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SACRAMENTO, CA 94234-7320

DEPARTMENT OF HEALTH SERVICES

January 24, 1994

1994

TO: All County Welfare Directors All County Administrative Officers All County Medi-Cal Program Specialists/Liaisons All County Pickle Coordinators Letter No.: 94-09

SSI/SSP PAYMENT STANDARDS CHART CORRECTION, DECEMBER 21, 1993

REF.: All County Welfare Directors Letter (ACWDL) No. 93-85

The Department of Social Services has corrected the SSI/SSP Payment Standards Chart which the Department of Health Services distributed in ACWDL No. 93-85 as "Corrected--11/30/93". Please change your SSI/SSP Payment Standards Chart for January 1, 1994 as follows:

- 1. The "Total" for "Aged or Disabled" couple in "Household of Another" was \$919.16; however, it should be \$919.82.
- 2. The "Total" for "Blind" couple in "Household of Another" was \$1,106.95; however, it should be \$1,106.61.
- 3. The "Total" for Blind/Aged or Disabled" couple in "Household of Another" was \$1036.90; however, it should be \$1,036.56.

A copy of the SSI/SSP Payment Standards Chart is included in this letter.

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

PICKLE HANDBOOK

	Independent Living Arrangement			Household of Another			Independent Living Arrangment Without Cooking Facilities			Nonmedical Board and Care		
		<u></u>					withou	t Cooking P	achities		<u></u>	
	Total	SSI (FBR)	SSP	Total	SSI	SSP	Total	SSI	SSP	Total	SSI	SSP
····		(FBR)			(FBR)			(FBR)			(FBR)	
NDIVIDUAL:												
Aged or Disabled	6 03.40	446.00	15 7.40	47 6.77	29 7.34	179.43	671. 40	446.00	225. 40	748.00	446.00	302.0
Blind	670.40	446.00	224.40	5 43.91	297.34	246.57				748.00	446.00	302.0
Disabled Minor	50 9.40	446.00	6 3.40	364.17	297.34	6 6.83				748.00	446.00	302.0
имонс				60 6.34	29 7.34	30 9.00						
COUPLE: Both are:												
Aged or Disabled												
Per couple 1	.109.22	6 69.00	440.22	91 9.82	446.00 <i>*</i>	473.16	1.245.22	66 9.00	576.22	1,477.00	6 69.00	80 8.0
······		<u></u>										
BUND:												
Couple-Both are blind												
Per couple 1	.297.01	6 69.00	628.01	1,106.61	446.00	6 60.95				1,477.00	66 9.00	808.0
BLIND/AGED												
DR DISABLED												
Couple-One is												
blind, the other is												
aged or disabled												
Per couple 1	,226.95	6 69.00	557.95	1,036.56	446.00	59 0.90				1,477.00	66 9.00	808.0
NMOHC												
Per Couple		.		1,264.33	446.00	818.33						
Note: NMOHC = Nonme	idical out of	home care, r	ecipients excl	uded from redu	iction.				_			
NONMEDICAL BOARD AND								FEDERAL BENEFIT				
CARE							RATE (FBR					
		Minimum		Maximum								
TOTAL		\$748.00		\$748.00			INDIVIDUA	r.				
Soard and Room		319.00		319.00			Aged, Blind	1, or			\$448.00	
Care and Supervision		275.00	Min.	341.00	Max.		Disabled					
Personal and Incidental	Needs	154.00	Max.	88.00	Min.		COUPLE				\$669.00	
							Aged, Blin	1. or				

SSI/SSP SECTION 16--PAYMENT STANDARDS

mischer parents live in the household of someone else, i.e., grundparents, etc.