

BROADCAST DMAS-13

DATE: February 16, 2017  
TO: Local directors and Medicaid staff  
FROM: Cindy Olson, Eligibility Manager, Department of Medical Assistance Services  
SUBJECT: Medicaid and FAMIS Income Limits for 2017  
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The following acronyms are used in this broadcast:

- ABD—Aged, Blind or Disabled
- COLA—Cost of Living Adjustment
- FAMIS—Family Access to Medical Insurance Security Plan
- FPL—Federal Poverty Level
- MAGI—Modified Adjusted Gross Income
- QDWI—Qualified Disabled Working Individuals
- QI—Qualified Individuals
- QMB—Qualified Medicare Beneficiaries
- SLMB—Special Low Income Medicare Beneficiaries

The Federal Poverty Levels used to determine the eligibility income limits for certain Medicaid covered groups, as well as FAMIS and FAMIS MOMS, were published on January 31, 2017. These increased income limits must be used for Medicaid and FAMIS eligibility determinations and renewals processed on or after **January 31, 2017**, with the exception of individuals in the ABD 80% FPL, QMB, SLMB and QI covered groups who receive Social Security (Title II) benefits. The new income limits are effective March 1, 2017 for ABD 80% FPL, QMB, SLMB and QI individuals with Social Security benefits.

**I. MEDICAID FPL INCOME LIMITS**

- A. ABD with Income Less than or Equal to 80% FPL and Medicaid Works (initial eligibility determination)

Family Unit Size	Annual	Monthly
1	\$9,648	\$804
2	12,992	1,083

- B. QMB (100% of FPL)

Family Unit Size	Annual	Monthly
1	\$12,060	\$1,005
2	16,240	1,354

- C. SLMB (120% of FPL)

Family Unit Size	Annual	Monthly
1	\$14,472	\$1,206
2	19,488	1,624

D. QI (135% of FPL)

Family Unit Size	Annual	Monthly
1	\$16,281	\$1,357
2	21,924	1,827

E. QDWI with or without Social Security Income (200% of FPL)

Family Unit Size	Annual	Monthly
1	\$24,120	\$2,010
2	32,480	2,707

F. Children Under Age 19 (143% of FPL)

Family Unit Size	Annual	Monthly
1	\$17,246	\$1,438
2	23,224	1,936
3	29,201	2,434
4	35,178	2,932
5	41,156	3,430
6	47,133	3,928
7	53,111	4,426
8	59,088	4,924
Each Additional	5,978	499

G. Pregnant Women (143% of FPL)

Family Unit Size	Annual	Monthly
2	\$23,224	\$1,936
3	29,201	2,434
4	35,178	2,932
5	41,156	3,430
6	47,133	3,928
7	53,111	4,426
8	59,088	4,924
Each Additional	5,978	499

H. Extended Medicaid (185% of FPL)

Family Unit Size	Annual	Monthly
1	\$22,311	\$1,860
2	30,044	2,504
3	37,777	3,149
4	45,510	3,793
5	53,243	4,437
6	60,976	5,082
7	68,709	5,726
8	76,442	6,371
Each Additional	7,733	645

I. Plan First (200% of FPL)

Family Unit Size	Annual	Monthly
1	\$24,120	\$2,010
2	32,480	2,707
3	40,840	3,404
4	49,200	4,100
5	57,560	4,797
6	65,920	5,494
7	74,280	6,190
8	82,640	6,887
Each Additional	8,360	697

J. 5% FPL Disregard for MAGI-based Determinations

Family Unit Size	Annual	Monthly
1	\$603	\$51
2	812	68
3	1,021	86
4	1,230	103
5	1,439	120
6	1,648	138
7	1,857	155
8	2,066	173
Each Additional	209	18

**II. FAMIS INCOME LIMITS (150% and 200% FPL)**

Family Unit Size	150% of FPL		200% of FPL	
	Annual	Monthly	Annual	Monthly
1	\$18,090	\$1,508	\$24,120	\$2,010
2	24,360	2,030	32,480	2,707
3	30,630	2,553	40,840	3,404
4	36,900	3,075	49,200	4,100
5	43,170	3,598	57,560	4,797
6	49,440	4,120	65,920	5,494
7	55,710	4,643	74,280	6,190
8	61,980	5,165	82,640	6,887
Each Additional	6,270	523	8,360	697

**III. FAMIS MOMS INCOME LIMITS (200%FPL)**

Family Unit Size	Annual	Monthly
2	\$32,480	\$2,707
3	40,840	3,404
4	49,200	4,100
5	57,560	4,797
6	65,920	5,494
7	74,280	6,190
8	82,640	6,887
Each Additional	8,360	697