

DEPARTMENT OF HEALTH SERVICES

714/744 P Street
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(916) 657-2941

December 1, 1997



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

Letter No.: 97-55

**NEW SUPPLEMENTAL SECURITY INCOME/STATE SUPPLEMENTARY PROGRAM
(SSI/SSP) PAYMENT STANDARDS FOR NOVEMBER AND DECEMBER 1997**

The purpose of this All County Welfare Directors Letter is to provide the counties with the new SSI/SSP Payment Standard chart for use during November 1, 1997 through December 31, 1997. These new income levels are the result of the expiration (September 30, 1997) of a legislative program that previously had reduced the SSP income levels.

Please note that most of the November/December changes increased the allowable income for couples. The single rate for Blind individuals has also increased in "Household of Another with In-Kind Room and Board." Also, please correct the eligibility determinations for singles and couples who were previously ineligible and are now eligible for Pickle and any other program. However, where deeming is concerned, the income changes may effect those folks adversely.

If you have any questions, please contact Ms. Sylvia Finberg of my staff at (916) 657-0080.

Sincerely,

ORIGINAL SIGNED BY

Frank S. Martucci, Chief
Medi-Cal Eligibility Branch

Enclosure

P I C K L E H A N D B O O K

SSI/SSP
SECTION 16--PAYMENT STANDARDS
NOVEMBER 1, 1997 TO DECEMBER 31, 1997

	Independent Living Arrangement			Household of Another with In-Kind Room and Board			Independent Living Arrangement Without Cooking Facilities (RMA) ^{1/}			Nonmedical Board and Care Licensed Facility/Household of Relative Without In-Kind Room & Board		
	Total	SSI (FBR)	SSP	Total	SSI (FBR)	SSP	Total	SSI (FBR)	SSP	Total	SSI (FBR)	SSP
INDIVIDUAL:												
Aged or Disabled	640.40	484.00	156.40	491.13	322.67	168.46	708.40	484.00	224.40	786.00	484.00	302.00
Blind	695.40	484.00	211.40	556.73	322.67	234.06				786.00	484.00	302.00
Disabled Minor*	547.40	484.00	63.40	389.50	322.67	66.83				786.00	484.00	302.00
NMOHC ^{2/}				631.67	322.67	309.00						
COUPLE:												
Both are:												
Aged or Disabled												
Per Couple	1,140.71	726.00	414.71	936.02	484.00	452.02	1,276.71	726.00	550.71	1,572.00	726.00	846.00
BLIND:												
Couple--Both are blind												
Per couple	1,324.18	726.00	598.18	1,119.49	484.00	635.49				1,572.00	726.00	846.00
BLIND/AGED OR DISABLED:												
Couple One is blind, the other is aged or disabled												
Per Couple	1,255.73	726.00	529.73	1,051.05	484.00	567.05				1,572.00	726.00	846.00
NMOHC ^{2/}												
Per Couple				1,302.33	484.00	818.33						
NONMEDICAL BOARD AND CARE						FEDERAL BENEFIT RATE (FBR)						
	<u>Minimum</u>		<u>Maximum</u>									
TOTAL:	\$ 786.00		\$ 786.00		INDIVIDUAL:	\$ 484.00						
Board and Room	\$ 336.00		\$ 336.00		AGED, BLIND, OR DISABLED:							
Care and Supervision	\$ 288.00 Min.		\$ 358.00 Max.		COUPLE:	\$ 726.00						
Personal and Incidental Needs	\$ 162.00 Max.		\$ 92.00 Min.		AGED, BLIND, OR DISABLED:							
* Independent living arrangement for a disabled minor means living in the home of his/her parents. Household of another is used if both the disabled minor and his/her parents live in the household of someone else, i.e., grandparents, etc.												
^{1/} RMA - Restaurant Meals Allowance												
^{2/} NMOHC ² - Nonmedical out-of-home care living in household of relative with In-Kind Room and Board.												