

State of California—Health and Human Services Agency Department of Health Care Services



April 23, 2008

TO: ALL COUNTY WELFARE DIRECTORS Letter No.: 08-16

ALL COUNTY WELFARE ADMINISTRATIVE OFFICERS

ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS

ALL COUNTY HEALTH EXECUTIVES

ALL COUNTY MENTAL HEALTH DIRECTORS

ALL COUNTY MEDS LIAISONS

SUBJECT: ERRATA TO 08-05: ADDITIONS OF 135 PERCENT LEVEL TO THE

NEW FEDERAL POVERTY LEVELS CHART.

(Reference: All County Welfare Directors Letter (ACWDL) Numbers: 90-42, 91-34, 92-19, 93-16, 94-29, 95-19, 96-17, 97-11, 98-14, 99-15, 00-10,

01-16, 02-13, 03-10, 04-04, 05-13, 06-06, 07-04, 08-05).

The purpose of this letter is to add the 135 percent column to the Federal Poverty Level (FPL) Chart issued in ACWDL 08-05.

These ceilings are derived from the annual FPL figures published in the Federal Register on January 23, 2008, (Volume 73, Number 15, Pages 3971-3972).

If you have any questions on the FPL chart, please contact Mr. Dave Rappolee at (916) 552-9517.

Original Signed By:

Vivian Auble, Chief Medi-Cal Eligibility Division

Enclosures

		2008 FEDERAL POVERTY LEVEL CHART					Effective 04/01/08*				
Persons	Monthly MMNL(\$)	MMNL as % of FPL	100%(\$) Monthly	Annual(\$) 100% FPL	120% Monthly (\$)	133% Monthly (\$)	135% Monthly (\$)	185% Monthly (\$)	200% Monthly (\$)	250% Monthly (\$)	
1	600	70	867	10400	1040	1153	1170	1604	1734	2167	
2	750	65	1167	14000	1400	1552	1575	2159	2334	2917	
2 Adults	934	81	1167	14000	1400	1552	1575	2159	2334	2917	
3	934	64	1467	17600	1760	1951	1980	2714	2934	3667	
4	1100	63	1767	21200	2120	2350	2385	3269	3534	4417	
5	1259	61	2067	24800	2480	2749	2790	3824	4134	5167	
6	1417	60	2367	28400	2840	3148	3195	4379	4734	5917	
7	1550	59	2667	32000	3200	3547	3600	4934	5334	6667	
8	1692	58	2967	35600	3560	3946	4005	5489	5934	7417	
9	1825	56	3267	39200	3920	4345	4410	6044	6534	8167	
10	1959	55	3567	42800	4280	4744	4815	6599	7134	8917	
addtn'l member add:	14		300	3600	360	399	405	555	600	750	

\$35: = for Resident in LTC Facilities

MMNL: = for Medically Needy Program

100% FPL: = for Qualified Medicare Beneficiary (QMB) Program; and = for Children Ages 6 Up To 19 Percent Program; and

' = for FPL Program for Aged and Disabled; and

' = for Section 1931 Applicants and for Certain Recipient's

120% FPL: < for Specified Low Income Beneficiaries

135% FPL: = Qualified Individual 1 Program

Notes:

133% FPL: = for Children Ages 1 Up To Age 6

185% FPL: = for Transitional Medi-Cal (TMC)

200% FPL: = for Qualified Working Disabled Individuals; and

= for Pre gnant Women and Infants Up To Age 1 (disregard is in the 200% FPL)

250% FPL: = for Healthy Families Program, and for Working Disabled Program

[&]quot;=" means: eligibility if budget unit income is equal to or less than income limit.

[&]quot;<" means: eligibility if budget unit income is less than income limit.

[·] Figures in above chart are rounded up to next dollar where necessary.

^{*} For applicants and recipients of the Medicare Savings Programs (MSP-includes Qualified Medicare Beneficiary, Specified Low Income Beneficiary, and Qualified Individual 1 programs) not receiving RSDI Title II income, the new FPL figures are effective the date of publication, which is January 23, 2008. For MSP applicants or recipients that are receiving RSDI Title II income, the new FPL figures are effective March 1, 2008.