STATE OF CALIFORNIA—HEALTH AND WELFARE AGENCY

PETE WILSON, *Governor*

DEPARTMENT OF HEALTH SERVICES
714/744 P STREET
BOX 942732
CRAMENTO, CA 94234-7320

March 23, 1995

(916) 657-2941

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

Letter No.: 95-19

NEW FEDERAL POVERTY LEVELS, EFFECTIVE APRIL 1, 1995

Ref.: All County Welfare Directors Letter Nos. 90-42, 91-34, 92-19, 93-16, and 94-29

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 of the enclosed chart) published in the Federal Register on February 9, 1995. The figures in the enclosed chart are effective beginning April 1, 1995.

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

Enclosure

Effective 4/01/95

1995 FEDERAL POVERTY LEVEL CHART

Persons	MMNL($)	% of FPL	100%($)	Annual($)	120%($)	Annual($)	133%($)	Annual($)	185%($)	Annual($)	200%($)	Annual($)
1	600	97	623	7,470	747	8,964	828	9,936	1,152	13,820	1,245	14,940
2	750	90	836	10,030	1,003	12,036	1,112	13,340	1,547	18,556	1,672	20,060
2 Adults	934	112	836	10,030	1,003	12,036	1,112	13,340	1,547	18,556	1,672	20,060
3	934	89	1,050	12,590	1,259	15,108	1,396	16,745	1,941	23,292	2,099	25,180
4	1,100	88	1,263	15,150	1,515	18,180	1,680	20,150	2,336	28,028	2,525	30,300
5	1,259	86	1,476	17,710	1,771	21,252	1,963	23,555	2,731	32,764	2,952	35,420
6	1,417	84	1,690	20,270	2,027	24,324	2,247	26,960	3,125	37,500	3,379	40,540
7	1,550	82	1,903	22,830	2,283	27,396	2,531	30,364	3,520	42,236	3,805	45,660
8	1,692	80	2,116	25,390	2,539	30,468	2,815	33,769	3,915	46,972	4,232	50,780
9	1,825	79	2,330	27,950	2,795	33,540	3,098	37,174	4,309	51,708	4,659	55,900
10	1,959	78	2,543	30,510	3,051	36,612	3,382	40,579	4,704	56,444	5,085	61,020
For each additional member add:	$14		214	2,560	256	3,072	284	3,405	395	4,736	427	5,120

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 = 120%

Children age 1 up to age 6 = 133%

Pregnant women and infants up to age 1: Income Disregard Program: use the 200% chart (the disregard is built into the 200% chart.)

Qualified Disabled Working Individuals = 200%

Transitional Medi–Cal (TMC) = 185%

*Decimals are rounded up to the nearest dollar

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