

DEPARTMENT OF SOCIAL SERVICES
744 P Street, Sacramento, CA 95814



July 23, 1982

ALL-COUNTY INFORMATION NOTICE NO. I-79-89

TO: ALL COUNTY WELFARE DIRECTORS

SUBJECT: EFFECTS OF SSI/SSP COST-OF-LIVING INCREASES ON IN-HOME
SUPPORTIVE SERVICES AND OUT-OF-HOME CARE SERVICES FOR
ADULTS

REFERENCE:

As part of the Budget Act of 1982, the California State Legislature included a 2.8 percent (2.8%) cost-of-living adjustment (COLA) to the SSI/SSP benefits of the aged, blind and disabled. Since SSI/SSP benefits are used to determine IHSS income eligibility, the information is provided below.

A. The benefits are effective July 1, 1982. The IHSS service maximums and meal allowances are not changed and remain the same as those in effect since July 1, 1981. The following benefit levels shall be used in determining the IHSS share of cost for those recipients/applicants who are income eligible. Any share of cost adjustments for individual IHSS recipients shall be made retroactive to July 1, 1982. Please note that recipients of SSI/SSP will not immediately receive a change in their warrants; there will be a lump sum adjustment warrant(s) either in September or October 1982.

I. IHSS SERVICE MAXIMUMS (MPP 30-465)

- a. Severely Impaired - \$838.00
- b. Non-Severely Impaired - \$581.00

II. RESTAURANT MEAL ALLOWANCE (MPP 30-457.34)

- a. Individual - \$47.00
- b. Couple - \$94.00

III. SSI/SSP PAYMENT STANDARDS

a. BENEFIT LEVEL FOR INDIVIDUALS

INDIVIDUALS	OWN HOME	HOUSEHOLD OF ANOTHER*
Aged or Disabled Blind	\$451.00	\$356.24
Blind	506.00	411.24
Disabled Minor	358.00	263.24

*Any recipient living in the household of another and receiving free room and board is considered to be receiving in-kind income. Federal regulations reduce the benefit level for these individuals by one-third (1/3) of the federal SSI benefit to allow for in-kind income. This reduction equals \$94.76 for an individual and \$142.13 for a couple.

b. BENEFIT LEVEL FOR COUPLES

COUPLES	OWN HOME	HOUSEHOLD OF ANOTHER
Aged or Disabled Blind	\$838.00	\$695.87
Blind	985.00	842.87
Blind/Ages or Disabled	929.00	786.87

B. Consistent with the SSI/SSP benefit level adjustments, the following changes shall be made to the allowances shown on Forms SOC 294A (IHSS Income Eligibility-Adult) and SOC 294C (IHSS Income Eligibility-Child). See attachments for illustration.

I. SOC 294A

- a. Change allowances in Column B, row 2a to \$142.10.
- b. Change allowances in Column B, row 6 to \$142.10.
- c. Change allowances in Column B, row 19 to \$142.10.

II. SOC 294C

- a. Change allowances in Column A, row 2a to \$142.10.
- b. Change allowances in Column A, row 6b to (1) \$568.60 and (2) \$852.80.
- c. Change allowances in Column A, rows 7b and Si to (1) \$284.30 and (2) \$426.40.

C. Nonmedical Board and Care rates are increased as follows:

I. RESIDENT OF NONMEDICAL "OUT-OF-HOME CARE" FACILITY

NONMEDICAL "OUT-OF-HOME CARE" FACILITY	MINIMUM	MAXIMUM
Board and Room	\$218.00	\$218.00
Care and Supervision	107.00	233.00
Personal and Incidental Needs of Recipient	105.00	59.00
Total Individual	\$510.00	\$510.00
Total Couple	\$1020.00	\$1020.00

II. RESIDENT OF NONMEDICAL "OUT-OF-HOME CARE" DETERMINED TO BE HOUSEHOLD OF ANOTHER (MPP 46-325.31)

- a. Total Individual \$415.24
- b. Total Couple 877.87

If you have any questions regarding the above information, please contact your Adult Services Program Operations Consultant at (916) 445-8724.

Sincerely,



CLAUDE FINN, Deputy Director
Adult and Family Services Division

Attachment