

DEPARTMENT OF HEALTH SERVICES

14/744 P STREET
SACRAMENTO, CA 95814
(916) 445-1797



July 18, 1980

To: All County Welfare Directors

Letter No. 80-28

JULY, 1980 MAINTENANCE NEED LEVELS AND INCOME IN-KIND AMOUNTS

This is the third in the series of Medi-Cal letters transmitting information pertinent to eligibility and share-of-cost determinations for July 1980 and continuing months of eligibility. The previous letters were 80-15 and 80-19.

Attached are the maintenance need levels and income in-kind amounts which are effective July 1, 1980 as required by state statute. These levels should be implemented in share-of-cost determinations as quickly as administratively feasible, but no later than October, 1980 month of eligibility. All retroactive share-of-cost computations for July, August and September must be completed no later than November 30, 1980.

State Quality Control staff have been advised of these instructions and will conduct their reviews accordingly. That is, in all cases with a review month of October, 1980 or later, the attached amounts will be employed.

The new amounts will be distributed to all holders of the Medi-Cal Eligibility Manual shortly.

The cost of living client information stuffers, described in Letters 80-15 and 80-19, have been shipped to counties' standard Medi-Cal forms delivery addresses. Enough stuffers have been sent to each county for two monthly mailings to all Medi-Cal share-of-cost cases.

We have found that we are not going to be able to have the Notice of Action form for retroactive share of cost reduction printed in time for use this year. Therefore we are requesting that county staff include the appropriate information regarding retroactive adjustments on existing MC 230 stock. (Refer to attachment included with Medi-Cal Letter No. 80-15.) The printing order will be completed this year, so supplies will be available if needed in future years.

If you have any questions regarding this letter, contact your Medi-Cal field representative.

Sincerely,

Original signed by

Doris Z. Soderberg, Chief
Medi-Cal Eligibility Branch

Attachment

cc: Medi-Cal Liaisons
Medi-Cal Field Representatives

Expiration date: January 31, 1981

50511. Value of Income In Kind. (a) The value of the income in kind for the items specified in Section 50509 (a), shall be the actual cost or net market value of the item, or the following amounts, whichever is less.

(1) Housing.

- (A) One person MFBU - \$99 104 per month.
- (B) Two person MFBU - \$121 140 per month.
- (C) Three person MFBU - \$132 152 per month.
- (D) Four person or larger MFBU - \$140 162 per month.

(2) Utilities, including telephone.

- (A) One person MFBU - \$20 23 per month.
- (B) Two person MFBU - \$11 24 per month.
- (C) Three person MFBU - \$23 27 per month.
- (D) Four person or larger MFBU - \$24 28 per month.

(3) Food.

- (A) One person MFBU - \$50 58 per month.
- (B) Two person MFBU - \$108 125 per month.
- (C) Three person MFBU - \$137 158 per month.
- (D) Four person MFBU - \$169 195 per month.
- (E) Five person MFBU - \$204 236 per month.
- (F) Six person MFBU - \$237 274 per month.
- (G) Seven person MFBU - \$265 306 per month.
- (H) Eight person MFBU - \$290 335 per month.

- (I) Nine person MFBU - \$~~317~~ 366 per month.
- (J) Ten person or larger MFBU - \$~~343~~ 391 per month.

(4) Clothing.

- (A) One person MFBU - \$~~16~~ 18 per month.
- (B) Two person MFBU - \$~~30~~ 35 per month.
- (C) Three person MFBU - \$~~45~~ 52 per month.
- (D) Four person MFBU - \$~~60~~ 69 per month.
- (E) Five person MFBU - \$~~74~~ 85 per month.
- (F) Six person MFBU - \$~~89~~ 103 per month.
- (G) Seven person MFBU - \$~~104~~ 120 per month.
- (H) Eight person MFBU - \$~~117~~ 135 per month.
- (I) Nine person MFBU - \$~~134~~ 155 per month.
- (J) Ten person or larger MFBU - \$~~147~~ 170 per month.

(b) If one of the items listed in 50509 (a) is shared with persons who are not included in the MFBU and who are not responsible for members of the MFBU, the income in kind value to the members of the MFBU shall be the lesser of:

- (1) Their share of the net market value or actual cost of the item.
- (2) The value listed in (a).

(c) Eligibility or share of cost determinations made on or after July 1, ~~1979~~ 1980 shall be based upon the provisions of this section.

50603. Maintenance Need -- Persons Living in the Home. (a) The maintenance need for the members of the MFBU living in the home shall be the following:

1 person, when all other family members are PA or Other PA recipients	\$.221.00	<u>259.00</u>
1 person in all other situations	\$.291.00	<u>336.00</u>
2 persons	\$.442.00	<u>517.00</u>
3 persons	\$.550.00	<u>633.00</u>
4 persons	\$.650.00	<u>758.00</u>
5 persons	\$.742.00	<u>858.00</u>
6 persons	\$.833.00	<u>967.00</u>
7 persons	\$.917.00	<u>1,058.00</u>
8 persons	\$.1,000.00	<u>1,150.00</u>
9 persons	\$.1,083.00	<u>1,250.00</u>
10 persons	\$.1,158.00	<u>1,342.00</u>
Each additional person	\$.8.00	<u>10.00</u>

(b) Eligibility or share of cost determinations made on or after July 1, 1979 1980 shall be based upon the provisions of this section.

50605. Maintenance Need -- Persons in Long-Term Care. (a) The maintenance need for a member of the MFBU in long-term care shall be either of the following:

- (1) Twenty-five dollars for personal and incidental needs, when the beneficiary will remain in long-term care for the entire calendar month.
- (2) The appropriate maintenance need determined in accordance with Section 50603, if the person will be in long-term care for only a portion of the month.

(b) An LTC patient shall retain an amount of income for upkeep of a home in addition to the amount specified for personal and incidental needs in (a) (1) if all of the following conditions are met:

- (1) The spouse or family of the LTC patient is not living in the home.
- (2) The home, whether rented or owned by the LTC patient, is actually being maintained for the return of the LTC patient.
- (3) There is a verified medical determination that the LTC patient will return home within six months of the date LTC patient status was established.

(c) The amount allowed for upkeep of the home, if the conditions specified in (b) are met, shall be:

(1) One hundred ~~twenty~~ thirty-nine dollars per month, if the applicant or beneficiary has been living alone in the home.

(2) ~~Eighty-one~~ Ninety-three dollars per month, if the home is shared with persons for whom the applicant or beneficiary has no legal responsibility for support.

(3) ~~Eighty-one~~ Ninety-three dollars per month for each spouse, if the beneficiary and spouse have been living together and both have become LTC patients and will return home within six months.

(d) The LTC patient shall also retain an amount of income to pay for the support of a disabled relative if all the following conditions are met:

(1) The disabled relative is not the LTC patient's:

(A) Spouse.

(B) Child, as defined in Section 50030.

(2) The LTC patient has contributed and will continue to contribute to the support of the disabled relative on a regular basis.

(e) The amount allowed for the support of a disabled relative, if the conditions specified in (d) are met, shall be the lesser of the actual amount contributed or:

(1) ~~Two~~ Three hundred ~~ninety-one~~ thirty-six dollars for the disabled relative who is living alone or with persons who have no legal responsibility for the support of the disabled relative, minus the disabled relative's net income.

(2) Two hundred ~~twenty-one~~ fifty-nine dollars for the disabled relative living with persons who have legal responsibility for the support of the disabled relative, minus the disabled relative's net income.

(f) Eligibility or share of cost determinations made on or after July 1, ~~1979~~ 1980 shall be based upon the provisions of this section.

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