



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



**EDMUND G. BROWN JR.**  
*Governor*

October 7, 2013

TO: ALL COUNTY WELFARE DIRECTORS Letter No.: 13-19  
ALL COUNTY WELFARE ADMINISTRATIVE OFFICERS  
ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS  
ALL COUNTY HEALTH EXECUTIVES  
ALL COUNTY MENTAL HEALTH DIRECTORS  
ALL COUNTY QMB/SLMB/QI COORDINATORS

SUBJECT: 2013/2014 Family Member Base Allocation Amount  
(Reference: All County Welfare Directors Letter Number 12-20)

The purpose of this letter is to provide counties with the updated family member base allocation amount per Section 1924(d) of the Social Security Act. The family member base allocation amount is used to determine how much the long-term care (LTC) beneficiary may allocate to family members.

Effective July 1, 2013 through June 30, 2014, the family member base allocation amount [for use in Section IX, A.2 and B.2 of the Allocation/Special Deduction Worksheet B, Form MC 176W (05/08)] for a family member living with the community spouse of a beneficiary with LTC status is \$1,939. The family member base allocation amount for the July 1, 2013 through June 30, 2013 period was \$1,891.

If you have other questions regarding this letter, please call Mr. Joel Thomas at (916) 327-0409 or e-mail at [joel.thomas@dhcs.ca.gov](mailto:joel.thomas@dhcs.ca.gov).

**Original Signed By**

Tara Naisbitt, Chief  
Medi-Cal Eligibility Division

Attachment

## 2013 FPL Calculation Chart

				MONTHLY FPL VALUES							
Family Size	Annual FPL	MNL	% MNL	100%	120%	133%	135%	150%	185%	200%	250%
<b>1</b>	11490	600	63%	958	1149	1274	1293	1437	1772	1915	2394
<b>2</b>	15510	750	59%	1293	1551	1720	1745	1939	2392	2585	3232
<b>2 Adults</b>	15510	934	73%	1293	1551	1720	1745	1939	2392	2585	3232
<b>3</b>	19530	934	58%	1628	1953	2165	2198	2442	3011	3255	4069
<b>4</b>	23550	1100	57%	1963	2355	2611	2650	2944	3631	3925	4907
<b>5</b>	27570	1259	55%	2298	2757	3056	3102	3447	4251	4595	5744
<b>6</b>	31590	1417	54%	2633	3159	3502	3554	3949	4871	5265	6582
<b>7</b>	35610	1550	53%	2968	3561	3947	4007	4452	5490	5935	7419
<b>8</b>	39630	1692	52%	3303	3963	4393	4459	4954	6110	6605	8257
<b>9</b>	43650	1825	51%	3638	4365	4838	4911	5457	6730	7275	9094
<b>10</b>	47670	1959	50%	3973	4767	5284	5363	5959	7350	7945	9932
<b>Add</b>	4020	14	N/A	335	402	446	453	503	620	670	838

\$35: = for Resident in LTC Facilities

135% FPL: < Qualified Individual 1 Program

MMNL: = for Medically Needy Program

150%: = Target Low Income Program

100% FPL: = for Qualified Medicare Beneficiary (QMB) Program; and

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

=for Children Ages 6 Up to 19 Percent Program; and

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

=for FPL Program for Aged and Disabled; and

= for Pregnant Woman and Infants Up to Age 1 (disregard is in the 200% FPL)

=for Section 1931 Applicants and for Certain Recipient's

120% FPL: < for Specified Low Income Beneficiaries

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

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

\*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 FPL figures are effective the date of publication, which is January 24, 2013 for MSP applicants or recipients that are receiving RSDI Title II income, the new FPL figures are effective March 1, 2013.

Notes:

"=" means: eligibility if budget unit income is equal to less than income limit.

"<" means: eligibility if budget unit income is less than outcome limit.

Figures in above chart are rounded up to the next dollar where necessary.