

Virginia Department of Social Services  
 Medicaid Fact Sheet #45  
 2015 INCOME LIMITS & LTC SPOUSAL IMPOVERISHMENT STANDARD CHANGES  
 Effective 01/22/2015

The following information is given as a guideline only. For Medicaid eligibility to be determined, an application must be filled with the local department of social service. To file an application go to the following website: <https://commonhelp.virginia.gov/access/> or call Cover VA at 1-855-242-8282 to apply by phone. You may also print out and complete a [paper application](#) and mail it to your local [Department of Social Services](#).

The Federal Poverty Levels used to determine the eligibility income limits for certain Medicaid covered groups, as well as FAMIS, and FAMIS MOMS were published on **January 22, 2015**.

**Effective January 22, 2015**

These increased income limits must be used for Medicaid and FAMIS eligibility determinations and renewals processed on or after **January 22, 2015**, with the exception of individuals who meet the definition for the ABD 80% FPL, QMB, SLMB and QI covered groups and receive Social Security benefits. These individual's Social Security COLA is excluded through the month following the month the FPL is published, or until **March 1, 2015**.

The 2015 resource limits for QMB, SLMB and QI have been increased to **\$7,280** for one person and **\$10,930** for a couple.

**I. MEDICAID INCOME LIMITS EFFECTIVE JANUARY 22, 2015**

A. ABD with Income Less than or Equal to 80% FPL and Medicaid Works (initial eligibility determination)

Family Unit Size	Annual	Monthly
1	\$ 9,416	\$785
2	12,744	1,062

B. QMB (100% of FPL)

Family Unit Size	Annual	Monthly
1	\$11,770	\$981
2	15,930	1,328

C. SLMB (120% of FPL)

Family Unit Size	Annual	Monthly
1	\$14,124	\$1,177
2	19,116	1,593

D. QI (135% of FPL)

Family Unit Size	Annual	Monthly
1	\$15,890	\$1,325
2	21,506	1,793

E. QDWI & MEDICAID WORKS (ongoing determination) with or without Social Security Income (200% of FPL)

Family Unit Size	Annual	Monthly
1	\$23,540	\$1,962
2	31,860	2,655

F. Children Under Age 19 (143% of FPL)

Family Unit Size	Annual	Monthly
1	\$16,832	\$1,403
2	22,780	1,899
3	28,729	2,395
4	34,678	2,890
5	40,627	3,386
6	46,576	3,882
7	52,524	4,377
8	58,473	4,873
Each Additional Person Add	5,949	496

G. Pregnant Women (143% of FPL)

Family Unit Size	Annual	Monthly
2	22,780	1,899
3	28,729	2,395
4	34,678	2,890
5	40,627	3,386
6	46,576	3,882
7	52,524	4,377
8	58,473	4,873
Each Additional Person Add	5,949	496

H. Extended Medicaid (185% of FPL)

Family Unit Size	Annual	Monthly
1	\$21,775	\$1,815
2	29,491	2,456
3	37,167	3,098
4	44,863	3,739
5	52,559	4,380
6	60,255	5,022
7	67,951	5,663
8	75,647	6,304
Each Additional Person Add	7,696	642

I. Plan First (200% of FPL)

Family Unit Size	Annual	Monthly
1	\$23,540	\$1,962
2	31,860	2,655
3	40,180	3,349
4	48,500	4,042
5	56,820	4,735
6	65,140	5,429
7	73,460	6,122
8	81,780	6,815
Each Additional Person Add	8,320	694

J. 5% FPL Disregard for all MAGI-based Determinations

Family Unit Size	Annual	Monthly
1	\$ 589	\$ 50
2	797	67
3	1,005	84
4	1,213	102
5	1,421	119
6	1,629	136
7	1,837	154
8	2,046	171
Each Additional Person Add	208	18

**II. FAMIS INCOME LIMITS EFFECTIVE JANUARY 22 2015**

Family Unit Size	150% of FPL		200% of FPL	
	Annual	Monthly	Annual	Monthly
1	\$17,655	\$1,472	\$23,540	\$1,962
2	23,895	1,992	31,860	2,655
3	30,135	2,512	40,180	3,349
4	36,375	3,032	48,500	4,042
5	42,615	3,552	56,820	4,735
6	48,855	4,072	65,140	5,429
7	55,095	4,592	73,460	6,122
8	61,335	5,112	81,780	6,815
Each Additional Person Add	6,240	520	8,320	694

**III. FAMIS MOMS INCOME LIMITS (200% FPL)**

Family Unit Size	Annual	Monthly
2	31,860	2,655
3	40,180	3,349
4	48,500	4,042
5	56,820	4,735
6	65,140	5,429
7	73,460	6,122
8	81,780	6,815
Each Additional Person Add	,320	694

The Long-term Care (LTC) Spousal Impoverishment Standards **did not** changed effective January 22, 2015:

- The Minimum Monthly Maintenance Needs Allowance (MMMNA) is **\$1966.25** (effective 7-1-14)
- The Community Spouse's Monthly Housing Allowance is **\$589.88** (otherwise known as the excess shelter allowance) (effective 7-1-14)