STATE OF CALIFORNIA—HEALTH AND WELFARE AGENCY

PETE WILSON, Governor

DEPARTMENT OF HEALTH SERVICES
714/744 P STREET
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(916) 657-2941

March 14, 1994

TO: All County Welfare Directors
All County Administrative Officers
All County Medi-Cal Program Specialists/Liaisons

Letter No.: 94-29

NEW FEDERAL POVERTY LEVELS, EFFECTIVE APRIL 1, 1994

Ref.: ACWDLs 90-42, 91-34, 92-19, and 93-16

The enclosed chart provides you with the poverty level ceilings for the Medi-Cal percentage programs. These ceilings are derived from the federal poverty level figures (column 5 on the enclosed chart) published in the Federal Register on February 10, 1994. The figures in the enclosed chart are effective beginning April 1, 1994.

If you have any questions, please contact Dave Rappolee of my staff at (916) 657-0163.

Sincerely,

ORIGINAL SIGNED BY

FRANK S. MARTUCCI, Chief
Medi-Cal Eligibility Branch

Enclosure

Effective 4/01/94

1994 FEDERAL POVERTY LEVEL CHART

Persons	MMNL($)	% of FPL	100%($)	Annual($)	110%($)	Annual($)	133%($)	Annual($)	185%($)	Annual($)	200%($)	Annual($)
1	600	98	614	7,360	675	8,096	816	9,789	1,135	13,616	1,227	14,720
2	750	92	820	9,840	903	10,824	1,091	13,088	1,518	18,204	1,641	19,680
2 Adults	934	114	820	9,840	903	10,824	1,091	13,088	1,518	18,204	1,641	19,680
3	934	91	1,027	12,320	1,130	13,552	1,366	16,386	1,900	22,792	2,054	24,640
4	1,100	90	1,234	14,800	1,357	16,280	1,641	19,684	2,282	27,380	2,467	29,600
5	1,259	88	1,440	17,280	1,585	19,008	1,916	22,983	2,665	31,968	2,881	34,560
6	1,417	87	1,647	19,760	1,812	21,736	2,191	26,281	3,047	36,556	3,294	39,520
7	1,550	84	1,854	22,240	2,039	24,464	2,465	29,580	3,429	41,144	3,707	44,480
8	1,692	83	2,060	24,720	2,267	27,192	2,740	32,878	3,812	45,732	4,121	49,440
9	1,825	81	2,267	27,200	2,494	29,920	3,015	36,176	4,194	50,320	4,534	54,400
10	1,959	80	2,474	29,680	2,721	32,648	3,290	39,475	4,576	54,908	4,947	59,360
For each additional member add:	$14			2,480	228	2,728	275	3,299	383	4,588	414	4,960

Medi-Cal maintenance need limit for person in LTC = $35

Medi-Cal regular maintenance need level = MMNL

Qualified Medicare Beneficiary (QMB) = 100%

Children born after 9/30/83, ages 6 up to 19 = 100%

Specified Low Income Beneficiaries = 110%

Children age 1 up to age 6 = 133%

Pregnant women and infants up to age 1 in a) Income Disregard Program: use the 200% chart (the disregard is built into the 200% chart); and for b) Asset Waiver Program: income must fall between the 185% and 200% amounts.

Qualified Disabled Working Individuals = 200%

Transitional Medi-Cal (TMC) = 185%

*Decimals are rounded up to the nearest dollar