

Kansas Medical Assistance Standards

Standards in the Kansas Medical Assistance Programs – To be financially eligible, the total countable income must not exceed the income limit for the specified program. Income limits are based on the number of individuals included in the household size of the determination. Unless otherwise specified, all standards are monthly amounts.

1. MAGI programs

The following chart outlines the income limits for the MAGI Poverty Level programs.

| Medicaid Children and Pregnant Women | | | | | | | M-CHIP | |
|--------------------------------------|------------------------------|-------------|---------------------------|-------------|----------------------------------|-------------|----------------------------------|-------------|
| Household Size | 113% Children ages 6 – 18 | | 149% Children ages 1-5 | | 171% PW & Infants under age 1 | | 113 - 133% Children ages 6–18 | |
| | Lower Limit | Upper Limit | Lower Limit | Upper Limit | Lower Limit | Upper Limit | Lower Limit | Upper Limit |
| 1 | 0 | 1144 | 0 | 1508 | 0 | 1730 | 1144.01 | 1346 |
| 2 | 0 | 1550 | 0 | 2044 | 0 | 2346 | 1550.01 | 1825 |
| 3 | 0 | 1957 | 0 | 2581 | 0 | 2962 | 1957.01 | 2304 |
| 4 | 0 | 2364 | 0 | 3117 | 0 | 3577 | 2364.01 | 2782 |
| 5 | 0 | 2771 | 0 | 3653 | 0 | 4193 | 2771.01 | 3261 |
| 6 | 0 | 3178 | 0 | 4190 | 0 | 4808 | 3178.01 | 3740 |
| 7 | 0 | 3584 | 0 | 4726 | 0 | 5424 | 3584.01 | 4219 |
| 8 | 0 | 3991 | 0 | 5263 | 0 | 6040 | 3991.01 | 4698 |
| Extra Person | | 407 | | 537 | | 616 | | 479 |

| CHIP Children | | | | | | | | | | | |
|----------------|--|-------------|--|-------------|--|---------------|-------------|--|-------------|--|-------------|
| Household Size | 134 - 166% Children ages 6–18 No premium | | 150 - 166% Children ages 1–5 No premiums | | 167 - 191% Children ages 0–18 \$20 premium | | | 192 - 218% Children ages 0–18 \$30 premium | | 219 - 240% Children ages 0-18 \$50 premium | |
| | Lower Limit | Upper Limit | Lower Limit | Upper Limit | Lower Limit | | Upper Limit | Lower Limit | Upper Limit | Lower Limit | Upper Limit |
| | | | | | Infants under 1 | Children 1-18 | | | | | |
| 1 | 1346.01 | 1680 | 1508.01 | 1680 | 1730.01 | 1680.01 | 1933 | 1933.01 | 2206 | 2206.01 | 2428 |
| 2 | 1825.01 | 2277 | 2044.01 | 2277 | 2346.01 | 2277.01 | 2620 | 2620.01 | 2991 | 2991.01 | 3292 |
| 3 | 2304.01 | 2875 | 2581.01 | 2875 | 2962.01 | 2875.01 | 3308 | 3308.01 | 3776 | 3776.01 | 4156 |
| 4 | 2782.01 | 3473 | 3117.01 | 3473 | 3577.01 | 3473.01 | 3996 | 3996.01 | 4560 | 4560.01 | 5020 |
| 5 | 3261.01 | 4070 | 3653.01 | 4070 | 4193.01 | 4070.01 | 4683 | 4683.01 | 5345 | 5345.01 | 5884 |
| 6 | 3740.01 | 4668 | 4190.01 | 4668 | 4808.01 | 4668.01 | 5371 | 5371.01 | 6130 | 6130.01 | 6748 |
| 7 | 4219.01 | 5265 | 4726.01 | 5265 | 5424.01 | 5265.01 | 6058 | 6058.01 | 6915 | 6915.01 | 7612 |
| 8 | 4698.01 | 5863 | 5263.01 | 5863 | 6040.01 | 5863.01 | 6746 | 6746.01 | 7700 | 7700.01 | 8476 |
| Extra Person | | 598 | | 598 | | | 688 | | 785 | | 864 |

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| Caretaker Medical | |
|--------------------------|--|
| Household Size | 38% Caretakers and Children |
| 1 | 385.00 |
| 2 | 522.00 |
| 3 | 659.00 |
| 4 | 795.00 |
| 5 | 932.00 |
| 6 | 1069.00 |
| 7 | 1206.00 |
| 8 | 1343.00 |
| Extra Person | 137.00 |

| Medically Needy – PW and Children | |
|--|-----|
| Household Size | |
| 1 | 475 |
| 2 | 475 |
| 3 | 480 |
| 4 | 497 |
| 5 | 558 |
| 6 | 619 |
| 7 | 680 |
| 8 | 741 |
| Extra Person | 61 |

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2. Non-MAGI Programs

Standards in the QMB, LMB, and QWD Programs

| Household Size | QMB 100% | LMB 120% | ELMB 135% | QWD 200% |
|----------------|-------------|--------------|--------------|-------------|
| 1 | 0-1012 | 1012.01-1214 | 1214.01-1366 | 2024 |
| 2 | 0-1372 | 1372.01-1646 | 1646.01-1852 | 2744 |
| 3 | 0-1732 | 1732.01-2078 | 2078.01-2338 | |
| Extra Person | 360 | 432 | 486 | |

Standards for Independent Living

| Number of Months | Number of Persons in Independent Living | | | | | | | |
|------------------|---|------|------|------|------|------|------|------|
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 1 | 475 | 475 | 480 | 497 | 558 | 619 | 680 | 741 |
| 2 | 950 | 950 | 960 | 994 | 1116 | 1238 | 1360 | 1482 |
| 3 | 1425 | 1425 | 1440 | 1491 | 1674 | 1857 | 2040 | 2223 |
| 4 | 1900 | 1900 | 1920 | 1988 | 2232 | 2476 | 2720 | 2964 |
| 5 | 2375 | 2375 | 2400 | 2485 | 2790 | 3095 | 3400 | 3705 |
| 6 | 2850 | 2850 | 2880 | 2982 | 3348 | 3714 | 4080 | 4446 |
| Extra Person | For each additional person, add \$61 | | | | | | | |

Standards for Long Term Care/HCBS

See section 8160 and 8260 for application of the standards. The Institutional standard is applicable in determining eligibility in either the month the care begins or the following month as specified in 8113. The HCBS standard is applicable beginning the month the choice form is signed, or as per 8270.

The current monthly 300% special income standard for 1 person:

Institutional/HCBS/MFP/PACE: \$2250.00

The current monthly standards for 1 person:

Institutional/PACE: \$ 62.00
HCBS/MFP/PACE: \$727.00

The current monthly standards for 2 people:

Institutional/PACE: \$ 124.00

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Standards for Presumptive Medicaid Disability: SI-Related

To be eligible, the total countable income must not exceed the applicable SSI federal benefit rate for the appropriate size household:

| | |
|---|-----------|
| Eligible individual In Own Home | \$750.00 |
| Eligible Individual with eligible spouse in home | \$1125.00 |
| Eligible individual in household of another | \$500 |
| Eligible individual in Medicaid funded LTC placement | \$30.00 |
| Eligible individual with eligible spouse - both in household of another | \$750 |

Standards in the Working Healthy Program

To be eligible, total countable income must not exceed the monthly 300% poverty level standard for the number of persons in the assistance plan.

| Number of Persons in Plan | Monthly 300% Poverty Level Index |
|---------------------------|----------------------------------|
| 1 | 3035 |
| 2 | 4115 |
| 3 | 5195 |

For premium purposes, the following standards apply:

| 1 person household | | 2 person household | | 3 person household | |
|--------------------|-----------------|--------------------|-----------------|--------------------|-----------------|
| Net Income | Monthly Premium | Net Income | Monthly Premium | Net Income | Monthly Premium |
| 0 – 1012 | 0 | 0 – 1372 | 0 | 0 – 1372 | 0 |
| 1012.01 – 1265 | 55 | 1372.01 – 1715 | 74 | 1372.01 – 1715 | 74 |
| 1265.01 – 1518 | 69 | 1715.01 – 2058 | 93 | 1715.01 – 2058 | 93 |
| 1518.01 – 1771 | 83 | 2058.01 – 2400 | 112 | 2058.01 – 2400 | 112 |
| 1771.01 – 2024 | 97 | 2400.01 – 2744 | 130 | 2400.01 – 2744 | 130 |
| 2024.01 – 2277 | 110 | 2744.01 – 3087 | 149 | 2744.01 – 3087 | 149 |
| 2277.01 – 2530 | 124 | 3087.01 – 3430 | 168 | 3087.01 – 3430 | 168 |
| 2530.01 – 2783 | 138 | 3430.01 – 3773 | 186 | 3430.01 – 3773 | 186 |
| 2783.01 – 3035 | 152 | 3773.01 – 4115 | 205 | 3773.01 – 4115 | 205 |
| | | | | 4115.01 - 5195 | 205 |

Standards in the MediKan Program

The MediKan program shall include either a single adult or a married couple living together as noted in 7430 (5).

The current monthly standard for 1 person: \$250.00

The current monthly standard for 2 people: \$325.00