

DATE: June 27, 2014
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SENIOR BULLETIN: MEDICAID

Key Medicaid Standards as of July 2014

The table shows Medicaid eligibility and other standards in effect as of 4/1/2014.

Standard	Amount	Effective
Resource standard for Medicaid applicant	\$2,000	1/1/89
Community spouse resource allowance (minimum)	\$53,016	7/1/13
Community spouse resource allowance (maximum) ¹	\$117,240	1/1/13
Community spouse income maintenance allowance (minimum)	\$1,967	7/1/14
Community spouse income maintenance allowance (maximum)	\$2,931	1/1/13
Excess Home Equity ²	\$543,000	1/1/13
Excess shelter cost standard	\$590	7/1/14
Utility standard for determining excess shelter costs	\$409	10/1/13
Maximum gross income for COPES CN applicant ³	\$2,163	1/1/13
Maximum gross income for COPES non CN applicant (see explanation under footnote 4) ⁴	\$6,263 (Possibly Higher)	1/1/13
Income allowance for single COPES participant	\$973	4/1/14
Income allowance for married COPES participant	\$721	1/1/13
Home maintenance allowance (monthly for 6 months)	\$973	4/1/14
Daily average statewide private nursing facility rate ⁵	\$267	10/1/13
Monthly average statewide private nursing facility rate	\$7,994	10/1/13
Average monthly state nursing facility rate	\$5,542	10/1/13
Medically needy income level for single person	\$721	1/1/13
Medically needy income level for couple	\$721	1/1/13

¹ The actual amount depends on the date of institutionalization and the couple's total resources at the time of the applicant's institutionalization. See WAC 182-513-1350. The CSRA is also explained in the CLS publications Q & A on Medicaid for Nursing Home Residents and Q & A on the COPES Program.

² Based on CPIU (Consumer Price Index-Urban)

³ For exclusions from gross income, see WAC 182-513-1340. \$2,163 is the current SIL (Special Income Level). COPES applicants with monthly gross non excluded income of \$2,163, or less, are CN (Categorically Needy) COPES eligible.

⁴ Effective April 1, 2012, the Medically Needy In-Home Waiver (MNIW) and the Medically Needy Residential Waiver (MNRW) programs were merged into COPES. WAC 182-515-1508 sets out the income eligibility rules that determine if an applicant, who is not eligible as CN (Categorically Needy), is income eligible for COPES.

WAC 182-515-1508(4) provides that applicants whose gross non excluded monthly income is greater than the SIL (Special income Level - currently \$2,163) are COPES eligible if the applicant's **monthly net income** is no greater than the MNIL (Medically Needy Income Level - currently \$721). **Net income is calculated by reducing gross non-excluded income by:**

- A. Medically Needy (MN) disregards found in WAC 182-513-1345; and
- B. The average monthly nursing facility state rate (currently \$5,542).

The \$6,263 number used in CLS COPES Q&A Pamphlet is derived from adding together the MNIL (currently \$721) and the monthly state average nursing facility rate (currently \$5,542): $\$721 + \$5,542 = \$6,263$. \$6,263 is the maximum allowable gross income for COPES **if the only deduction** from gross non excluded income is the average monthly nursing facility state rate: $\$6,263 - \$5,542 = \$721$. The \$6,263 number is used in the publications in order to provide a tangible number for use in most cases. **However, if additional deductions can be taken under WAC 182-513-1345, then the maximum gross non excluded amount may be higher than \$6,263.** For example, if an applicant has \$6,400 in gross non excluded income and pays a non-Medicare monthly health insurance premium of \$150.00, the applicant will be COPES income eligible because net income is less than the \$721 MNIL: $(\$6,400 - \$5,542 - \$150 = \$708)$.

See the following publications on Washington Law Help (<http://www.washingtonlawhelp.org/>) for additional information:

Consolidation of "Medically Needy" Long-Term Care Programs into COPES and

Questions and Answers on the COPES Program

⁵ This is the amount by which total gifts in a month are divided to calculate periods of ineligibility (in days).

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