



COLORADO

Department of Health Care
Policy & Financing

Department of Health Care Policy and Financing
1570 Grant Street
Denver, CO 80203

AGENCY LETTER

AGENCY LETTER NUMBER: HCPF 17-005

SUPERSEDES NUMBER: 16-004

DATE: MARCH 3, 2017

DIVISION OR OFFICE: HEALTH INFORMATION OFFICE, ELIGIBILITY

SUBJECT AREA: HEALTH FIRST COLORADO BUY-IN PROGRAM FOR WORKING ADULTS WITH DISABILITIES

SUBJECT: 2017 INCOME CHART AND PREMIUM GUIDE

TYPE: I-INFORMATION

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Purpose:

The purpose of this agency letter is to advise county departments of human/social services and Medical Assistance sites of the Health First Colorado Medicaid Buy-In Program for Working Adults with Disabilities (WAWD). Please share this agency letter with anyone who works with this program.

Background:

The income limits for the WAWD program are based on federal poverty level (FPL) guidelines that are updated annually. The 2017 guidelines were published on January 31, 2017 (Federal Register, Volume 82, No. 19, page 8831 - 8832).

Information:

Colorado Benefits Management System (CBMS) has been updated to reflect the new income guidelines for the Health First Colorado Medicaid Buy-In Program for Working Adults with Disabilities according to the attached chart.

Adult Buy-In Eligibility Overview:

The Health First Colorado Medicaid Buy-In Program for Working Adults with Disabilities (Adult Buy-In) is an Adult Medical Assistance program that provides Medicaid benefits

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for working individuals with disabilities, ages 16 through 64, whose adjusted individual income is at or below 450% of the Federal Poverty Level (FPL).

Eligible individuals receive Health First Colorado (Colorado's Medicaid Program) benefits by paying a monthly premium on a sliding scale based on their adjusted income.

Estimation Calculation for Financial Eligibility and Premium Payment:

To qualify financially for the Adult Buy-In, individuals must have an adjusted income at or below 450% FPL. In general, both income from a job and all other sources of income are used to determine eligibility for the Adult Buy-In program; however, about half of your income from a job is excluded in determining eligibility and monthly premium.

The guide below is provided to help estimate income and premium level for the Adult Buy-In program. Please note that there are further income adjustments that may be made at the time of application.

To estimate financial eligibility and monthly premium, use the following steps:

A. Family Size:

1. All eligible individuals are a family size of one for the Adult Buy-In. In the following steps, only the individual applicant's information should be used. If more than one person is applying, complete the following steps for each person.

B. Income Adjustment Information:

Income Adjustment Information:

A. Unearned Income (any income received that is not from a job)

Step 1: Apply the \$20 General Income Disregard to unearned income first. If there is less than or no unearned income, apply any remaining part or all of this disregard to earned income in Step 2

Example: Unearned income: \$13
 Income disregard: \$20
 Remaining disregard: -\$7

(Unearned Income-\$20 = Estimated Monthly Unearned Income)



B. Earned Income (Earned income is the total amount of monthly income from a job before taxes)

Step 2: If the Estimated Monthly Unearned Income results as a negative number (such as: -\$7), subtract the negative number from the Earned income.

Example: Earned income: \$300
 Remaining disregard: -\$7
 Earned income total: \$293

Or, if there is no Unearned Income, subtract \$20 from the Earned Income
 (Earned Income-\$20 = Estimated Monthly Earned Income)

Step 3: Subtract \$65 from the amount calculated in Step 2 for Earned Income

Step 4: Divide the remaining amount in Step 3 by 2 (Step 3 Amount ÷ 2 = Estimated Monthly Earned Income)

C. Estimate of Total Monthly Income after Income Adjustments:

Step 5: Add the estimated monthly unearned (Step 1) and earned income (step 4) together

(Estimated monthly unearned income + estimated monthly earned income)

C. Using the *Estimate of Total Monthly Income*, refer to the Income Chart and Premium Guide below.

Income Chart and Premium Guide ⁱ					
	Monthly Income After Income Adjustments				
Family Size: 1	\$0 - \$402	\$403 - \$1,337	\$1,338 - \$2,010	\$2,011 - \$3,015	\$3,016 - \$4,523
Federal Poverty Level (FPL)	0% - 40%	41% - 133%	134% - 200%	201% - 300%	301% - 450%
Monthly Premium	\$0	\$25	\$90	\$130	\$200

ⁱ **NOTE:** This chart is based on 2017 Federal Poverty Level (FPL) guidelines.



Effective Date:

April 1, 2017

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