State of California

Department of Social Services

Auto ID No.:

Source :

Issued by :

Reg Cite : 89-110.2, 44-315.311

# Noa Msg Doc No.: M89-110B Page 1 of 1

Action : Deny

Issue: Aid Payment Levels

Title: Exemptions to MAP Reductions

Use Form No. : NA 290

Original Date : 03-01-96

Revision Date : 01-01-98

## MESSAGE:

The County has denied your request for an exemption from the lower cash aid level.

## Here's why:

Your family does not meet any of the exemption rules. To meet the rules and be exempt, either:

The only one in your household getting cash aid is a child living with an unaided, non-parent caretaker relative.

 OR

Each parent or aided caretaker relative in the home is getting one of the following:

* Supplemental Security Income, State Supplementary Program (SSI/SSP), or
* In-Home Supportive Services (IHSS), or
* Temporary Workers’ Compensation (TWC), or
* Temporary Disability Indemnity (TDI), or
* State Disability Insurance (SDI).

You may get another notice about your regular cash aid.

## INSTRUCTIONS: Use this message to deny a request for higher MAP when the AU does not meet one of the valid exemptions.

This message replaces M89-110B dated 05-01-96.

file: pkian/MSERIES/ex.89110b