



State of Florida
Department of Children and Families

Rick Scott
Governor

Esther Jacobo
Interim Secretary

DATE: February 24, 2014 **TRANSMITTAL NO.:** I-14-02-0002

TO: Economic Self-Sufficiency Operations Managers
Economic Self-Sufficiency Program Offices

FROM: Dianna Laffey, Chief, Program Policy (**Signature on File**)

SUBJECT: 2014 Federal Poverty Level Changes and Updated Consolidated Need Standards

EFFECTIVE: April 1, 2014

This memorandum provides staff with the official 2014 Federal Poverty Level (FPL) and Consolidated Need Standard (CNS) for Medicaid and Temporary Cash Assistance (TCA). The new figures apply to all pending applications and active cases effective April 1, 2014.

An automated mass change will be completed before pull down in March for April recurring monthly benefits. There are some cases that cannot be updated by the mass change. These cases will be on the Mass Change Exception Report, which will be available on the ACCESS Online Systems Homepage. Please see Attachment 4 for exceptions that will be posted and instructions for Mass Change Exceptions. When the mass change is completed and the exception report is available, a system broadcast message will be posted on FLORIDA. Staff must address the cases on the exception report by April 30, 2014.

Reminder SSI-Related Staff: Figures on the chart based on the FPL, do not include the \$20 general disregard. Individuals may have income, if their only income is unearned, up to \$20 more than the chart figures and still qualify for benefits (e.g., MEDS-AD individuals may have income up to \$876). The FLORIDA system TMEP table has been adjusted to include the \$20 disregard for MEDS-ICP.

Policy for the \$20 disregard does not apply to programs based on the ICP income standard (ICP, Hospice, HCBS or spousal impoverishment standards) or Family-Related Medicaid.

Attached are updated versions of appendices A-5, A-7, and A-9 for the Program Policy Manual. Appendix A-5 contains the revised 185% FPL income test and CNS for each assistance group size. Appendices A-7 and A-9 reflect the FPL for Family-Related and SSI-Related Medicaid coverage.

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Mission: Protect the Vulnerable, Promote Strong and Economically Self-Sufficient Families, and Advance Personal and Family Recovery and Resiliency

If there are any questions, Region office staff may contact Tracey Harrelson for Medicaid at (850) 717-4560, Gary Scott for TCA at (850) 717-4137, and Lynn Rossow at (850) 717-4100 for system related issues.

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Attachment 1

Temporary Cash Assistance Income Standards					
			TIER I	TIER II	TIER III
			\$50.01/UP	.01-\$50	0
Filing Unit Size	185% of FPL	CNS (100% of FPL)	Payment Standard	Payment Standard	Payment Standard
0.5	1,800	973	90	77	48
1			180	153	95
1.5	2,426	1,311	211	179	119
2			241	205	158
2.5	3,051	1,650	272	231	182
3			303	258	198
3.5	3,677	1,988	334	284	222
4			364	309	254
4.5	4,303	2,326	395	335	278
5			426	362	289
5.5	4,929	2,665	457	388	313
6			487	414	346
6.5	5,555	3,003	518	440	370
7			549	467	392
7.5	6,181	3,341	580	493	416
8			610	519	438
8.5	6,807	3,680	641	545	462
9			671	570	485
9.5	7,433	4,018	702	596	509
10			733	623	534
10.5	8,059	4,356	764	649	557
11			795	676	582
11.5	8,685	4,695	826	702	606
12			857	728	630
12.5	9,311	5,033	888	754	654
13			919	781	678
13.5	9,937	5,371	950	807	702
14			981	834	726
14.5	10,562	5,710	1,012	860	750
15			1,043	887	774
15.5	11,188	6,048	1,074	913	798
16			1,105	940	822
16.5	11,814	6,386	1,136	966	846
17			1,167	993	870
17.5	12,440	6,725	1,198	1,019	894
18			1,229	1,046	918
18.5	13,066	7,063	1,260	1,072	942
19			1,291	1,099	966
19.5	13,692	7,401	1,322	1,125	990
20			1,353	1,152	1,014
20.5	14,318	7,740	1,384	1,178	1,038
21			1,415	1,205	1,062
21.5	14,944	8,078	1,446	1,231	1,086
22			1,477	1,258	1,110
22.5	15,570	8,416	1,508	1,284	1,134
23			1,539	1,311	1,158
23.5	16,196	8,755	1,570	1,337	1,182
24			1,601	1,364	1,206
Additional Person	+626	+339	(.5) +31 (1) +62	(.5) +26 (1) +52	(.5) +24 (1) +48
Effective Date	April 2014	April 2014	July 1996	July 1996	July 1996

Note: 1/2 benefit increase is for households that have members that are subject to Family Cap.

Attachment 2

Family-Related Medicaid Income Limits												
Family Size	100% FPL	Adults		Pregnant Women Including PEPW		Infants < 1		Children			MNIL ** See Note Below	MAGI Disregd (5% of 100% FPL) *** See Note Below
		Parents, Caretakers, Children 19 & 20	Standard Disregard	185% FPL	Standard Disregard	200% FPL	Standard Disregard	1 through 5		6 through 18 *See Note Below		
								133% FPL	Standard Disregard	133% FPL		
1	973	180	109	1,800	58	1,945	58	1,294	68	1,294	289	49
2	1,311	241	146	2,426	79	2,622	79	1,744	92	1,744	387	66
3	1,650	303	183	3,051	99	3,299	99	2,194	116	2,194	486	83
4	1,988	364	221	3,677	119	3,975	119	2,644	139	2,644	585	99
5	2,326	426	258	4,303	140	4,652	140	3,094	163	3,094	684	116
6	2,665	487	296	4,929	160	5,329	160	3,544	187	3,544	783	133
7	3,003	549	333	5,555	180	6,005	180	3,994	210	3,994	882	150
8	3,341	610	371	6,181	200	6,682	200	4,444	234	4,444	981	167
9	3,680	671	408	6,807	221	7,359	221	4,894	258	4,894	1079	184
10	4,018	733	446	7,433	241	8,035	241	5,344	281	5,344	1179	201
11	4,356	795	484	8,059	261	8,712	261	5,794	305	5,794	1279	218
12	4,695	857	522	8,685	282	9,389	282	6,244	329	6,244	1379	235
13	5,033	919	560	9,311	302	10,065	302	6,694	352	6,694	1479	252
14	5,371	981	598	9,937	322	10,742	322	7,144	376	7,144	1579	269
15	5,710	1,043	636	10,562	343	11,419	343	7,594	400	7,594	1,679	286
16	6,048	1,105	674	11,188	363	12,095	363	8,044	423	8,044	1,779	302
17	6,386	1,167	712	11,814	383	12,772	383	8,494	447	8,494	1,879	319
18	6,725	1,229	750	12,440	404	13,449	404	8,944	471	8,944	1,979	336
19	7,063	1,291	788	13,066	424	14,125	424	9,394	494	9,394	2,079	353
20	7,401	1,353	826	13,692	444	14,802	444	9,844	518	9,844	2,179	370
21	7,740	1,415	864	14,318	464	15,479	464	10,294	542	10,294	2,279	387
22	8,078	1,477	902	14,944	485	16,155	485	10,744	565	10,744	2,379	404
23	8,416	1,539	940	15,570	505	16,832	505	11,194	589	11,194	2,479	421
24	8,755	1,601	978	16,196	525	17,509	525	11,644	613	11,644	2,579	438
Additional Person	+ 339	+ 62		+ 626		+ 677		+ 450		+ 450	+ 100	
Effective Date	April 2014	April 1992		April 2014		April 2014		April 2014			January 2014	April 2014

Notes: * Children aged 6 through 18 **do not** receive the standard disregard. They do get the 5% MAGI disregard, if needed.
 ** MNIL--The Medically Needy Income Limit (MNIL) includes the appropriate standard disregard. No additional disregards should be applied to establish a share of cost.
 *** MAGI--The 5% MAGI disregard is used in a budget **only** if it makes a "failing" individual "pass" a full coverage Medicaid group.
 MAGI--The 5% MAGI disregard is never used in a Medically Needy budget.

Eligibility Standards for SSI-Related Programs – April 2014

Coverage Group	Income Limit	Asset Limit
Supplemental Security Income (SSI) Individual*	\$ 721	\$ 2,000
Supplemental Security Income (SSI) Couple*	\$ 1,082	\$ 3,000
ICP/HCBS/Hospice/HCDA Individual	\$ 2,163	\$ 2,000
ICP/HCBS/Hospice/HCDA Couple	\$ 4,326	\$ 3,000
MEDS-AD/ICP-MEDS/Individual (88% FPL)	\$ 856	\$ 5,000
MEDS-AD/ICP-MEDS/Couple	\$ 1,154	\$ 6,000
QMB Individual (100% FPL)	\$ 973	\$7,160
QMB Couple	\$ 1,311	\$10,750
SLMB Individual (100-120% FPL)	\$ 1,167	\$7,160
SLMB Couple	\$ 1,573	\$10,750
QI1 Individual (120-135% FPL)	\$ 1,313	\$7,160
QI1 Couple	\$ 1,770	\$10,750
Working Disabled Individual (200% FPL)	\$ 1,945	\$ 5,000
Working Disabled Couple	\$ 2,622	\$ 6,000
Protected Medicaid	See A-11 and policy in Chapter 2000	
<u>Medicare Part B Premium</u>	\$ 104.90	
<u>Medicare Part A Premium</u>	Number of Qualifying Quarters of Employment	
	Free	40 or more
	\$ 234	30 to 39
	\$ 426	Less than 30
<u>Personal Needs Allowance</u>		
ICP/ICP-MEDS/Hospice (Institution)	\$ 35	
Hospice (Community) 100% FPL	\$ 973	
Assisted Living Waiver	\$ 799.40	
LTC Community Diversion/PACE/SMMC-LTC (resident of assisted living facility)	Facility Room and Board Charge, plus 20% of the FPL(\$195 individual, \$390 couple)	
<u>Spousal Impoverishment</u>		
Minimum Monthly Maintenance Income Allowance (MMMIA)**	\$ 1,939	
Excess Shelter Standard**	\$ 582	
Maximum Community Spouse Income Allowance (MMMIA plus excess shelter allowance cannot exceed this figure)	\$ 2,931	
Community Spouse Asset Allocation Standard	\$ 117,240	
<u>Home Equity Interest Limit</u>	\$ 543,000	
<u>Student Earned Income Disregard Limit</u>	\$ 1,750 per month	
	\$ 7,060 per calendar year	
<u>Substantial Gainful Activity</u>	\$ 1,070 per month	

*Eligibility for SSI is determined by the Social Security Administration.

**These standards change effective July 1 of each year in accordance with federal law.

MASS CHANGE EXCEPTION REPORT INSTRUCTIONS

IF the exception reason is:	THE case is on exception list because:	THEN you will need to:
SYSTEM DETERMINED CLOSED	AABC has been previously run by the ESS and the system determined that the assistance group needed to be closed but the ESS did not close on AWAA.	Run AABC and close the case on AWAA.
MNA RECALC REQUIRED	Assistance groups with a community spouse allocation will need the Maintenance Need Allowance recalculated	Run AABC and authorize as appropriate. NOTE: If there are two separate cases (one for the ICP individual and one for the community spouse), you must run AABC and authorize the nursing home case first.
FAIL REASON CODE	AABC comes up with a "fail" condition; the assistance group will be bypassed.	Run AABC and authorize as appropriate (reason code 241).