

MEDICAL ASSISTANCE STANDARDS**

The following income standards are used to determine eligibility for medical assistance under the Medicaid Fee-For-Service, QExA, Hawaii QUEST, Hawaii QUEST, QUEST-ACE, QUEST-Net, Basic Health Hawaii(BHH), Medicare Saving Programs, Hawaii Rx Plus and SPAP.

FAMILY SIZE	Financial Asst. Std.	Medical Asst. Std.	SSI Std.	100% FPL	120% FPL	135% FPL	150% FPL	185% FPL	200% FPL	250% FPL	300% FPL	350% FPL
1	\$450	\$469	\$637	\$1045	\$1254	\$1410	\$1567	\$1933	\$2090	\$2612	\$3135	\$3657
2	607	632	956	1411	1693	1904	2116	2610	2822	3527	4233	4938
3	763	795	1275	1777	2132	2398	2665	3287	3554	4442	5331	6219
4	919	958	1594	2143	2571	2893	3214	3964	4286	5357	6429	7500
5	1076	1121	1913	2509	3010	3387	3763	4641	5018	6272	7527	8781
6	1232	1284	2232	2875	3450	3881	4312	5318	5750	7187	8625	10062
7	1389	1447	2551	3240	3888	4374	4860	5994	6480	8100	9720	11340
8	1545	1610	2870	3606	4327	4868	5409	6671	7212	9015	10818	12621
9	1701	1772	3189	3972	4766	5362	5958	7348	7944	9930	11916	13902
10	1858	1935	3508	4338	5205	5856	6507	8025	8676	10845	13014	15183
Add'l HH member	157	163	319	366	439	494	549	732	732	915	1098	1281

PROGRAMS:	Fee-For Service and QExA (Aged, Blind or Disabled)	QUEST, QUEST-Net, QUEST-ACE	Medicare Savings Programs, BHH
Medical Asst. Std.	Medically Needy**	N/A	N/A
SSI Standard	Mandatory Categorically Needy	N/A	N/A
FPL Standards*			
100%	Optional Categorically Needy	Adults	BHH/QMB
120%	N/A	N/A	SLMB
135%	N/A	N/A	QI-1
150%	State Pharmacy Assistance Program (SPAP) administered by Med-QUEST		
185%	N/A	Pregnant Women	N/A
200%	N/A	Children < Age 19, Adults in QUEST ACE	QDWI
250%	Individuals with Breast or Cervical Cancer(HBCCTP)	N/A	N/A
300%	QUEST-Net (for children)	QUEST-Net; QUEST-Spenddown***; Transitional Medical Assistance	N/A
350%	Hawaii Rx Program administered by Med-QUEST		

*Federal Poverty Level income to be eligible. ** Income Standards are based on monthly countable income *** Medical bills must exceed the family's excess income to be eligible.

ASSET LIMITS

\$2,000 for one; \$3,000 for two; \$250 for each additional person: Aged, Blind or Disabled; QUEST;QUEST-ACE; QUEST-Spenddown, BHH

\$4,000 for one; \$6,000 for two; \$500 for each additional person: QDWI

\$6,600 for one; \$9,910 for two; \$500 for each additional person: QMB, SLMB,QI-1

\$5,000 for one; \$7,000 for two; \$500 for each additional person: QUEST-Net

No Limits: All pregnant women for the duration of their pregnancy, all children under age 19(eff. 07/00), individuals in HBCCTP

PREMIUM SHARE

QUEST-Net Individuals 19 and older with income greater than 200% FPL = \$60 a month

This insert should only be used as a guide. Contact the nearest Med-QUEST eligibility office for assistance.