

**INCOME**

**MEDICAID EXPANDED INCOME LEVELS**

**Policy:**

The expanded income levels represent 100%, 133% and **200% (effective 11/01/00)** of the federal poverty level (FPL). They are used to determine eligibility as follows:

- pregnant women - 100% or **200% (effective 11/01/00)** (see pages 37 and 501);
- infants under the age of one (1) - **200% (effective 11/01/00)**
- children under the age of six (6); 133%
- children who are age 6 or over, but who are under the age of 19 - 100%.

The expanded levels according to family size are:

No. in Applying Households	1	2	3	4	5	6	7	8
<b>100% FPL Annual*</b>	<b>\$8590</b>	<b>\$11610</b>	<b>\$14630</b>	<b>\$17650</b>	<b>\$20670</b>	<b>\$23690</b>	<b>\$26710</b>	<b>\$29730</b>
Monthly*	\$ 716	\$ 968	\$ 1220	\$ 1471	\$ 1723	\$ 1975	\$ 2226	\$ 2478
<b>133% FPL Annual*</b>	<b>\$11425</b>	<b>\$15442</b>	<b>\$19458</b>	<b>\$23475</b>	<b>\$27492</b>	<b>\$31508</b>	<b>\$35525</b>	<b>\$39541</b>
Monthly *	\$ 953	\$ 1287	\$ 1622	\$ 1957	\$ 2291	\$ 2626	\$ 2961	\$ 3296
<b>200% FPL Annual*</b>	<b>\$17180</b>	<b>\$23220</b>	<b>\$29260</b>	<b>\$35300</b>	<b>\$41340</b>	<b>\$47380</b>	<b>\$53420</b>	<b>\$59460</b>
Monthly	\$ 1432	\$ 1935	\$ 2439	\$ 2942	\$ 3445	\$ 3949	\$ 4452	\$ 4955

Effective **1/1/01**

Number in Applying Households	Additional Person
<b>100% of Poverty Line, Net Annual Income*</b>	<b>Add \$3020 per year</b>
<b>100% of Poverty Line, Net Monthly Income*</b>	<b>Add \$252 per month</b>
<b>133% of Poverty Line, Net Annual Income*</b>	<b>Add \$4017 per year</b>
<b>133% of Poverty Line, Net Monthly Income*</b>	<b>Add \$335 per month</b>
<b>200% of Poverty Line, Net Annual Income*</b>	<b>Add \$6040 per year</b>
<b>200% of Poverty Line, Net Monthly Income*</b>	<b>Add \$504 per month</b>

\* Effective **1/1/01**

**References:**

- SSL Sect. 366.4 (m), (n) and (o)
- Dept. Reg. 360-4.1(b)  
360-4.7(b)  
360-4.8(a)
- ADMs 98 OMM/ADM-6  
90 ADM-42

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90 ADM-9

**GIS****01MA/009****Interpretation:**

When determining eligibility under the Medicaid expanded income levels, **household** size is determined by counting those applying, their legally responsible relatives and any siblings under 21 residing with them, whether or not the siblings are applying (see page 447).

When the A/R is pregnant and the pregnancy is medically verified, the **household** size is increased by one, effective the month of conception or three months prior to the month of application, whichever is later.

When determining eligibility for a pregnant woman, appropriate income disregards (see page 150) are subtracted before comparing the remaining income to the medically needy income level, the PA Standard of Need, or 100% of the federal poverty level, whichever is higher. When the A/R's **household** income is equal to or less than the appropriate level, the pregnant woman and any children under age 19 are fully eligible for Medicaid. If the pregnant woman's income exceeds 100% FPL, compare to **200%** FPL. When the A/R's family income is equal to or less than **200%** FPL, the pregnant woman is eligible for Medicaid coverage of perinatal services.

When determining eligibility for an infant under age 1, subtract the appropriate income disregards. The household income of the infant is compared to the medically needy income level or PA Standard of Need, whichever is higher. If ineligible under that level, household income is then compared to **200%** of the poverty level. The infant under 1 is fully eligible for Medicaid if household income is equal to or less than **200%** of the poverty level. When determining Medicaid eligibility for a child between the ages of one (1) and six (6), the household income of the child after appropriate disregards, is compared first to the medically needy income level or the Public Assistance Standard of Need, whichever is higher. If income exceeds the appropriate level, compare to 133% of the poverty level. A child under the age of six (6), with household income above 133% of the federal poverty level must spend down to the medically needy income/resource levels or PA Standard of Need, whichever is higher, to be eligible for Medicaid coverage. When determining Medicaid eligibility for a child, who is at least

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six (6) years old, but younger than age nineteen (19), the household income of the child, after appropriate disregards, is compared to 100% of the poverty level. A child who is at least six (6) years old, but younger than age nineteen (19), with income above 100% of the federal poverty level must spend down to the medically needy income/resource levels or PA Standard of Need, whichever is higher, to be eligible for Medicaid coverage.

It may be necessary to compare the household income to several levels to determine Medicaid eligibility.

For example:

Household Composition - Pregnant Mother

Child A age 10 months

Child B age 16 years

All members of the household are applying. The mother is employed. After applicable deductions, her income is at **200%** of the poverty level for a household of four.

The mother is eligible for Medicaid coverage of perinatal services. Child A is eligible for full Medicaid coverage. Child B is not eligible.

**NOTE:** Pregnant women, infants and children under age 19 can not spend down to their applicable percentage of the poverty level to achieve eligibility. A pregnant woman with income between 100% and **200%** of the federal poverty level is eligible for Medicaid covered ambulatory prenatal services only. She must spend down to the medically needy income level or PA standard of need, whichever is higher, to be eligible for full Medicaid coverage. An infant, under one (1) year of age, with household income above **200%** of the federal poverty level and children under age 19 with household income above 100% of the federal poverty levels must spend down to the medically needy income level or PA Standard of Need, whichever is higher, to be eligible for full Medicaid coverage.