300% Special Income Limit for Long Term Care

To be eligible for Medicaid coverage of long term care services (nursing home, HCBS, and PACE), an individual must have income at or below 300% of the SSI one-person standard (for 2024 that amount is $943/month X 3 = $2,829/month). If income exceeds that amount, eligibility may be determined under the Medically Needy (MN) program. For nursing home, HCBS, and PACE, if income exceeds the 300% income limit <u>and</u> the liability/obligation exceeds the cost of care, the case is budgeted as independent living with a $475/month PIL and 6-month base period – spousal impoverishment does not apply.

Program Type	**Income**	**Cost of Care**	**Coverage**	**Budgeting**	**PIL**	**Base Period**	**Spousal Impoverishment**
NF	≤ 300%	N/A	Medicaid	NF	$62	1 mo	Applies
	> 300%	PL ≤ CC	MN	NF	$62	1 mo	Applies
	> 300%	PL > CC	MN	IL	$475	6 mo	Does Not Apply
HCBS	≤ 300%	N/A	Medicaid	HCBS	$2,829	1 mo	Applies
	> 300%	CO ≤ CC	MN	HCBS	$2,829	1 mo	Applies
	> 300%	CO > CC	MN	IL	$475	6 mo	Does Not Apply
PACE – NF	≤ 300%	N/A	Medicaid	NF	$62	1 mo	Applies
	> 300%	PO ≤ CC	MN	NF	$62	1 mo	Applies
	> 300%	PO > CC	MN	IL	$475	6 mo	Does Not Apply
PACE – HCBS	≤ 300%	N/A	Medicaid	HCBS	$2,829	1 mo	Applies
	> 300%	PO ≤ CC	MN	HCBS	$2,829	1 mo	Applies
	> 300%	PO > CC	MN	IL	$475	6 mo	Does Not Apply

If income exceeds the 300% limit, eligibility is then determined allowing income allocation to the community spouse and/or dependent family members, and post-eligibility treatment of income. If the patient liability/client obligation/participant obligation is then less than the cost of care, the case is budgeted as long term care with a 1 month base period. If the patient liability/client obligation/participant obligation exceeds the cost of care, the case is re-budgeted as independent living with a 6 month base period, and post-eligibility treatment of income and spousal impoverishment does not apply.

Qualifying Income Trust (QIT)

A Qualifying Income Trust (QIT), also known as a Miller Trust, is not valid in Kansas due to the Medically Needy (MN) provisions which requires an individual to “spend down” income on medical expenses to the income standard.