,453
2	[\$3,278] <u>\$3,319</u>
3	[\$4,123] \$4,186
4	[\$4,969] <u>\$5,053</u>
5	[\$5,815] \$5,919
6	[\$6,661] \$6,786
7	[\$7,507] <u>\$7,653</u>
8	[\$8,353] \$8,519

Add [\$846] <u>\$866</u> for each additional person in the budget group. [8.200.520.11 NMAC - Rp, 8.200.520.11 NMAC, 1-1-14; A, 5-1-15]

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; 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 in	crease and disregard tab	le
	Period and year	COLA increase	= benefit before
1	2015 Jan Dec	1.017	Jan 15
2	2014 Jan - Dec	1.015	Jan 14
3	2013 Jan - Dec	1.017	Jan 13
4	2012 Jan - Dec	1.037	Jan 12
5	2011 Jan - Dec	0	Jan 11
6	2010 Jan - Dec	1	Jan 10
7	2009 Jan - Dec	1	Jan 09
8	2008 Jan - Dec	1.058	Jan 08
9	2007 Jan - Dec	1.023	Jan 07
10	2006 Jan - Dec	1.033	Jan 06
11	2005 Jan – Dec	1.041	Jan 05
12	2004 Jan - Dec	1.027	Jan 04
13	2003 Jan – Dec	1.021	Jan 03
14	2002 Jan – Dec	1.014	Jan 02
15	2001 Jan - Dec	1.026	Jan 01
16	2000 Jan - Dec	1.035	Jan 00
17	1999 Jan - Dec	1.025	Jan 99
18	1998 Jan - Dec	1.013	Jan 98
19	1997 Jan – Dec	1.021	Jan 97
20	1996 Jan - Dec	1.029	Jan 96
21	1995 Jan - Dec	1.026	Jan 95
22	1994 Jan - Dec	1.028	Jan 94

8.200.520 NMAC

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	COLA Inc	rease and disregard tab	le
	Period and year	COLA increase	= benefit before
23	1993 Jan – Dec	1.026	Jan 93
24	1992 Jan – Dec	1.03	Jan 92
25	1991 Jan - Dec	1.037	Jan 91
26	1990 Jan – Dec	1.054	Jan 90
27	1989 Jan – Dec	1.047	Jan 89
28	1988 Jan - Dec	1.04	Jan 88
29	1987 Jan – Dec	1.042	Jan 87
30	1986 Jan - Dec	1.013	Jan 86
31	1985 Jan – Dec	1.031	Jan 85
32	1984 Jan - Dec	1.035	Jan 84
33	1982 Jul – 1983 Dec	1.035	Jul 82
34	1981 Jul – 1982 Jun	1.074	Jul 81
35	1980 Jul — 1981 Jun	1.112	Jul 80
36	1979 Jul – 1980 Jun	1.143	Jul 79
37	1978 Jul – 1979 Jun	1.099	Jul 78
38	1977 Jul – 1978 Jun	1.065	Jul 77
39	1977 Apr – 1977 Jun	1.059	Apr 77

[8.200.520.12 NMAC - Rp, 8.200.520.12 NMAC, 1-1-14]

ear	Individual	Institution	Individual	Couple	Institution	Couple
	FBR	FBR	VTR	FBR	FBR	VTR
/89 to 1/90	\$368	\$30	\$122.66	\$553	\$60	\$184.33
/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
/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

1/15 to 12/15 \$30 Ineligible child deeming allocation is \$350.00

\$30

1/14 to 1/15

\$721

\$733

8.200.520 NMAC

\$240

\$244

\$1082

\$1,100

\$60

\$60

\$361

\$367

- B. Part B premium is \$104.90 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, 1-1-14]

8,200,520,14	UNISEX LIFE ESTATE AND REMAINDER INTEREST TABLES

Age	Life Estate	Remainder
0	.97188	.02812
1	.98988	.01012
2	.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
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		.17031
	.82969	
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
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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
102	.19034	.60740

.18437	.81563
.17856	.82144
.16962	.83038
.15488	.84512
.13409	.86591
.10068	.89932
.04545	.95455
	.17856 .16962 .15488 .13409 .10068

[8.200.520.14 NMAC - Rp, 8.200.520.14 NMAC, 1-1-14]

8.200.520.15 SUPPLEMENTAL SECURITY INCOME (SSI) LIVING ARRANGEMENTS:

Individual living in his or her own household who own or rent:

Payment amount: [\$721] \$733 Individual [\$1,982] \$1,100 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:

[\$721 - \$240 - \$481] \$733 - \$244 = \$489 Individual

 $[\$1,082 - \$361 = \$721] \ \$1.100 - \$367 = \733 Couple

C. Individual or couple living household of another: For an individual or couple living in another person's household and not contributing his or her pro-rate share of household expenses, subtract the VTR.

Payment amount:

[\$721 - \$240 = \$481] \$733 - \$244 = \$489 Individual

[\$1,082 - \$361 - \$721] \$1,100 - \$367 = \$733 couple

D. Child living in home with his or her parent:

Payment amount:

[\$721] \$733

E. Individual in institution:

Payment amount:

\$30.00

[8.200.520.15 NMAC - Rp, 8.200.520.15 NMAC, 1-1-14; A, 4-1-15]

8.200.520.16 MAXIMUM COUNTABLE INCOME FOR INSTITUTIONAL CARE MEDICAID AND HOME AND COMMUNITY BASED WAIVER SERVICES (HCBS) CATEGORIES: Effective January 1, 2015, the maximum countable monthly income standard for institutional care medicaid and the home and community based waiver categories is \$2,199.

[8.200.520.16 NMAC - Rp, 8.200.520.16 NMAC, 1-1-14; A, 5-1-14]

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, 1-1-14]

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

- A. Monthly computation:
 - (1) total gross unearned income of parent;
- (2) deduct living allowance for ineligible child and SSI-eligible sponsored alien (one half of the monthly SSI FBR LA code A*) for each ineligible child/SSI-eligible sponsored alien);
 - (3) subtotal;
 - (4) deduct \$20.00 general income exclusion 20.00;
 - (5) unearned income subtotal;
 - (6) total gross earned income of parent;
- (7) deduct any remaining allocation for ineligible child and/or SSI-eligible sponsored alien; see Paragraph (2) above;
 - (8) subtotal:
- (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

uncarned;

(14) earned income subtotal;

(15) total of Paragraph (5) plus Paragraph (14);

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

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

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

[8.200.520.18 NMAC - Rp, 8.200.520.18 NMAC, 1-1-14]

8.200.520.19 LIFE EXPECTANCY TAB	LES
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A.	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
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	106	1.59
27	46.80	67	13.70	107	1.50
28	45.88	68	13.09	108	1.41
29	44.97	69	12.50	109	1.33
30	44.06	70	11.92	110	1.25
31	43.15	71	11.35	111	1.17
32	42.24	72	10.80	112	1.10
33	41.33	73	10.27	113	1.02
34	40.23	74	9.27	114	0.96
35	39.52	75	9.24	115	0.89
36	38.62	76	8.76	116	0.83
37	37.73	77	8.29	117	0.77
38	36.83	78	7.83	118	0.71
39	35.94	79	7.40	119	0.66

B.	Females: Life		Life		Life
Age	expectancy	Age	expectancy	Age	expectancy
0	78.79	40	40.61	80	9.11
ĭ	78.42	41	39.66	81	8.58
2	77.48	42	38.72	82	8.06
2 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
5 6	73.57	46	35.00	86	6.20
7	72.59	47	34.08	87	5.79
7 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	71	14.66	111	1.19
32	48.23	72	13.99	112	1.10
33	47.27	73	13.33	113	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 VMAC - Pr. 8 20	79	9.67	119	0.66

[8.200.520.19 NMAC - Rp, 8.200.520.19 NMAC, 1-1-14]

8.200.520.20 COVERED OUARTER INCOME STANDARD:

	COME STATISTICS.
Date	Calendar Quarter Amount
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

[8.200.520.20 NMAC - Rp, 8.200.520.20 NMAC, 1-1-14]

8.200.520.21 STANDARD OF NEED (SON):

	Gross	Gross income test		Net income test		
Budget group size	85% Federal poverty limit (FPL)	AFDC July 16, 1996 185% Standard of need	Standard of need			
	072 JUL and 049/059 Refugee	030 Pregnant women	072 JUL and 049/059 Refugee	AFDC July 16, 1996 030 Pregnant woman		
1	\$791	\$427	\$266	\$231		
2	\$1,072	\$574	\$ 357	\$310		
3	\$1,352	\$720	\$447	\$389		
4	\$1,633	\$868	\$539	\$469		
5	\$1,913	\$1,014	\$630	\$548		
6	\$2,194	\$1,160	\$721	\$627		
7	\$2,474	\$1,306	\$812	\$706		
8	\$2,755	\$1,452	\$922	\$785		
+1	+ \$281	+\$147	+ \$91	+ \$79		

[8.200.520.21 NMAC - N, 1-1-14]

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

History of Repealed Material:

8.200.520 NMAC, Income Standard, filed 12-18-00 - Repealed effective 1-1-14.

⁸ NMAC 4.MAD.500, Eligibility Policies, Income and Resource Standards, filed 12-30-94.

⁸ NMAC 4.MAD.500, Eligibility Policies, Income and Resource Standards, filed 6-20-95.

TITLE 8 SOCIAL SERVICES

CHAPTER 291 MEDICAID ELIGIBILITY - AFFORDABLE CARE PART 430 FINANCIAL RESPONSIBILITY REQUIREMENTS

8.291.430.1 ISSUING AGENCY: New Mexico Human Services Department (HSD). [8.291.430.1 NMAC - Rp, 8.291.430.1 NMAC, 1-1-14]

8.291.430.2 SCOPE: The rule applies to the general public. [8.291.430.2 NMAC - Rp, 8.291.430.2 NMAC, 1-1-14]

8.291.430.3 STATUTORY AUTHORITY: The New Mexico medicaid program is 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 NMSA 1978, Section 27-1-12 et seq. [8.291.430.3 NMAC - Rp, 8.291.430.3 NMAC, 1-1-14]

8.291.430.4 DURATION: Permanent.

[8.291.430.4 NMAC - Rp, 8.291.430.4 NMAC, 1-1-14]

8.291.430.5 EFFECTIVE DATE: January 1, 2014, unless a later date is cited at the end of a section. [8.291.430.5 NMAC - Rp, 8.291.430.5 NMAC, 1-1-14]

8.291.430.6 OBJECTIVE: The objective of this rule is to provide eligibility guidelines when determining eligibility for medicaid programs and other health care programs. Processes for establishing and maintaining this category of eligibility are found in the affordable care general provision chapter located at 8.291.400 NMAC through 8.291.430 NMAC.

[8.291.430.6 NMAC - Rp, 8.291.430.6 NMAC, 1-1-14]

8.291.430.7 DEFINITIONS: Refer to 8.291.400.7 NMAC. [8.291.430.7 NMAC - Rp, 8.291.430.7 NMAC, 1-1-14]

8.291.430.8 MISSION: To reduce the impact of poverty on people living in New Mexico by providing support services that help families break the cycle of dependency on public assistance.

[8.291.430.8 NMAC - Rp, 8.291.430.8 NMAC, 1-1-14]

8.291.430.9 GENERAL NEED DETERMINATION: To be eligible for medicaid, an applicant/recipient must meet specific income standards.

[8.291.430.9 NMAC - Rp, 8.291.430.9 NMAC, 1-1-14]

8.291.430.10 FEDERAL POVERTY LEVEL (FPL): This part contains the monthly federal poverty level table for use in determining monthly income standards for categories of eligibility outlined in 8.291.400.10 NMAC:

HOUSEHOLD SIZE	100%	133%	138%	190%	240%	250%	300%
1	[\$973] <u>\$981</u>	[\$1,294] \$1.305	[\$1,343] \$1,354	[\$1,848] \$1,864	[\$2,33 4] \$2,354	[\$2,432] \$2,453	[\$2,918] \$2.943
2	[\$1,311] \$1,328	[\$1,744] \$1,766	[\$1,809] \$1,832	[\$2,491] \$2,523	[\$3,146] \$3,186	[\$3,278] \$3,319	[\$3,933] \$3,989
3	[\$1,650] \$1,675	[\$2,194] \$2.227	[\$2,276] \$2,311	[\$3,134] \$3,181	[\$3,959] \$4.019	[\$4, 123] \$4,186	[\$4,948] \$5,023
4	[\$1,988] \$2.021	[\$2,644] \$2,688	[\$2,743] \$2,789	[\$3,777] \$3,840	[\$4,770] <u>\$4.850</u>	[\$4,969] \$5.053	[\$5,063] \$6,063

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+1	[\$338] <u>\$347</u>	[8450] \$46]	[\$467] <u>\$479</u>	[8 643] \$ 659	[\$812] <u>\$832</u>	[\$846] <u>\$866</u>	[\$1,040] \$1,040
8	[83,341] \$3,408	[\$4,444] \$4, 532	[\$4,611] \$4,703	[\$6,348] \$6,475	[\$8,018] \$8,178	[\$8,353] \$8,519	[\$10,023] \$10,223
7	[\$3,003] \$3,061	[\$3,994] \$4,071	[\$4,144] \$4,224	(\$5,705) \$5,816	[\$7,206] \$7,346	[\$7,507] \$ 7.653	[\$9,008] \$9 <u>.183</u>
6	[\$2.665] \$2.715	[\$3,5 44] \$3,610	[\$3,677] \$3.746	[\$5,062] \$5.157	[\$6,395] \$6.515	[\$6,661] \$6.786	[\$7,99 3] <u>\$8.143</u>
5	[\$2,326] \$2,368	[\$3,094] \$3,149	[\$3,210] \$3,268	[\$4,430] \$4,499	[\$5,582] \$5.682	[\$5,815] \$5,919	[\$6,978] \$7,103

[8.291.430.10 NMAC - Rp, 8.291.430.10 NMAC, 1-1-14; A, 5-1-14; A, 4-1-15]

8.291.430.11 INCOME STANDARD FOR PREGNANT WOMEN AND PARENT CARETAKER ELIGIBILITY: This part contains the fixed monthly standard for individuals eligible for pregnant women and parent caretaker medicaid:

HOUSEHOLD SIZE	MONTHLY INCOME LIMIT
1	\$451
2	\$608
3	\$765
4	\$923
5	\$1,080
6	\$1,238
7	\$1,395
8	\$1,553
+1	\$158

[8.291.430.11 NMAC - Rp, 8.291.430.11 NMAC, 1-1-14; A, 7-1-14]

8.291.430.12 INCOME DISREGARD: A disregard of five percent of 100 percent of the current FPL, according to the individual's budget group size, will be given according to the ACA related category of eligibility. This income disregard will be subtracted from the countable income.

[8.291.430.12 NMAC - Rp, 8.291.430.12 NMAC, 1-1-14]

8.291.430.13 LIVING ARRANGEMENT: All individuals listed on the application are evaluated according to their living arrangement to determine if they can be included in an assistance group or budget group.

A. Extended living in the home: An individual physically absent from the home is a member of the assistance unit or budget group. Extended living in the home includes:

(1) attending college or boarding school;

(2) receiving treatment in a title XIX medicaid facility (including institutionalized when meeting a nursing facility (NF) level of care (LOC) and intermediate care facilities for the mentally retarded (ICF-MRs);

(3) emergency absences: an individual absent from the home due to an emergency, who is expected to return to the household, continues to be a member of the household;

(4) foster care placements: a child removed from the home by a child protective services agency (tribal, bureau of Indian affairs, or children, youth and families department) will be considered to be living in the home until the adjudicatory hearing; if the adjudicatory hearing results in custody being granted to some other entity, the child will be removed from the assistance unit and budget group;

(5) a stay in a detention center:

(a) regardless of adjudication status the individual continues to be a member of the household but will not be medicaid eligible;

once an adjudicated individual leaves the detention center to receive inpatient services in a medical institution, the individual may be eligible during treatment if all other criteria are met; eligibility ceases to exist when the individual returns to the detention center. B. Extended living in the home also includes: residential treatment centers; (1) (2)group homes: and (3) free-standing psychiatric hospitals. Living in the home with a parent caretaker: To be included in the assistance unit, a child must be living, or considered to be living, in the home of: a biological or adoptive or step parent (there is a presumption that a child born to a (1) married woman is the child of the husband); or a specified relative who: (2) (a) is related within the fifth degree of relationship by blood, marriage or adoption, as determined by New Mexico statute Chapter 45 - Uniform Probate Code; a relationship based upon marriage, such as "in-law" or "step" relationships, continues to exist following the dissolution of the marriage by divorce or death; and assumes responsibility for the day-to-day care and control of the child; the determination of whether an individual functions as the specified relative shall be made by the specified relative unless other information known to the worker clearly indicates otherwise; a child considered to be living in the home: a child is considered to be part of the assistance unit and budget group as evidenced by the child's customary physical presence in the home; if a child is living in more than one household, the following applies: (a) the custodial parent is the parent with whom the child lives the greater number of nights; or **(b)** if the child spends equal amounts of time with each household, the child shall be considered to be living in the household of the parent with the higher MAGI. [8.291.430.13 NMAC - Rp, 8.291.430.13 NMAC, 1-1-14] BASIS FOR DEFINING THE ASSISTANCE UNIT AND BUDGET GROUPS: At the time 8.291.430.14 of application, an applicant or recipient and the department shall identify everyone who is to be considered for inclusion in an assistance unit and budget group. The composition of the assistance unit and budget group is based on the following factors: Assistance group: the assistance unit includes an individual who applies and who is determined A, eligible under one of the categories of eligibility outlined in 8.291.400.10 NMAC. Budget group: the budget group consists of the following types and will be established on an individual basis: Tax filer(s): households that submit an application where an individual intends to file for federal taxes or will be claimed as a dependent on federal income taxes for the current year. The budget group will consist of individuals who are listed on the application as (a) the taxpayer and tax dependents. (b) If there are multiple taxpayers listed on a single application, the budget group(s) will be established based on who the taxpayer intends to claim as a dependent (including the taxpayer). Only the taxpayer and dependents listed on the application will be considered as part of the budget group. (c) In the case of a married couple living together, each spouse will be included in the household of the other spouse, regardless of whether they expect to file a joint tax return, a separate tax return or

(2) Non-filer(s) are individuals applying for medicaid who have not filed for taxes, do not intend to file for federal taxes, have not been claimed as a dependent on taxes in the current year or who meet an

dependent and are living with both parents but whose parents do not expect to file a joint tax return; and

whether one spouse expects to be claimed as a tax dependent by the other spouse.

(ii)

who expect to be claimed as a tax dependent by another taxpayer outside of the household;

filers:

non-custodial parent.

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Exceptions to tax filer rules: the following individuals will be treated as non-

individuals other than a spouse or a biological, adopted, or step child

individuals under 19 who expect to be claimed by one parent as a tax

individuals under 19 who expect to be claimed as a tax dependent by a

exception to tax filer rules in Paragraph (1) above. The following individuals may be included in a budget group when evaluating eligibility for an ACA related medicaid eligibility category, provided that they live together:

- the individual:
- **(b)** the individual's spouse:
- (c) parents/step-parents, if the applicant is under the age of 19; or
- the individual's biological, adopted and step children under the age of 19.
- Households may submit an application that includes both filer and non-filers as defined in Subsections A and B above. The budget group(s) will be organized using the filer and non-filer concepts, and eligibility will be established on an individual basis.

[8.291.430.14 NMAC - Rp, 8.291.430.14 NMAC, 1-1-14; A, 6-1-14]

- INCOME STANDARDS: Verification of income, both earned and unearned, is mandatory for 8.291.430.15 all ACA-related medicaid programs. Verification methods can be found at 8.291.410 NMAC.
- All income will be calculated as defined by Section 36B of the code to produce a modified adjusted gross income (MAGI). This amount is compared to the FPL for the appropriate medicaid category of eligibility and household size.
- MAGI is calculated using the methodologies defined in Section 36B(d)(2)(B) of the federal tax code, with the following exceptions:
 - an amount received as a lump sum is counted as income only in the month received. (1)
- (2)scholarships, awards, or fellowship grants used for education purposes and not for living expenses are excluded from income.
 - American Indian/Alaska native exceptions; the following are excluded from income: (3)
 - distributions from Alaska native corporations and settlement trusts; (a)
- **(b)** distributions from any property held in trust, subject to federal restrictions, located within the most recent boundaries of a prior federal reservation, or otherwise under the supervision of the secretary of the interior;
- distributions and payments from rents, leases, rights of way, royalties, usage (c) rights, or natural resource extraction and harvest from:
 - rights of ownership or possession in any lands described in (i)

Subparagraph (b) above; or

- (ii) federally protected rights regarding off-reservation hunting, fishing, gathering, or usage of natural resources:
- distributions resulting from real property ownership interests related to natural resources and improvements;
 - (i) located on or near a reservation or within the most recent boundaries of

a prior federal reservation; or

- (ii) resulting from the exercise of federally-protected rights relating to such
- real property ownership interests. payments resulting from ownership interests in or usage rights to items that have unique religious, spiritual, traditional, or cultural significance or rights that support subsistence or a traditional
- lifestyle according to applicable tribal law or custom; and
- **(f)** student financial assistance provided under the bureau of Indian affairs education programs.
- all social security benefits under Title II will be counted in determining MAGI. [8.291.430.15 NMAC - Rp, 8.291.430.15 NMAC, 1-1-14; A, 6-1-14]
- RESOURCE STANDARDS: Resources as defined in 8.100.130 NMAC are not a factor of 8.291.430.16 eligibility for ACA related medicaid categories. [8.291.430.16 NMAC - Rp, 8.291.430.16 NMAC, 1-1-14]

HISTORY OF 8.291.430 NMAC:

History of Repealed Material:

8.291.430 NMAC, Financial Responsibility Requirements, filed 9-17-13 - Duration expired 12-31-13.