

Beneficiaries Excluded from KanCare

The following table contains a current listing of the beneficiary eligibility categories excluded from the KanCare managed care program. All beneficiaries in one of the eligibility categories listed below will continue in the current Medicaid fee-for-service program after January 1, 2013.

Exclusions from KanCare	Description	FPL	Resource Standard
SOBRA 1903(v)(3)	This program is for non-citizens who are undocumented or who do not meet other non-citizen qualifying criteria and would otherwise qualify for Medicaid if not for their alien status. Eligible individuals may only receive coverage for approved emergency medical conditions.	Varies depending on the specific underlying medical program.	Varies depending on the specific underlying medical program.
QUALIFIED MEDICARE BENEFICIARY (QMB) 1902(a)(10)(E)(i) 1905(p)(1)	This program covers the Medicare out-of-pocket expenses of Medicare recipients, including premiums and co-payments. However, eligible individuals may not be otherwise Medicaid eligible or seeking Medicaid eligibility.	100%	\$6940 (single) \$10,410 (couple)
LOW-INCOME MEDICARE BENEFICIARY (LMB) 1902(a)(10)(E)(iii)	This program only pays the Medicare Part B premium eligible Medicare recipients. However, eligible individuals may not be otherwise Medicaid eligible or seeking Medicaid eligibility.	120%	\$6940 (single) \$10,410 (couple)
EXPANDED LOW-INCOME MEDICARE BENEFICIARY (E-LMB) 1902(a)(10)(E)(iv)(I)	This program also only pays the Medicare part B premium for eligible Medicare recipients. However, eligible individuals may not be otherwise Medicaid eligible or seeking Medicaid eligibility.	135%	\$6940 (single) \$10,410 (couple)
PROGRAM OF ALL-INTENSIVE CARE FOR THE ELDERLY (PACE) 1934	This program is for disabled individuals age 55 years or older residing in selected counties within the state. Eligible individuals receive long term care coverage through a managed care network. HCBS guidelines apply to individuals living in the community and institutional guidelines apply to those living in a facility. Individuals eligible under this program whose income exceeds the protected income level are responsible for a portion of the cost of care.	\$62/month (institution) \$727/month (HCBS)	\$2000
AIDS DRUG ASSISTANCE PROGRAM (ADAP)	This program is for individuals diagnosed with AIDS. Coverage for eligible individuals is limited to payment of prescription drugs related to treatment of AIDS.	\$2,793/month	There is no resource test.
TUBERCULOSIS	This program is for individuals diagnosed with tuberculosis and in need of care for this condition. Coverage for eligible individuals is limited to inpatient hospital care or alternative community based services related to the condition.	There is no income test.	There is no resource test.
MEDIKAN	This program is for individuals who qualify for a cash payment under the General Assistance (GA) program. Eligible individuals must meet	\$267/month (single) \$352/month	\$2,000 (single) \$2,000

Exclusions from KanCare	Description	FPL	Resource Standard
	program disability guidelines and must not be eligible for Medicaid.	(couple)	(couple)
RESIDENTS OF MENTAL HEALTH NURSING FACILITIES and STATE MENTAL HEALTH HOSPITALS (ages 22-64)	These programs is for individuals residing in a mental health nursing facility (NFMH) or state mental health hospital for a long term stay who are between the ages of 22 and 64 years old. Individuals eligible under these programs whose income exceeds the protected income level are responsible for a portion of the cost of their care in the facility. Individuals residing in an NFMH or state mental health hospital who are under the age of 22 or over the age of 64 are included in KanCare.	\$62/month	\$2,000
LONG TERM INSTITUTIONAL CARE 1902(a)(10)(A)(ii)(V)	Individuals residing in a public ICF/MR. Individuals residing in a private ICF/MR are not excluded from KanCare and will be enrolled in a KanCare health plan.	300% SSI \$62/month Personal Needs Allowance	\$2,000
I/DD LONG TERM SERVICES AND SUPPORTS (LTSS)	LTSS for individuals with intellectual or developmental disabilities (I/DD) are delayed entry into KanCare until January 1, 2014. I/DD waiver consumers will be enrolled in KanCare for all non-waiver services.		