



NEW HAMPSHIRE
DHHS
DEPARTMENT OF
HEALTH & HUMAN SERVICES

Overview of Bureau of Family Assistance Programs

Medicaid
Long Term Care Services (LTC)
State Supplemental program (SSP)

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Colleen A McKinlay Policy Development Administrator

The state of NH administers over 23 Medicaid Programs.



Medicaid is a federal and state funded health care program that serves a wide range of individuals and families who meet certain eligibility requirements.



The program works to ensure that eligible adults and children have access to needed health care services by enrolling and paying providers to deliver covered services to eligible recipients.

Medicaid provides payment for health care services ranging from routine preventive medical care for children to institutional care for the elderly and disabled.

OAA (Old Age Assistance)

- Age 65 and Older

APTD (Aid to the Permanently and Totally Disabled)

- Age 18 through 64
- Physically or Mental Disabled
- 4 or more years or expected to end in death

ANB (Aid to the Needy Blind)

MEAD (Medicaid for Employed Adults with Disabilities)

- Age 18 through 64
- Paying into FICA

MOAD (Medicaid for Older Employed Adults with Disabilities)

- Age 65 or older employed and determined disabled

Income and Resource Limits for SSP Cash and Medical

OAA, APTD, ANB Standard of Need

Group Size	Independent Living Arrangement	Residential Care Facility	Community Residence
1	\$957	\$1,137	\$1,019 (subsidized)
2	\$1,416		\$1,079 (non-subsidized)
3	\$1,875		\$1,137 (enhanced family care)
MEAD / MOAD 450% FPG**	\$5,648	\$7,665	

OAA, APTD ANB Cash resource limit is \$1500

OAA, APTD ANB Medical resource for medically needy households is
\$2500 (1person)

\$4000 (2 persons)

\$4000 plus \$100 for each additional person in the assistance group above two

MEAD and MOAD resource limit is:

\$35,758 (1person)

\$53,634 (2 person)

Long Term Services and Supports require an additional determination as they are not included in standard Medicaid coverage.

This includes:

- Nursing Facility
- Home and Community Based Services
 - Choices for Independence (CFI)
 - Acquired Brain Disorder (ABD)
 - Developmental Disabilities (DD)

Home Care for Children with Severe Disabilities (HC-CSD)

Child must be under 19

Child must need institutional care and

- It is medically appropriate for at home care
- Cost of home care is not more than cost of institutionalization

Count income & resources of the child only

- Do not count parent's income and resources



Medicare Beneficiary Savings Programs

QMB

(Qualified Medicare Beneficiaries)

SLMB & SLMB 135

(Specified Low-Income Medicare Beneficiaries)

QDWI

(Qualified Disabled Working Individuals)

Each Assist with Paying:

Medicare Part A and/or B premiums

Medicare coinsurance and deductibles



Income and Resource Limits for Medicare Savings Plan (MSP)

Medical Assistance - Income Limits (please read across)

% of Federal Poverty Guidelines (FPG; note that the PIL and Parent/Caretaker limits are not based on % FPG)

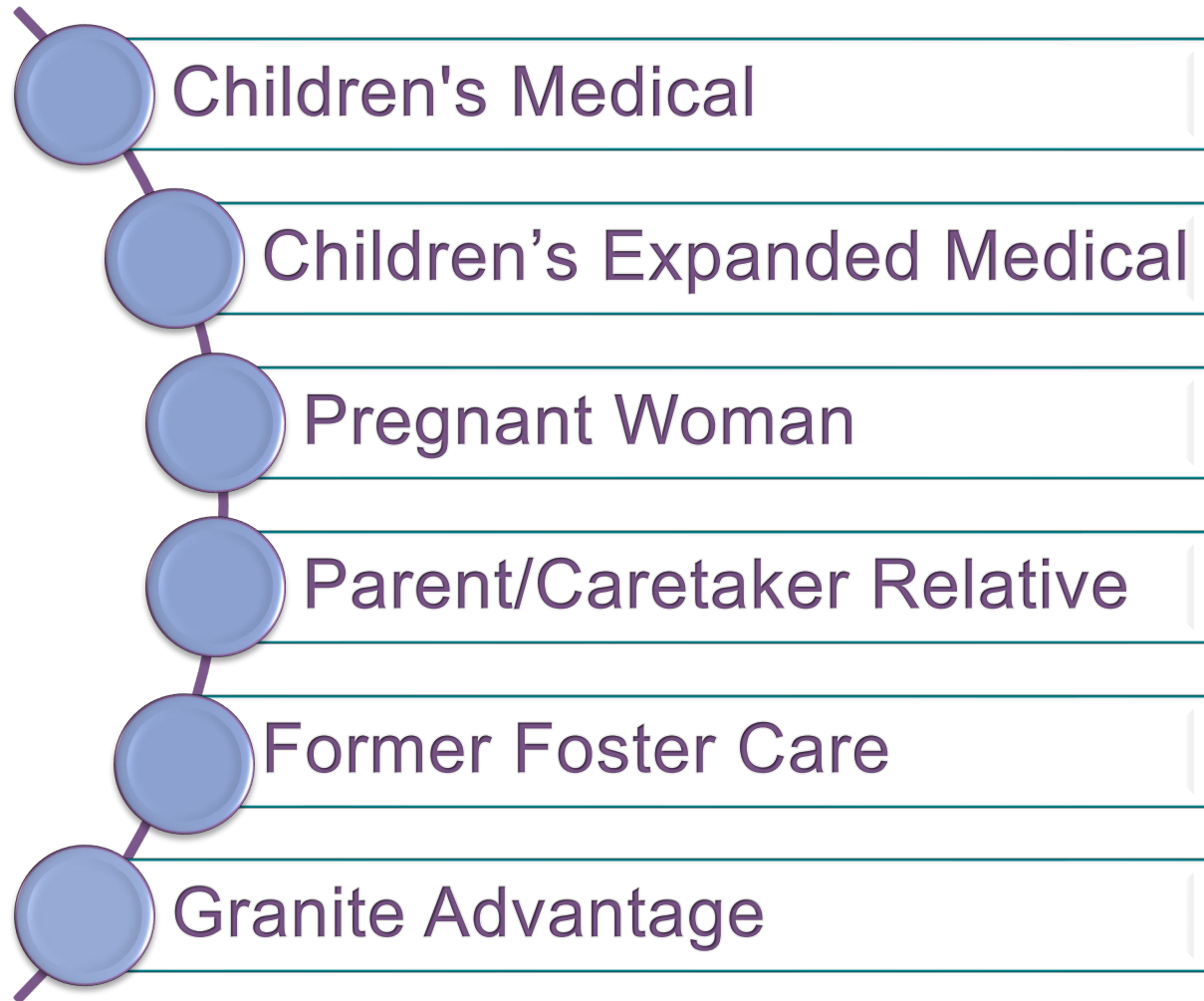
AG size:	1	2	3	4	5	6	7	8*
QMB 100% FPG	\$1,255	\$1,704	\$2,152	\$2,600	\$3,049	\$3,497	\$3,945	\$4,394
SLMB120 >100%, ≤120% 120% FPG	\$1,506	\$2,044	\$2,582	\$3,120	\$3,658	\$4,196	\$4,734	\$5,272
SLMB135 >120%, ≤135% 135% FPG	\$1,695	\$2,300	\$2,905	\$3,510	\$4,116	\$4,721	\$5,326	\$5,931

MSP resource limit is:

\$9,430 (1 person)

\$17,130 (2 persons)

MAGI Medicaid Programs



Single, Streamlined Application

- Individuals can apply for Marketplace coverage and all insurance affordability programs (Medicaid and premium tax credits) on one application.

Simplified Eligibility

- Modified Adjusted Gross Income (MAGI) is the new income methodology based on IRS-defined concepts of income and household to determine Medicaid eligibility for MAGI categories.

Modernized Eligibility Systems

- Use of automated systems to enable real-time eligibility determinations; individuals can apply for coverage online.

- Children must be under age 19
- Not required to live with Parent/Caretaker
- Net income less than 196% of FPL for Children's Medicaid and higher than 196%, but equal to or less than 318% FPL

Medical Assistance - Income Limits (please read across)

% of Federal Poverty Guidelines (FPG; note that the PIL and Parent/Caretaker limits are not based on % FPG)

AG size:	1	2	3	4	5	6	7	8*
CM, PW, FPEC 196% FPG	\$2,460	\$3,339	\$4,218	\$5,096	\$5,975	\$6,854	\$7,733	\$8,611
Expanded CM >196%, <318% FPG	\$3,991	\$5,417	\$6,843	\$8,268	\$9,694	\$11,120	\$12,546	\$13,971

- Pregnant
- Income is less than 196% FPL
- Proof of pregnancy is not required

Medical Assistance - Income Limits (please read across)

% of Federal Poverty Guidelines (FPG; note that the PIL and Parent/Caretaker limits are not based on % FPG)

AG size:	1	2	3	4	5	6	7	8*
CM, PW, FPEC 196% FPG	\$2,460	\$3,339	\$4,218	\$5,096	\$5,975	\$6,854	\$7,733	\$8,611

- Parent/Caretaker relative to a child who is under 18, or under 21 and full time high-school (or equivalent) student
- That child must meet a deprivation reason
- Income is less than FANF payment standard

Medical Assistance - Income Limits (please read across)

% of Federal Poverty Guidelines (FPG; note that the PIL and Parent/Caretaker limits are not based on % FPG)

AG size:	1	2	3	4	5	6	7	8*
PIL	\$888	\$1,033	\$1,177	\$1,311	\$1,444	\$1,611	\$1,744	\$1,944



Former Foster Care

- Children 18 up to 26
- Children who were in foster care and enrolled in Medicaid as of age 18
- Not eligible for any other category of medical assistance
- Resources and income are excluded
- Always HH size of 1



Family Planning Expansion

- No resource test
- Both male and female are eligible for FPMA
- No age requirement
- Only count income of the applicant or recipient
- Household (HH) size includes entire HH plus one
- Income at or below 196% FPL
- This program only covers family planning services

Medical Assistance - Income Limits (please read across)

% of Federal Poverty Guidelines (FPG; note that the PIL and Parent/Caretaker limits are not based on % FPG)

AG size:	1	2	3	4	5	6	7	8*
CM, PW, FPEC 196% FPG	\$2,460	\$3,339	\$4,218	\$5,096	\$5,975	\$6,854	\$7,733	\$8,611

- Adults age 19 to 64
- Not Pregnant
- Not Eligible for Medicare
- Not Eligible for any other Medicaid category
- Income at or below 133% FPL

Medical Assistance - Income Limits (please read across)

% of Federal Poverty Guidelines (FPG; note that the PIL and Parent/Caretaker limits are not based on % FPG)

AG size:	1	2	3	4	5	6	7	8*
Granite Advantage 133% FPG	\$1,670	\$2,266	\$2,862	\$3,458	\$4,055	\$4,651	\$5,247	\$5,844

Income Disregard for Magi Medicaid

Medical Assistance - Income Limits (please read across)

% of Federal Poverty Guidelines (FPG; note that the PIL and Parent/Caretaker limits are not based on % FPG)

AG size:	1	2	3	4	5	6	7	8*
PIL	\$888	\$1,033	\$1,177	\$1,311	\$1,444	\$1,611	\$1,744	\$1,944
Parent/Caretaker	\$670	\$816	\$965	\$1,108	\$1,247	\$1,408	\$1,551	\$1,723
QMB 100% FPG	\$1,255	\$1,704	\$2,152	\$2,600	\$3,049	\$3,497	\$3,945	\$4,394
SLMB120 >100%, <120% 120% FPG	\$1,506	\$2,044	\$2,582	\$3,120	\$3,658	\$4,196	\$4,734	\$5,272
SLMB135 >120%, <135% 135% FPG	\$1,695	\$2,300	\$2,905	\$3,510	\$4,116	\$4,721	\$5,326	\$5,931
Granite Advantage 133% FPG	\$1,670	\$2,266	\$2,862	\$3,458	\$4,055	\$4,651	\$5,247	\$5,844
EMA 185% FPG	\$2,322	\$3,152	\$3,981	\$4,810	\$5,640	\$6,469	\$7,299	\$8,128
QDWI 200% FPG	\$2,510	\$3,407	\$4,304	\$5,200	\$6,097	\$6,994	\$7,890	\$8,787
CM, PW, FPEC 196% FPG	\$2,460	\$3,339	\$4,218	\$5,096	\$5,975	\$6,854	\$7,733	\$8,611
Expanded CM >196%, <318% FPG	\$3,991	\$5,417	\$6,843	\$8,268	\$9,694	\$11,120	\$12,546	\$13,971
5% MAGI Income Deduction	\$63	\$86	\$108	\$130	\$153	\$175	\$198	\$220

Managed Care Organizations (MCO)

NH Healthy Families

AmeriHealth Caritas

Well Sense

Same Day Enrollment

- MCO enrollment is assigned the same day Medicaid eligibility is determined.
- Applicants using NH EASY will be prompted to actively pre-select a MCO and they will be assigned to their chosen MCO.
- Applicants who do not pre-select an MCO will be enrolled in an MCO using various automated selection methods.

Applying For Services Through BFA

Applications can be completed and submitted the following ways:

- ✓ Via NH EASY @ nheasy.nh.gov
- ✓ In person at a local District Office
- ✓ Via fax or mail to a local District Office
- ✓ Via Healthcare.gov (Healthcare Only)
- ✓ Via phone by Calling the Customer Service Center at 1-800-ASK-DHHS or 271-9700

Resources

NH Care Path: <https://www.dhhs.nh.gov/programs-services/adult-aging-care/nhcarepath>

Service Link: <https://www.dhhs.nh.gov/programs-services/adult-aging-care/servicelink>

DHHS Website : <https://www.dhhs.nh.gov/programs-services>

NH EASY: <https://nheasy.nh.gov/#/>

BFA Programs Brochure: <https://nheasy.nh.gov/forms/E/800A.pdf>

QUESTIONS

THANK YOU