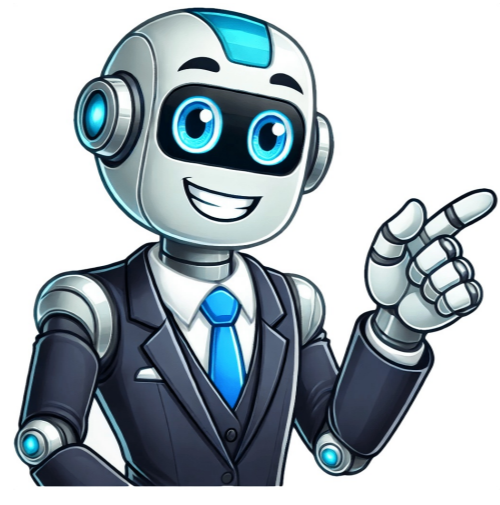


I'm not a robot





## Virginia medicaid eligibility income chart

The Centers for Medicare & Medicaid Services (CMS) is a US federal agency within the Department of Health and Human Services. The agency was formed in 1977 and administers the Medicare program, as well as Medicaid and other health insurance programs. CMS works closely with state governments to manage these programs, which provide healthcare coverage to millions of Americans. The agency also enforces quality standards for nursing homes and clinical laboratories. The name "Medicare" originated from a 1956 law that provided medical care for military families. Over time, the program has evolved, and in 1965, President Lyndon B. Johnson signed the Social Security Amendments, creating both Medicare and Medicaid. CMS is responsible for administering these programs, which have grown significantly since their inception. The agency also plays a key role in regulating healthcare providers and ensuring that patients receive quality care. The Centers for Medicare and Medicaid Services (CMS) has implemented various guidelines and policies in response to changes in administration and emerging healthcare technologies. In October, a data breach of 75,000 people's personal data occurred due to a hack. Additionally, CMS removed a notice that informed insurance companies they were not allowed to charge physicians a fee when the companies paid the doctors for their work, resulting in doctors being charged up to a 5% fee on their compensation. In January 2021, CMS passed a rule covering "breakthrough technology" for four years after FDA approval. However, in September 2021, CMS submitted a proposal to repeal this rule due to safety concerns. The agency also held a hearing in September 2023 to discuss policies improving seniors' access to innovative drugs, medical devices, and technology. During the hearing, Dora Hughes defended the Transitional Coverage for Emerging Technologies (TCET) pathway, which restricts coverage for breakthrough medical devices to five reviews a year. Some lawmakers and medtech trade groups called for expanding this pathway to include diagnostics. Other legislative proposals discussed during the hearing included bills related to Medicare coverage, drug pricing, and transparency in healthcare. CMS employs over 6,000 people, with its headquarters located in Woodlawn, Maryland. The agency has 10 regional offices throughout the United States and is led by an administrator appointed by the president and confirmed by the Senate. Chiquita Brooks-LaSure was sworn in as administrator on May 27, 2021, becoming the first black woman to hold this position. The Administrator of the Centers for Medicare and Medicaid Services (CMS) has been a key position in managing the Medicare program since its inception. Here's a list of the Administrators who have served from 1967 to present: 1. B. Johnson (1967-1978): Appointed by Lyndon B. Johnson, Richard Nixon, Gerald Ford, and Jimmy Carter. 2. Robert Derzon (June 1977-November 1978): Appointed by Jimmy Carter. 3. Leonard Schaeffer (November 1978-June 1980): Appointed by Jimmy Carter. 4. Howard N. Newman (July 1980-January 1981): Appointed by Jimmy Carter. 5. Carolynne Davis (March 1981-August 1985): Appointed by Ronald Reagan. 6. William L. Roper (May 1986-February 1989): Appointed by Ronald Reagan and George H.W. Bush. 7. Gail Wilensky (February 1990-March 1992): Appointed by George H.W. Bush. 8. Bruce Vladeck (May 1993-September 1997): Appointed by Bill Clinton. 9. Nancy-Ann DeParle (November 1997-September 29, 2000): Appointed by Bill Clinton. 10. Thomas A. Scully (May 2001-December 3, 2003): Appointed by George W. Bush. 11. Mark McClellan (March 25, 2004-October 14, 2006): Appointed by George W. Bush. 12. Donald Berwick (July 7, 2010-December 2, 2011): Appointed by Barack Obama. 13. Marilyn Tavenner (December 2, 2011-March 18, 2015): Appointed by Barack Obama and Andy Slavitt (acting). 14. Seema Verma (March 14, 2017-January 20, 2021): Appointed by Donald Trump. 15. Elizabeth Richter (acting, January 20, 2021-May 27, 2021): Appointed by Joe Biden. 16. Chiquita Brooks-LaSure (May 27, 2021-present): Appointed by Joe Biden. Note: Acting Administrators are included in the list for clarity and transparency. This paraphrased text maintains the same information as the original but presents it in a more concise and readable format. Medicaid Income Limits: Understanding the Eligibility Criteria and Consequences for Nursing Home Residents and Those Receiving HCBS Waivers The Centers for Medicare & Medicaid Services (CMS) is responsible for administering Medicaid programs, which provide financial assistance to individuals with low incomes. However, understanding Medicaid eligibility criteria can be complex, especially when it comes to income limits. \*\*Qualifying for Medicaid\*\* It may be possible to qualify for Medicaid with the help of a Certified Medicaid Planner. To find a planner in your area, start by searching online. \*\*2025 Medicaid Eligibility Income Chart\*\* Below are the income limits for various types of Medicaid in each state, effective April 2025: \* \*\*Alabama\*\*\*: For institutional care (e.g. nursing home), married couples can have up to \$5,802/month and single individuals can have up to \$2,901/month. \* \*\*Alaska\*\*\*: Similar to Alabama's limits for institutional care. \* \*\*Arizona\*\*\*: For institutional care, the income limits are similar to those in Alabama. However, for regular Medicaid (e.g. not nursing home), married couples can have up to \$1,762.50/month and single individuals can have up to \$1,304.17/month (effective February 25, 2025 - January 26, 2026). \* \*\*Arkansas\*\*\*: For institutional care, the income limits are similar to those in Alabama. \* \*\*California\*\*\*: California has no income limit for Medicaid recipients in nursing homes, but they are only allowed to keep \$35/month. For regular Medicaid and Medicaid waivers (e.g. home-based care), married couples can have up to \$2,433/month and single individuals can have up to \$1,801/month (effective April 25 - March 26). \* \*\*Colorado\*\*\*: The income limits for Colorado are similar to those in Alabama. \* \*\*Connecticut\*\*\*: For institutional care, the income must be less than the cost of nursing home. For Medicaid waivers and regular Medicaid, married couples can have up to \$2,198/month (effective March 1, 2025) and single individuals can have up to \$1,370/month (effective March 1, 2025). \* \*\*Delaware\*\*\*: The income limits for Delaware are similar to those in Alabama. \* ...and so on. Note that these income limits may be subject to change. \*\*Note\*\*\*: These limits apply only to certain types of Medicaid and do not reflect other eligibility requirements, such as resource limitations or asset tests. The following are the income limits for different types of Medicaid programs in various states: \* Delaware: + Institutional/Nursing Home Medicaid: \$2,417.50/month per spouse + Home and Community-Based Services: \$2,417.50/month + Regular Medicaid/Aged Blind and Disabled: \$967/month \* Florida: + Institutional/Nursing Home Medicaid: \$2,901/month per spouse + Home and Community-Based Services: \$2,901/month + Regular Medicaid/Aged Blind and Disabled: \$967/month \* Georgia: + Institutional/Nursing Home Medicaid: \$2,901/month per spouse + Medicaid Waivers/Home and Community-Based Services: \$2,901/month per spouse + Regular Medicaid/Aged Blind and Disabled: \$967/month \* Hawaii: + Institutional/Nursing Home Medicaid: No hard income limit; entire income except for \$50/month must go towards care + Home and Community-Based Services: \$1,500/month (if living at home) + Regular Medicaid/Aged Blind and Disabled: \$1,500-2,027/month (depending on the effective date) \* Idaho: + Institutional/Nursing Home Medicaid: \$2,921/month per spouse + Medicaid Waivers/Home and Community-Based Services: \$2,921/month per spouse + Regular Medicaid/Aged Blind and Disabled: \$1,020-1,470/month (depending on the effective date) \* Illinois: + Institutional/Nursing Home Medicaid: \$1,304-1,762/month (depending on the effective date) per spouse + Medicaid Waivers/Home and Community-Based Services: \$2,901/month per spouse + Traditional Medicaid/Aged Blind and Disabled: \$1,304-1,762/month (depending on the effective date) \* Iowa: + Institutional/Nursing Home Medicaid: \$2,901/month per spouse + Medicaid Waivers/Home and Community-Based Services: \$2,901/month per spouse + Regular Medicaid/Aged Blind and Disabled: [no specific income limit mentioned] Note that some of these programs have specific rules or limitations on how much of one's income can be counted towards the cost of care. \$967/month for Kansas Regular Medicaid, no set income limit; over \$62/month must go towards care costs. For Kentucky and Louisiana, institutional/nursing home Medicaid has a maximum monthly income of \$2,901, while waivers have the same limit with an additional spouse's income; regular Medicaid is capped at \$235-\$1,450. Maine's regular Medicaid has a cap of \$1,305-\$1,763, while Maryland's regular Medicaid has a cap of \$350-\$392. Massachusetts has no hard limit but requires income over \$72.80/month to go towards care costs. Michigan's regular Medicaid caps out at \$1,305-\$1,763. Minnesota institutional/nursing home Medicaid has a maximum monthly income of \$1,255. \*\*Medicaid Income Limits by State\*\* The following are the maximum income limits allowed for Medicaid eligibility in each state: \* Minnesota: \$1,704/month (eff. 7/24-6/25) \* Mississippi: + Institutional/Nursing Home: \$2,901/month + Waivers/Home and Community Based Services: \$2,901/month + Regular Medicaid/Aged Blind and Disabled: \$967/month \* Missouri: + Institutional/Nursing Home: All available income except for \$50/month must be paid towards care. + Waivers/Home and Community Based Services: Structured Family Caregiving Waiver: \$1,109/month (eff. 4/25-3/26) - Aged & Disabled Waiver: \$1,690/month (eff. 1/25) + Regular Medicaid/Aged Blind and Disabled: \$1,109/month for Aged & Disabled (eff. 4/25-3/26) \* Montana: + Institutional/Nursing Home: Income must be equal to or less than the cost of nursing home care. + Waivers/Home and Community Based Services: \$967/month + Regular Medicaid/Aged Blind and Disabled: \$967/month \* Nebraska: + Institutional/Nursing Home: \$1,304.17/month + Waivers/Home and Community Based Services: \$1,304.17/month + Regular Medicaid/Aged Blind and Disabled: \$1,304.17/month \* Nevada: + Institutional/Nursing Home: \$2,901/month + Waivers/Home and Community Based Services: \$2,901/month + Regular Medicaid/Aged Blind and Disabled: \$967/month \* New Hampshire: + Institutional/Nursing Home: \$2,901/month + Waivers/Home and Community Based Services: \$2,901/month + Regular Medicaid/Old Age Assistance: [no specific amount mentioned] Note that these income limits are subject to change over time, and may not reflect the most up-to-date information. It's always best to check with the relevant state agency or website for the most current information. The monthly payment amounts for Medicaid in various states are as follows: New Jersey: - Institutional care: \$2,901 - \$5,802 per month - Home and Community Based Services (HCBS): \$2,901 - \$5,802 per month - Regular Medicaid (Aged Blind and Disabled): \$1,800 - \$2,433 per month New Mexico: - Institutional care: \$2,901 - \$5,802 per month - HCBS: \$2,901 - \$5,802 per month - Regular Medicaid (Aged Blind and Disabled): \$967 - \$1,450 per month New York: - Institutional care: \$1,800 - \$2,433 per month - HCBS: \$1,800 - \$2,433 per month - Regular Medicaid (Aged Blind and Disabled): \$1,800 - \$2,433 per month North Carolina: - Institutional care: Must be less than the amount Medicaid pays for nursing home care (estimated \$8,004-\$11,093/month) - HCBS: \$1,305 - \$1,763 per month - Regular Medicaid (Aged Blind and Disabled): \$1,305 - \$1,763 per month North Dakota: - Institutional care: No set limit; applicant allowed \$100 for personal needs - HCBS: \$1,174 - \$1,587 per month - Regular Medicaid (Aged Blind and Disabled): \$1,174 - \$1,587 per month Ohio: - Institutional care: \$2,901 - \$5,802 per month - HCBS: \$2,901 - \$5,802 per month - Regular Medicaid (Aged Blind and Disabled): \$967 - \$1,450 per month Oklahoma: - Institutional care: \$2,901 - \$5,802 per month - HCBS: \$2,901 - \$5,802 per month - Regular Medicaid (Aged Blind and Disabled): \$1,305 - \$1,763 per month Oregon: - Institutional care: No specific monthly payment amount available. Note that some states have varying payment amounts based on the type of Medicaid program or eligibility criteria. The monthly income limits are as follows: Oregon Medicaid Waivers and Home and Community Based Services: \$2,901 Oregon Regular Medicaid/Aged Blind and Disabled: \$967 - \$1,450 Pennsylvania Institutional/Nursing Home Medicaid: N/A Pennsylvania Medicaid Waivers/Home and Community Based Services: \$2,901 Pennsylvania Regular Medicaid/Aged Blind and Disabled: \$989.10 - \$1,483.30 Rhode Island Institutional/Nursing Home Medicaid: N/A Rhode Island Medicaid Waivers/Home and Community Based Services: \$2,901 Rhode Island Regular Medicaid/Elders and Adults with Disabilities (EAD): \$1,304 - \$1,763 South Carolina Institutional/Nursing Home Medicaid: N/A South Carolina Medicaid Waivers/Home and Community Based Services: \$2,901 South Carolina Regular Medicaid/Aged Blind or Disabled: \$1,305 - \$1,763 South Dakota Institutional/Nursing Home Medicaid: N/A South Dakota Medicaid Waivers/Home and Community Based Services: \$2,901 South Dakota Regular Medicaid/Aged Blind and Disabled: \$967 - \$1,450 Tennessee Institutional/Nursing Home Medicaid: N/A Tennessee Medicaid Waivers/Home and Community Based Services: \$2,901 Tennessee Regular Medicaid/Aged Blind and Disabled: \$967 - \$1,450 Texas Institutional/Nursing Home Medicaid: N/A Texas Medicaid Waivers/Home and Community Based Services: \$2,901 Texas Regular Medicaid/Aged Blind and Disabled: \$967 - \$1,450 Utah Institutional/Nursing Home Medicaid: No income limit. Utah Medicaid Waivers/Home and Community Based Services: Aging Waiver (\$1,305) and New Choices Waiver (\$2,901). \$2,901 / month Please contact the Virginia Medicaid office at 1-855-242-8282 or visit www.dmas.virginia.gov to learn more about qualifying for Virginia Medicaid. To qualify, you must be a resident of Virginia and have a valid U.S. citizenship status or qualified immigration status. To apply for Medicaid, you will need to meet specific eligibility criteria for one of the available pathways, including income guidelines that vary by program. This guide covers main Medicaid eligibility categories for children, pregnant women, parents, and adults, but there are additional pathways for seniors, people with disabilities, and those with specific medical conditions. The program offers several pathways to Medicaid eligibility, each with its own requirements. You may be eligible for a 5% income disregard, which can already be included or applied, depending on your circumstances. Here are the current monthly income limits for pregnant individuals: \* Family Size \* Monthly Income Limit \* Annual Income Limit \* Annual Income Limit 2 \$2,609 \$31,308 3 \$3,287 \$39,444 4 \$3,965 \$47,580 5 \$4,644 \$55,728 6 \$5,322 \$63,864 7 \$6,000 \$72,000 8 \$6,679 \$80,148 For adults ages 19-64, the monthly income limits are: \* Family Size \* Monthly Income Limit \* Annual Income Limit 1 \$1,800 \$21,600 2 \$2,433 \$29,196 3 \$3,065 \$36,780 4 \$3,697 \$44,364 5 \$4,330 \$51,960 6 \$4,962 \$59,544 7 \$5,595 \$67,140 8 \$6,228 \$74,736 The Medically Needy program helps individuals with high medical expenses who might not qualify for Medicaid due to income. who: Lives in the United States Is a U.S. citizen or national (or is lawfully present) Isn't incarcerated Doesn't receive Medicare Premium Tax Credits help reduce your monthly insurance premiums. You might qualify for premium tax credits if your income is between 100% and 400% of the Federal Poverty Level, especially in Virginia where you can get premium tax credits even above 400% FPL. Family Size Monthly Income at 400% FPL Annual Income at 400% FPL 1 \$5,216 \$62,592 2 \$7,052 \$84,624 3 \$8,884 \$106,608 4 \$10,716 \$128,592 5 \$12,552 \$150,624 6 \$14,384 \$172,608 7 \$16,216 \$194,592 8 \$18,052 \$216,624 Each Additional Person +\$1,832 +\$21,984 Apply During the annual Open Enrollment Period (usually November to January) Or within 60 days of specific life events that qualify for a Special Enrollment Period (losing other coverage, marriage, birth of a child, etc.) How to Apply for Marketplace Coverage Visit Healthcare.gov Call the Marketplace Call Center at 1-800-318-2596 Get in-person help from a Navigator or Certified Application Counselor (find local assistance at Healthcare.gov) What You'll Need to Apply Social Security numbers for everyone on your application Employer and income information for everyone in your household Current insurance information (if applicable) Immigration documentation (if applicable) This guide provides general information about Virginia Medicaid eligibility based on data available as of March 2025. Eligibility criteria, income limits, and application procedures may change. Always consult the official Virginia Medicaid website or call the Virginia Medicaid Recipient Call Center at 1-855-242-8282 for the most current information.