



CDSS

WILL LIGHTBOURNE  
DIRECTOR

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY  
**DEPARTMENT OF SOCIAL SERVICES**  
744 P Street • Sacramento, CA 95814 • [www.cdss.ca.gov](http://www.cdss.ca.gov)



EDMUND G. BROWN JR.  
GOVERNOR

November 27, 2018

ALL COUNTY INFORMATION NOTICE NO. I-81-18

TO: ALL COUNTY WELFARE DIRECTORS  
ALL COUNTY CASH ASSISTANCE PROGRAM FOR  
IMMIGRANTS MANAGERS

SUBJECT: NEW PAYMENT STANDARDS FOR THE CASH ASSISTANCE  
PROGRAM FOR IMMIGRANTS (CAPI) EFFECTIVE JANUARY 2019

REFERENCE: [CODE OF FEDERAL REGULATIONS §416.1166a](#);  
[WELFARE AND INSTITUTIONS CODE \(WIC\) §12201\(g\)\(1\)](#);  
[WIC §18900.5](#), [WIC §18941](#);  
[ASSEMBLY BILL \(AB\) 1811 \(CHAPTER 35, STATUTES OF 2018\)](#);  
[MANUAL OF POLICIES AND PROCEDURES §49-005\(p\)\(1\)](#);  
[ALL-COUNTY LETTER NO. 18-90](#).

This All County Information Notice (ACIN) transmits new payment standards for the Cash Assistance Program for Immigrants (CAPI), effective January, 2019. This change is the result of a 2.8% cost of living allowance (COLA) for recipients of Supplemental Security Income (SSI), as recently enacted by the federal Social Security Administration (SSA). The 2019 CAPI payment standard charts reflecting the COLA increase are attached to this ACIN (see below). This ACIN also provides information on a further CAPI payment standard adjustment not yet reflected in the attached payment standards charts, but which will take effect mid-2019 due to the impending reversal of the CalFresh eligibility policy known as “cash out.”

### **Background**

As required by [Welfare and Institutions Code \(WIC\) §18941\(a\)](#), CAPI payment standards are based on Supplemental Security Income/State Supplementary Payment (SSI/SSP) payment standards, less \$10.00 for an individual and \$20.00 for a couple per month. This difference between the SSI/SSP and CAPI payment standards is attributable to the CalFresh eligibility policy known as “cash out,” under which

SSI/SSP recipients have been ineligible for CalFresh benefits. Unlike SSI/SSP recipients, most CAPI recipients have always been eligible for CalFresh and, as a result, have received a CAPI payment \$10 less per individual and \$20 less per couple per month.

### **Effects of CalFresh “Cash-Out” Reversal on CAPI**

[Assembly Bill \(AB\) 1811](#), the fiscal year 2018-19 Human Services Omnibus Trailer Bill (codified as [WIC §18900.5](#)), reverses the CalFresh cash-out policy for SSI/SSP recipients. Effective June 1, 2019 (or an identified alternate implementation date), individuals receiving SSI/SSP will become eligible for CalFresh, provided all other eligibility criteria are satisfied. For parity with SSI/SSP recipients, effective on the implementation date, CAPI recipients will receive a monthly grant increase of \$10 per individual or \$20 per couple. This increase will bring the amount of SSI/SSP and CAPI grants into alignment. When the cash-out reversal takes effect, the California Department of Social Services (CDSS) will release new CAPI payment standards. For more information on the reversal of cash-out and the CAPI grant augmentation, please refer to [ACL No. 18-90](#), issued on July 31, 2018.

### **Revised CAPI Payment Standards**

From January 1, 2019 until such date as the CalFresh cash-out reversal is implemented, the CAPI payment standards described below will apply.

Although there will be no increase in the state-funded SSP amount in 2019, there will be an increase in the federally-funded SSI payment due to a 2.8% cost of living adjustment (COLA). Accordingly, both SSI/SSP payment standards and CAPI payment standards will increase for 2019. The attached tables show the new 2019 CAPI payment standards along with comparisons to the corresponding 2019 SSI/SSP payment standards.

The federal SSI COLA also affects the following values for the entire calendar year that impact CAPI eligibility and benefit amounts effective on January 1, 2019:

### **Presumed Maximum Value (PMV) for In-Kind Support and Maintenance**

- To compute this value, start with the federal SSI amount (\$771.00 for an individual and \$1,157.00 for a couple in 2019), then divide by 3 and add \$20.00. [Manual of Policies and Procedures §49-005\(p\)\(1\)](#) This changes the PMV from \$270.00 to \$277.00 for an individual and from \$395.00 to \$405.67 for a couple.

### **Allowance for Ineligible Children in Deeming Situations**

- To compute this allowance, determine the difference between the federal SSI benefit amount for a couple and the federal SSI benefit amount for an individual (for 2019, subtract \$771 from \$1,157). This computation changes the allowance from \$375.00 to \$386.00.
- This allowance is entered, when appropriate, on the Income Eligibility Worksheet ([SOC 452](#)), line B.2.a, when calculating the CAPI benefit amount for a case involving deemed income from an ineligible spouse

### **Sponsor's Allocation in Alien Deeming Situations**

- This allocation equals the federal SSI rate for an individual. [Code of Federal Regulations §416.1166a](#) The federal SSI COLA changes the allocation from \$735.00 to \$771.00.
- This allowance is entered, when appropriate, on the Sponsor to Alien Deeming Worksheet ([SOC 454](#)), line 2, when calculating the CAPI benefit amount for a case involving deemed income from a sponsor.

### **Allowance for Parent(s) In Parent-to-Child Deeming Situations**

- The allowance for one parent is equal to the federal SSI rate for individuals. The allowance for two parents is equal to the federal SSI rate for couples. The federal SSI COLA changes the allowance from \$750.00 to \$771.00 for one parent and from \$1,125.00 to \$1,157.00 for two parents.
- This allowance is entered on the Income Eligibility-Child worksheet ([SOC 452A](#)), line A.16, when calculating the CAPI benefit amount for a case involving deemed income from an ineligible parent(s).

Should you have questions regarding the information contained in this letter, please contact Steve Koehler or Aron Smith at California Department of Social Services Adult Programs Division, Cash Assistance and Special Projects Unit at (916) 651-5350 or email to: [steven.koehler@dss.ca.gov](mailto:steven.koehler@dss.ca.gov) or [aron.smith@dss.ca.gov](mailto:aron.smith@dss.ca.gov).

Sincerely,

### ***Original Document Signed By:***

DEBBI THOMSON  
Deputy Director  
Adult Programs Division

## CAPI Payment Standards

Effective January 1, 2019

RATES FOR INDIVIDUALS AND COUPLES WHO LIVE INDEPENDENTLY OR IN HOUSEHOLDS WITH IN-KIND ROOM AND BOARD (REDUCED NEEDS).<sup>1</sup>

| <b>Individual - Independent Living</b>      | <b>Total<br/>CAPI</b> |                              |  | <b>Total<br/>SSI/SSP</b> |                          |
|---|-----------------------|------------------------------|--|--------------------------|--------------------------|
| AGED or DISABLED                            | <b>\$921.72</b>       |                              |  | \$931.72                 |                          |
| AGED or DISABLED without cooking facilities | <b>\$1,008.04</b>     |                              |  | \$1,018.04               |                          |
| BLIND                                       | <b>\$978.23</b>       |                              |  | \$988.23                 |                          |
| DISABLED MINOR                              | <b>\$826.15</b>       |                              |  | \$836.15                 |                          |
| <hr/>                                       |                       |                              |  |                          |                          |
| <b>Individual – Reduced Needs</b>           | <b>Total<br/>CAPI</b> |                              |  | <b>Total<br/>SSI/SSP</b> |                          |
| AGED or DISABLED                            | <b>\$668.24</b>       |                              |  | \$678.24                 |                          |
| BLIND                                       | <b>\$724.76</b>       |                              |  | \$734.76                 |                          |
| DISABLED MINOR – (Household of another)     | <b>\$572.67</b>       |                              |  | \$582.67                 |                          |
| <hr/>                                       |                       |                              |  |                          |                          |
| <b>Couple - Independent Living</b>          | <b>Total<br/>CAPI</b> | <b>One CAPI,<br/>One SSI</b> |  |                          | <b>Total<br/>SSI/SSP</b> |
| AGED or DISABLED                            | <b>\$1,544.14</b>     | \$1,554.14                   |  |                          | \$1,564.14               |
| AGED or DISABLED without cooking facilities | <b>\$1,716.77</b>     | \$1,726.77                   |  |                          | \$1,736.77               |
| BLIND                                       | <b>\$1,695.19</b>     | \$1,705.19                   |  |                          | \$1,715.19               |
| BLIND/AGED or DISABLED                      | <b>\$1,637.65</b>     | \$1,647.65                   |  |                          | \$1,657.65               |
| <hr/>                                       |                       |                              |  |                          |                          |
| <b>Couple – Reduced Needs</b>               | <b>Total<br/>CAPI</b> | <b>One CAPI,<br/>One SSI</b> |  |                          | <b>Total<br/>SSI/SSP</b> |
| AGED or DISABLED                            | <b>\$1,163.75</b>     | \$1,173.75                   |  |                          | \$1,183.75               |
| BLIND                                       | <b>\$1,314.80</b>     | \$1,324.80                   |  |                          | \$1,334.80               |
| BLIND/AGED or DISABLED                      | <b>\$1,257.26</b>     | \$1,267.26                   |  |                          | \$1,277.26               |
| <hr/>                                       |                       |                              |  |                          |                          |
| <b>Title XIX Medical Facility</b>           | <b>Total<br/>CAPI</b> |                              |  | <b>Total<br/>SSI/SSP</b> |                          |
| Per Individual                              | <b>\$41.00</b>        |                              |  | \$51.00                  |                          |
| Per Couple                                  | <b>\$82.00</b>        |                              |  | \$102.00                 |                          |

NOTE: Based on W&IC section 18941, CAPI benefits are equivalent to those of the SSI/SSP program, except that the monthly payment is reduced by \$10 per individual and \$20 per couple since CAPI recipients are not subject to the SSI cash-out policy.

<sup>1</sup> These rates reflect a SSI COLA of 2.8%.

**CAPI Payment Standards**

Effective January 1, 2019

**RATES FOR INDIVIDUALS AND COUPLES WHO RECEIVE  
NON-MEDICAL OUT-OF-HOME CARE.<sup>2</sup>**

| <b>Individual – Non-Medical Out-of-Home Care<br/>With In-Kind Room &amp; Board</b> | <b>Total<br/>CAPI</b> | <b>Total<br/>SSI/SSP</b> |
|--|-----------------------|--------------------------|
| AGED or DISABLED   | <b>\$922.23</b>       | \$932.23                 |
| BLIND  | <b>\$922.23</b>       | \$932.23                 |
| DISABLED MINOR - living with non-parent  | <b>\$922.23</b>       | \$932.23                 |

| <b>Individual – Non-Medical Out-of-Home Care<br/>Licensed Facility or Without In-Kind Room &amp;<br/>Board</b> | <b>Total<br/>CAPI</b> | <b>Total<br/>SSI/SSP</b> |
|--|-----------------------|--------------------------|
| AGED or DISABLED   | <b>\$1,184.37</b>     | \$1,194.37               |
| BLIND  | <b>\$1,184.37</b>     | \$1,194.37               |
| DISABLED MINOR - living with non-parent  | <b>\$1,184.37</b>     | \$1,194.37               |

| <b>Couple – Non-Medical Out-of-Home Care<br/>With In-Kind Room &amp; Board</b> | <b>Total<br/>CAPI</b> | <b>One CAPI,<br/>One SSI</b> | <b>Total<br/>SSI/SSP</b> |
|--|-----------------------|------------------------------|--------------------------|
| AGED or DISABLED   | <b>\$1,825.86</b>     | \$1,835.86                   | \$1,845.86               |
| BLIND  | <b>\$1,825.86</b>     | \$1,835.86                   | \$1,845.86               |
| BLIND/AGED or DISABLED   | <b>\$1,825.86</b>     | \$1,835.86                   | \$1,845.86               |

| <b>Couple – Non-Medical Out-of-Home Care<br/>Licensed Facility or Without In-Kind Room &amp;<br/>Board</b> | <b>Total<br/>CAPI</b> | <b>One CAPI,<br/>One SSI</b> | <b>Total<br/>SSI/SSP</b> |
|--|-----------------------|------------------------------|--------------------------|
| AGED or DISABLED   | <b>\$2,368.74</b>     | \$2,378.74                   | \$2,388.74               |
| BLIND  | <b>\$2,368.74</b>     | \$2,378.74                   | \$2,388.74               |
| BLIND/AGED or DISABLED   | <b>\$2,368.74</b>     | \$2,378.74                   | \$2,388.74               |

NOTE: Based on W&IC section 18941, CAPI benefits are equivalent to those of the SSI/SSP program, except that the monthly payment is reduced by \$10 per individual and \$20 per couple since CAPI recipients are not subject to the SSI cash-out policy.

<sup>2</sup> These rates reflect a SSI COLA of 2.8%.