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 25, 1997

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

Letter No.: **97-11**

NEW FEDERAL POVERTY LEVELS, EFFECTIVE APRIL 1, 1997

Ref.: All County Welfare Directors Letters Nos. 90-42, 91-34, 92-19, 93-16, 94-29 95-19, and 96-17

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 March 10, 1997.

If you have any questions, please contact Dave Rappolee at (916) 657-0163 or Marge Buzdas at (916) 657-0726.

Sincerely,

ORIGINAL SIGNED BY

FRANK S. MARTUCCI, CHIEF
Medi-Cal Eligibility Branch

Enclosure

Effective 4/01/97

1997 FEDERAL POVERTY LEVEL CHART

Persons	MMNL($)	% of FPL	100%($)	Annual($)	120%($)	Annual($)	133%($)	Annual($)	185%($)	Annual($)	200%($)	Annual($)
1	600	92	658	7,890	789	9,468	875	10,494	1,217	14,597	1,315	15,780
2	750	85	885	10,610	1,061	12,732	1,176	14,112	1,636	19,629	1,769	21,220
2 Adults	934	106	885	10,610	1,061	12,732	1,176	14,112	1,636	19,629	1,769	21,220
3	934	85	1,111	13,330	1,333	15,996	1,478	17,729	2,056	24,661	2,222	26,660
4	1,100	83	1,338	16,050	1,605	19,260	1,779	21,347	2,475	29,693	2,675	32,100
5	1,259	81	1,565	18,770	1,877	22,524	2,081	24,965	2,894	34,725	3,129	37,540
6	1,417	80	1,791	21,490	2,149	25,788	2,382	28,582	3,314	39,757	3,582	42,980
7	1,550	77	2,018	24,210	2,421	29,052	2,684	32,200	3,733	44,789	4,035	48,420
8	1,692	76	2,245	26,930	2,693	32,316	2,985	35,817	4,152	49,821	4,489	53,860
9	1,825	74	2,471	29,650	2,965	35,580	3,287	39,435	4,572	54,853	4,942	59,300
10	1,959	73	2,698	32,370	3,237	38,844	3,588	43,053	4,991	59,885	5,395	64,740
For each additional member add:	$14		227	2,720	272	3,264	302	3,618	420	5,032	454	5,440

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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