SSI-Related Programs & Coverage Groups – Financial Eligibility Standards: April 2026

PROGRAMS & TYPES OF COVERAGE	INCOME Individual	INCOME Couple	ASSETS Individual	ASSETS Couple
PROGRAMS MANAGED BY SOCIAL SECURITY (eff 01/01/2026)				
Supplemental Security Income (SSI) Federal Benefit Rate (FBR) Cash payment of SSI from SSA; Includes Full Medicaid	$994 (FBR)	$1,491 (FBR)	$2,000	$3,000
▷ ◯ ****Low Income Subsidy (LIS) or Extra Help (150% FPL)** Helps with costs associated with Medicare Prescription Drug Plans Automatic with full Medicaid or Medicare Savings Programs (QMB, SLMB, QI1). Income asset limits change annually	$1,995	$2,705	$18,090 (w/ Burial Exc)	$36,100 (w/ Burial Exc)
	Updated when FPLs release (Jan/Feb)		Updated each Nov by CMS	
COVERAGE GROUPS FOR PEOPLE 65+ OR DISABLED (Community Medicaid Programs) (interim 04/01/2023) *				
****MEDS-AD (MM S) (88% FPL)** Full Community Medicaid	$1,182	$1,596	$5,000	$6,000
Medically Needy (No Income Limit) Medically Needy Income Level (MNIL) Full Community Medicaid **when** Share of Cost is met	Subtract $180 from gross income	Subtract $241 from gross income		
PROGRAMS FOR PEOPLE WITH MEDICARE (Medicare Savings Programs/Buy-In) (interim 01/01/2026) * not incl. $20 disregard				
◯ ****QMB (100% FPL)** Pays Medicare **A & B** premiums, coinsurance & deductibles **only**	$1,330	$1,803	$9,950	$14,910
◯ ****SLMB (120% FPL)** Pays for Medicare **Part B** premium **only**	$1,596	$2,164		
◯ ****QI1 (135% FPL)** Pays for Medicare **Part B** premium **only**	$1,796	$2,435		
	Updated when FPLs release (Jan/Feb)			
****Working Disabled (200% FPL)** Qualified Disabled Working Individuals (QDWI) Program Pays for Medicare **Part A only.** Must have lost SSDI due to employment	$2,660	$3,607	$4,000	$6,000

MAINTENANCE NEEDS STANDARDS / OTHER

Disregards:
Standard Disregard = **$20**
Earned Income Disregard = **$65 + ½ EI**
Student Earned Income Disregard = **$2,416** monthly, maximum **$9,460** for calendar year

Ineligible Spouse Deeming:
½ FBR = **$497**
Child Allocation = **$497/child** (Difference between the couple and single FBR)

Parent to Disabled Child Deeming:
Parent Allocation = **$994**

Disability Substantial Gainful Activity (SGA) = **$1,690** non-blind **$2,830** blind
Medicare Part B Premium = **$202.90**, Part A free for most **or $565**

*Interim figures are calculated based on the 2026 2.8 % Cost of Living Adjustment (COLA) until the official Federal Poverty Levels (FPL) are published in the Spring of 2026.

**These Standards change effective January 1 of each year in accordance with federal law

PROGRAMS BASED ON INSTITUTIONAL POLICY – Patient Responsibility and Income Trusts may apply. (eff 01/01/2026)	INCOME Individual	INCOME Couple	ASSETS Individual	ASSETS Couple	PERSONAL NEEDS ALLOWANCE Individual	PERSONAL NEEDS ALLOWANCE Couple
***Institutional Care Program (ICP)** Pays Nursing Home (NH) room, board & care Pays Medicare A & B premiums, coinsurance & deductibles	$2,982 (MEDS-AD Institutional Income Limit $1,182)	$5,964 (MEDS-AD Institutional Income Limit $1,596)	$2,000 ($5,000 if MEDS-AD eligible)	$3,000 ($6,000 if MEDS-AD eligible)	$160	$320
***Hospice** Pays Hospice services related to terminal illness Pays Medicare A & B premiums, coinsurance & deductibles					Community $1,305 NH $160	Community $1,763 NH $320
***Home and Community Based Services (HCBS) Waivers or PACE** Pays Medicare A & B premiums, coinsurance & deductibles					PACE /HCBS in ALF: *R&B+ $269/ $538** PACE /HCBS @ home: $2,901/ $5,964 PACE in NH: $160 / $260 iBudget: $2,982 / $5,964	
STATE FUNDED PROGRAMS (eff 01/01/2026)						
***OPTIONAL STATE SUPPLEMENT (OSS) REDESIGN** **Maximum Payment = $184.40 single / $386.80 Couple** Assists with paying room & board at alternate living facilities	$1,072.40	$2,047.80	$2,000	$3,000	$160 Provider rate $1,018.40	$320 Provider rate $1,939.80
***PROTECTED OSS (Reference OLM 2040.0822)** **Maximum Payment = $345 single / $690 Couple** Assists with paying room & board at alternate living facilities	$1,179	$2,261			$160 Provider rate $1,179	$320 Provider rate $2,261
HOME CARE FOR DISABLED ADULTS (HCDA) Pays small stipend to caregivers of disabled	$2,982	$5,964				

SSI Individual $30 only in NH = **$184.40** (SSP)

Transfer of Asset Divisor = **$10,645** (eff 4/2025)

Community Hospice Allocations:
Spouse only = **FBR ($991)**
Spouse + Dependents or Dependents Only = **CNS Standard**

Spousal Impoverishment: (eff 07/01/2025)
MMMNA = **$2,644**
Excess shelter = **$794****
Standard Utility Allowance = **$430 (eff 01/1/2026)**
Maximum Income Allowance = **$4,066.50**
Community Spouse Resource Allowance = **$162,660**
Family Members Allowance with Spouse = **(MMMNA-income) divided by 3**
Dependents with no Spouse = **CNS Standard**
Home Equity Interest Limit = **$752,000**

▷ These resource limits include $1,500 per person for burial expenses.
◯ Indicates programs for which SHINE Counselors provide screening and application assistance.

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