

**MINNESOTA HEALTH CARE PROGRAMS FOR SENIORS  
INCOME AND ASSET ELIGIBILITY FIGURES**

**January 2012**

PROGRAM	INCOME		ASSETS	
	SINGLE	COUPLE	SINGLE	COUPLE
Medical Assistance (MA) 100% FPG** 75% FPG (Method B spenddown standard) Full MA benefits, pays Medicare Part A and Part B premiums, deductibles, co-insurance and co-pays.	\$ 908 \$ 681	\$ 1,227 \$ 920	\$ 3,000	\$ 6,000
Qualified Medicare Beneficiary (QMB) (100% FPG) Pays Medicare Part A and Part B premiums, co-pays, and deductibles.	\$ 928 *	\$1,247*	\$10,000	\$18,000
Service Limited Medicare Beneficiary (SLMB) (120% FPG) Pays Medicare Part B premiums.	\$ 1,109*	\$1,491*	\$10,000	\$18,000
QI – 1 (135% FPG) Pays Medicare Part B premiums. Limited funding.	\$1,246*	\$1,676*	\$10,000	\$18,000
Medicare Prescription Drug Subsidy for Part D Participants with income at 150% FPG or below, on a sliding basis, are eligible for reduced or no monthly premiums, deductibles and co payments depending upon income and resources. See POMS Section HI 03001.010, HI 03001.010 and HI 03020.055, <a href="http://www.ssa.gov">www.ssa.gov</a> .	<b>Full subsidy: ≤ 135%</b> \$1,226      \$1,656 <b>75% subsidy ≤ 140%</b> \$1,271      \$1,717 <b>50% subsidy ≤ 145%</b> \$1,316      \$1,779 <b>20% subsidy ≤ 150%</b> \$1,362      \$1,840		\$6,000	\$9,000
			\$10,000	\$20,000
			\$10,000	\$20,000
			\$10,000	\$20,000

\* \$20.00 disregard included \*\*FPG is Federal Poverty Guidelines.

**ELDERLY WAIVER (EW)** Pays full MA benefits plus home and community based services for people who are 65 years of age or older who require the level of care provided in a nursing facility.

**Income Eligibility:** There are two income limits for EW. People with incomes equal to or less than the Special Income Standard (SIS) (currently \$2,022) are eligible for EW without an MA spenddown. They must contribute any income over the maintenance needs allowance (\$935) and other applicable deductions to the cost of services received under EW. This is known as the waiver obligation. All other MA services are provided without a spenddown. Recipients whose income is equal to or less than \$935 are eligible for EW and MA without a spenddown. A single recipient who has income greater than \$2,022 must spend down his or her income in excess of the current MA medically needy income standard of \$681; a married recipient with a community spouse who is receiving a spousal income allocation must spend down his or her income to \$92. Excess income must be applied towards the cost of EW services and other medical services needed by the applicant. The applicant is responsible for paying bills used to meet the spenddown.

**Asset Eligibility:** The rules are (for the most part) the same as those for MA for Nursing Home Residents (below).

**ALTERNATIVE CARE (AC):** Minnesota-funded program pays home care and community services. AC is a state-funded program with higher income and asset limits than EW. People eligible for AC have monthly income greater than 120%FPG (currently \$1,089) *or* assets of more than \$3,000 subject to a limit of \$25,812 (assets adequate to fund a nursing facility stay for more than 135 days). AC clients pay fees that are applied to the cost of their services. Their fees are based on their income and assets and the cost of their AC services. Spousal impoverishment rules apply.

**MEDICAL ASSISTANCE FOR NURSING HOME RESIDENTS.** In addition to full MA benefits, MA pays for home health care and for skilled and custodial care in a nursing home.

**Income:** A nursing home resident must pay all of his/her income to the nursing home less allowable deductions including a \$92 personal needs allowance and an allowance for payment of medical insurance premiums. Further, a community spouse is entitled to a spousal allocation to bring his or her income to \$1,840/month (or up to \$2,739 if shelter costs are greater than \$552 per month). There is a standard utility allowance of \$402 per month; and an electricity and phone allowance of \$120 and \$37 per month, respectively, if the community spouse is not responsible for heating or cooling. MA pays the rest of the nursing home cost. Community spouse keeps all his/her income.

**Assets:** In addition to exempt and unavailable assets, a nursing home resident may have only \$3,000. If married, the community spouse keeps \$32,245 or ½ of all available assets owned by either spouse up to \$113,640. Assets must be reduced properly. Current penalty for uncompensated transfers is \$5,340 per month. The home equity limit is \$525,000.

### **2011 SOCIAL SECURITY ADMINISTRATION BENEFITS RETIREMENT SURVIVORS DISABILITY INSURANCE (RSDI):**

MAXIMUM BENEFIT: \$2,513/month (Age 66)

RETIREMENT EARNINGS LIMIT FOR THE YEAR REACHING RETIREMENT AGE: \$38,880/year\*

RETIREMENT EARNINGS LIMIT FOR YEARS BEFORE RETIREMENT AGE: \$14,640/year‡

\* Applies only to months prior to attaining full retirement age. \$1 in benefits will be withheld for every \$3 in earnings above the limit.

‡ \$1 in benefits withheld for every \$2 in earnings above the limit.

#### **MEDICARE**

PART A PREMIUM:	<input type="checkbox"/> \$451
PART A SKILLED NURSING FACILITY CO-INSURANCE	<input type="checkbox"/> Up to \$144.50 per day for days 21-100
PART A INPATIENT HOSPITAL DEDUCTIBLE	<input type="checkbox"/> A total of \$1,156 per spell of illness for hospital stay of 1-60 days; <input type="checkbox"/> \$289 per day for days 61-90; <input type="checkbox"/> \$578 per day for days 91-150; <input type="checkbox"/> All costs for each day beyond 150 days.
PART B PREMIUM:	<input type="checkbox"/> \$99.90/month for persons who have income at or below \$85,000, more if income exceeds \$85,000
PART B DEDUCTIBLE:	<input type="checkbox"/> \$140 per year (Plus 20% of the Medicare-approved amount for services after the deductible has been met).

#### **SUPPLEMENTAL SECURITY INCOME (SSI)**

INDIVIDUAL	<input type="checkbox"/> \$698/month (Asset Limit: \$2,000)
COUPLE	<input type="checkbox"/> \$1,048/month (Asset Limit: \$3,000)