

APPENDIX A.2 FAMILY MEDICAID 2020 (effective 03/01/2020)

**2020 INCOME LIMITS
Percentage of the Federal Poverty Level (FPL)**

Family Size	Parent/Caretaker with Children	Plus 5%	247% PCK	Plus 5%	205% Child 0-1 TMA	Plus 5%	211% P4HB	Plus 5%	149% Child 1-5	Plus 5%	133% Child 6-19	Plus 5%
1	\$310	364	2627	2681	2180	2234	2244	2298	1585	1639	1415	1469
2	457	529	3549	3621	2946	3018	3032	3104	2141	2213	1911	1983
3	551	642	4471	4562	3711	3802	3820	3911	2697	2788	2408	2499
4	653	763	5393	5503	4476	4586	4607	4717	3254	3364	2904	3014
5	752	880	6315	6443	5242	5370	5395	5523	3810	3938	3401	3529
6	826	973	7238	7385	6007	6154	6183	6330	4366	4513	3897	4044
7	903	1069	8160	8326	6772	6938	6971	7137	4922	5088	4394	4560
8	970	1154	9082	9266	7538	7722	7758	7942	5479	5663	4890	5074
9	1034	1237	10004	10207	8303	8506	8546	8749	6035	6238	5387	5590
10	1113	1335	10926	11148	9068	9290	9334	9556	6591	6813	5884	6106
11	1194	1434	11848	12088	9834	10074	10121	10361	7148	7388	6380	6620
12	1244	1503	12770	13029	10599	10858	10909	11168	7704	7963	6877	7136
For each additional member, add:			\$923		\$766		\$788		\$557		\$497	

NOTE: A Budget Group of One does not exist for Parent/Caretaker with Child(ren) Medicaid or Pregnant Woman Medicaid.

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2020 INCOME LIMITS
Percentage of the Federal Poverty Level (FPL)

Family Size	220% PGW Newborn	Plus 5%	200% WHM	FAMILY MEDICAID MNIL
1	2340	2394	2127	208
2	3161	3233	2874	317
3	3982	4073	3620	375
4	4804	4914	4367	442
5	5625	5753	5114	508
6	6446	6593	5860	550
7	7268	7434	6607	600
8	8089	8273	7354	633
9	8910	9113	8100	667
10	9732	9954	8847	708
11	10553	10793	9594	758
12	11374	11633	10340	808
For each additional member, add:	\$822		\$747	(+) PER ADDITIONAL BG MEMBER 50

NOTE: A Budget Group of One does not exist for Parent/Caretaker with Child(ren) Medicaid or Pregnant Woman Medicaid.

2020 RESOURCE LIMITS

FAMILY MEDICAID MEDICALLY NEEDY (FM-MN) RESOURCE LIMIT											
NUMBER OF INDIVIDUALS IN FM-MN BG											
1	2	3	4	5	6	7	8	9	10	11	12
\$ 2000	4000	4100	4200	4300	4400	4500	4600	4700	4800	4900	5000

FM-MN ALLOWABLE MILEAGE REIMBURSEMENT .575 CENTS PER MILE