

### 300% Special Income Limit for Long Term Care

To be eligible for Medicaid coverage of long-term care services (nursing home, HCBS, and PACE), an individual must have income at or below 300% of the SSI one-person standard (for 2026, that amount is \$994/month X 3 = \$2,982/month). If income exceeds that amount, eligibility may be determined under the Medically Needy (MN) program. For nursing home, HCBS, and PACE, if income exceeds the 300% income limit and the liability/obligation exceeds the cost of care, the case is budgeted as independent living with a \$994/month PIL and a 6-month base period – spousal impoverishment does not apply.

Program Type	Income	Cost of Care	Coverage	Budgeting	PIL	Base Period	Spousal Impoverishment
NF	≤ 300%	N/A	Medicaid	NF	\$62	1 mo.	Applies
	> 300%	PL ≤ CC	MN	NF	\$62	1 mo.	Applies
	> 300%	PL > CC	MN	IL	\$994	6 mo.	Does Not Apply
HCBS	≤ 300%	N/A	Medicaid	HCBS	\$2,982	1 mo.	Applies
	> 300%	CO ≤ CC	MN	HCBS	\$2,982	1 mo.	Applies
	> 300%	CO > CC	MN	IL	\$994	6 mo.	Does Not Apply
PACE – NF	≤ 300%	N/A	Medicaid	NF	\$62	1 mo.	Applies
	> 300%	PO ≤ CC	MN	NF	\$62	1 mo.	Applies
	> 300%	PO > CC	MN	IL	\$994	6 mo.	Does Not Apply
PACE – HCBS	≤ 300%	N/A	Medicaid	HCBS	\$2,982	1 mo.	Applies
	> 300%	PO ≤ CC	MN	HCBS	\$2,982	1 mo.	Applies
	> 300%	PO > CC	MN	IL	\$994	6 mo.	Does Not Apply

If income exceeds the 300% limit, eligibility is then determined, allowing income allocation to the community spouse and/or dependent family members, and post-eligibility treatment of income. If the patient liability/client obligation/participant obligation is then less than the cost of care, the case is budgeted as long-term care with a 1-month base period. If the patient liability/client obligation/participant obligation exceeds the cost of care, the case is re-budgeted as independent living with a 6-month base period, and post-eligibility treatment of income and spousal impoverishment does not apply.

#### Qualifying Income Trust (QIT)

A Qualifying Income Trust (QIT), also known as a Miller Trust, is not valid in Kansas due to the Medically Needy (MN) provisions, which require an individual to “spend down” income on medical expenses to the income standard.