

DEPARTMENT OF HEALTH SERVICES

4744 P STREET
CRAMENTO, CA 95814
916/445-1912



January 19, 1979

To: All County Welfare Directors

Letter No. 79-1

PAYMENTS TO SUPPLEMENTAL SECURITY INCOME (SSI)/STATE SUPPLEMENTARY PAYMENT
(SSP) RECIPIENTS IN LIEU OF FOOD STAMPS

Background

The Social Security Administration plans to implement Public Law 95-458, which provides a \$10 monthly federal payment in lieu of food stamps to certain California SSI/SSP recipients, effective February 1, 1979. Although the current SSI/SSP payment levels are not affected by this law, the additional \$10 payment will be included in the same check as the individual's SSI/SSP payment. This additional money is exempt for Medi-Cal eligibility purposes. All SSI/SSP cash recipients will receive the additional payment, except for:

1. Members of an SSI/SSP couple (i.e., both spouses receive a gold check);
2. Residents of medical institutions or "non-medical board and care" arrangements in which persons receive room, board, and care while residing in a nursing or convalescent home, a residential care home, the home of a relative, or other similar facility; and
3. Recipients of mandatory supplements (i.e., those cases in which the amount of the SSI/SSP benefit is higher than it otherwise would be because of a federal law that protects the income of people who received aid in December 1973).

Effect on Medi-Cal Eligibility

The implementation of Public Law 95-458 does not affect the special deduction for aged, blind or disabled medically needy individuals (see California Administrative Code (CAC), Title 22, Section 50555.4) nor the Title II disregard eligibility determination (see CAC, Title 22, Section 50564, and Medi-Cal Eligibility Procedural Manual, Article 10I). The reason for this is that the "\$10 in lieu of food stamps" payment is not considered in SSI/SSP eligibility or payment level determinations.

Effect on Medi-Cal Budget Computation

Since the check received from the Social Security Administration will include both the normal SSI/SSP payment and the additional \$10, the process of

computing the Medi-Cal share of cost for families which include an SSI/SSP recipient must be modified. Specifically, the \$10 must be deducted from the total check amount when determining the income of the Medi-Cal family members which is allocated to the SSI/SSP recipient (MC 176-W, Part III).

Revised Instructions for MC 176-W

Effective February 1, 1979, whenever Part III of the MC 176-W is completed add the following procedures:

1. Determine whether the SSI/SSP family member is:
 - a. Part of an "eligible couple" SSI/SSP case; or
 - b. In a non-medical board-and-care living arrangement; or
 - c. In long-term care status; or
 - d. Receiving a mandatory state supplement.
2. If the SSI/SSP member is any of the above, complete the MC 176-W in the normal manner.
3. a. If the SSI/SSP member is not any of 1. a.-d., make a special entry beneath the preprinted wording on line 2 of Part III. The entry is, "\$_____ - \$10 in lieu of F.S.".

The amount that goes in the blank is the total amount of the SSI/SSP recipient's gold check.

 - b. The dollar amount to enter in the block portion of line 2 is the total SSI/SSP check amount, less the \$10 paid in lieu of food stamps.
 - c. Complete the rest of Part III in the regular manner.

See the enclosed sample MC 176-W.

SDX Identification of SSI/SSP Recipients NOT Receiving the Additional \$10 Payment

The Department is in the process of placing an indicator on the SDX which will designate those SSI/SSP recipients who receive the \$10 "in lieu of food stamps" payment. Until this indicator is printed on the SDX file provided to your county, the recipients who do not receive the additional \$10 can be identified as follows:

1. Eligible couples can be identified because both spouses' names will be listed on the SDX provided to your county.
2. Residents of medical institutions or persons with "non-medical board and care" arrangements can be identified from the living arrangement

codes on the SDX as follows:

a. Long-Term Care

SSI living arrangement code D (tape position 279; report heading LIVCDE) and SSP living arrangement code Z (tape position 244; report heading STLIVCDE).

b. Board and Care

SSI living arrangement code A or B (tape position 279; report heading LIVCDE) and SSP living arrangement code B (tape position 244; report heading STLIVCDE).

3. Persons in receipt of mandatory state supplements cannot be identified through SDX data. Therefore, until the \$10 payment indicator is available, assume that all SSI/SSP recipients, except those described in 1. and 2. of this paragraph, receive the additional payment of \$10. This assumption will not disadvantage the Medi-Cal family members.

In the event the Social Security Administration is unable to implement Public Law 95-458 in February 1979 by adding the food stamp payment into the SSI/SSP grant check, you will be notified to disregard these instructions until a later date.

The revised procedures for completing the MC 176-W will be incorporated into the Medi-Cal Procedures Manual.

If you have any questions regarding the affects of Public Law 95-458 on the Medi-Cal program, please contact your Medi-Cal field representative at 916/445-1912.

Sincerely,

Original signed by

Doris Z. Soderberg, Chief
Eligibility Branch
Medical Care Standards Division

Enclosure

cc: Medi-Cal County Liaisons
Medi-Cal Field Representatives

Expiration Date: June 29, 1979

ALLOCATION/SPECIAL DEDUCTION WORKSHEET

Month _____ No. in MFBU _____

Case Name _____

Case Number _____

I. PERSONS EXCLUDED FROM THE MFBU A. Excluded Child(ren): No. _____ <table style="width:100%;"> <tr> <td style="width:80%;">1. Maintenance need for MFBU plus excluded child(ren)</td> <td style="width:20%; text-align: right;">\$ _____</td> </tr> <tr> <td>2. Maintenance need for MFBU</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>3. Excluded child(ren)'s share of maintenance need (Line 1 minus line 2)</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>4. Net nonexempt income of excluded child(ren).</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>5. Allocation to excluded child(ren) (Line 3 minus line 4) (If less than 0, enter 0)</td> <td style="text-align: right;">\$ _____</td> </tr> </table> <p>Enter above amount on MC 176-M, column C, line 6, if only child(ren) are excluded. If parent(s) are also excluded, complete Part B and Part C below.</p>		1. Maintenance need for MFBU plus excluded child(ren)	\$ _____	2. Maintenance need for MFBU	\$ _____	3. Excluded child(ren)'s share of maintenance need (Line 1 minus line 2)	\$ _____	4. Net nonexempt income of excluded child(ren).	\$ _____	5. Allocation to excluded child(ren) (Line 3 minus line 4) (If less than 0, enter 0)	\$ _____	III. SSI/SSP RECIPIENT(S) IN FAMILY - INCOME AVAILABLE/ALLOCATED <table style="width:100%;"> <tr> <td style="width:60%;">1. SSI/SSP appropriate payment level</td> <td style="width:20%; text-align: right;">\$ 252.60</td> <td style="width:20%;"></td> </tr> <tr> <td>2. Actual SSI/SSP grant received \$130-\$10 in lieu of FS</td> <td style="text-align: right;">\$ 120.00</td> <td></td> </tr> <tr> <td>3. Net nonexempt income used to determine grant (Line 1 minus line 2)</td> <td></td> <td style="text-align: right;">\$ 132.60</td> </tr> <tr> <td>4. Gross unearned income of SSI/SSP recipient (other than grant)</td> <td style="text-align: right;">\$ 30.00</td> <td></td> </tr> <tr> <td>5. SSI/SSP unearned income deduct. and exemptions (incl. \$20)</td> <td style="text-align: right;">\$ 20.00</td> <td></td> </tr> <tr> <td>6. Net nonexempt unearned income (Line 4 minus line 5)</td> <td style="text-align: right;">\$ 10.00</td> <td></td> </tr> <tr> <td>7. Gross earned income of SSI/SSP recipient</td> <td style="text-align: right;">\$ -0-</td> <td></td> </tr> <tr> <td>8. SSI/SSP earned income deductions and exemptions (incl. 65 & 1/2)</td> <td style="text-align: right;">\$ -0-</td> <td></td> </tr> <tr> <td>9. Net nonexempt earned income (Line 7 minus line 8)</td> <td style="text-align: right;">\$ -0-</td> <td></td> </tr> <tr> <td>10. Total net nonexempt income (Add lines 6 and 9)</td> <td></td> <td style="text-align: right;">\$ 10.00</td> </tr> <tr> <td colspan="2">11. If line 10 is greater than line 3, the difference is income available to the MFBU and is entered here and on MC 176-M, column A or B, line 3 as "SSI/SSP recipient income available".</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td colspan="2">12. If line 10 is less than line 3, the difference is the allocation to the SSI/SSP recipient and is entered here and on MC 176-M, column C, line 2.</td> <td style="text-align: right;">\$ 122.60</td> </tr> </table>		1. SSI/SSP appropriate payment level	\$ 252.60		2. Actual SSI/SSP grant received \$130-\$10 in lieu of FS	\$ 120.00		3. Net nonexempt income used to determine grant (Line 1 minus line 2)		\$ 132.60	4. Gross unearned income of SSI/SSP recipient (other than grant)	\$ 30.00		5. SSI/SSP unearned income deduct. and exemptions (incl. \$20)	\$ 20.00		6. Net nonexempt unearned income (Line 4 minus line 5)	\$ 10.00		7. Gross earned income of SSI/SSP recipient	\$ -0-		8. SSI/SSP earned income deductions and exemptions (incl. 65 & 1/2)	\$ -0-		9. Net nonexempt earned income (Line 7 minus line 8)	\$ -0-		10. Total net nonexempt income (Add lines 6 and 9)		\$ 10.00	11. If line 10 is greater than line 3, the difference is income available to the MFBU and is entered here and on MC 176-M, column A or B, line 3 as "SSI/SSP recipient income available".		\$ _____	12. If line 10 is less than line 3, the difference is the allocation to the SSI/SSP recipient and is entered here and on MC 176-M, column C, line 2.		\$ 122.60
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B. Excluded Parent(s) or Spouse <table style="width:100%;"> <tr> <td style="width:80%;">1. Maintenance need for MFBU plus excluded parent(s) or Spouse</td> <td style="width:20%; text-align: right;">\$ _____</td> </tr> <tr> <td>2. Maintenance need for MFBU</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>3. Allocation to excluded parent(s) or spouse (Line 1 minus line 2)</td> <td style="text-align: right;">\$ _____</td> </tr> </table> <p>Enter above amount on MC 176-M, column C, line 6, if only parent(s) or spouse are excluded. If both parent(s) or spouse and children are excluded, complete Part C below.</p>		1. Maintenance need for MFBU plus excluded parent(s) or Spouse	\$ _____	2. Maintenance need for MFBU	\$ _____	3. Allocation to excluded parent(s) or spouse (Line 1 minus line 2)	\$ _____	IV. SPECIAL DEDUCTION FOR AGED, BLIND OR DISABLED MN PERSONS IN MFBU <table style="width:100%;"> <tr> <td style="width:60%;">1. Appropriate SSI/SSP payment level, based on living situation for aged, blind or disabled MN persons in MFBU</td> <td style="width:20%; text-align: right;">\$ _____</td> <td style="width:20%;"></td> </tr> <tr> <td>2. Maintenance need for MFBU without the aged, blind or disabled MN persons included. (If only one person remains, use maintenance need for 1 person when all family members are P.A.)</td> <td></td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>3. Add lines 1 and 2</td> <td></td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>4. Maintenance need for entire MFBU (including aged, blind or disabled MN persons)</td> <td></td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>5. Special deduction (Line 3 minus line 4)</td> <td></td> <td style="text-align: right;">\$ _____</td> </tr> </table> <p>Enter above amount on MC 176-M, column C, line 7.</p>		1. Appropriate SSI/SSP payment level, based on living situation for aged, blind or disabled MN persons in MFBU	\$ _____		2. Maintenance need for MFBU without the aged, blind or disabled MN persons included. (If only one person remains, use maintenance need for 1 person when all family members are P.A.)		\$ _____	3. Add lines 1 and 2		\$ _____	4. Maintenance need for entire MFBU (including aged, blind or disabled MN persons)		\$ _____	5. Special deduction (Line 3 minus line 4)		\$ _____																									
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Example:
A disabled child receives a gold check from SSA in 2/79 in the amount of \$130.00. The child has personal unearned income of \$30.00.

Eligibility Worker Signature _____

Date _____