ASSISTANCE PAYMENT CHART – July 2009 – Changes to Child Care & OWF Initial Eligibility Test Standards

OWF Information				Covered Families & Children Medicaid				Child Care		Food Assistance			
AG Size	Initial Eligibility Test Standard	CFC/OWF Allocation Allowance Standard	Cash Payment Standard LIF Limit	HF 90% FPL Need Standard	150% FPL Healthy Start Standard	200% FPL Healthy Start Standard	185% FPL Transitional Standard for 2nd 6 months	200% FPL	150% FPL	AG Size	Gross Test 130% of FPL	Net Test 100% of FPL	Issuance Maximum (Thrifty Food Plan)
	07/09	10/97	01/09	1/09	1/09	1/09	1/09	**7/09**	**7/09**		10/08	10/08	04/09
1	**452**	583	259	813	1354	1805	1670	N/A	N/A	1	1127	867	200
2	**608**	802	355	1093	1822	2429	2247	**2429**	**1822**	2	1517	1167	367
3	**763**	980	434	1374	2289	3052	2823	**3052**	**2289**	3	1907	1467	526
4	**919**	1210	536	1654	2757	3675	3400	**3675**	**2757**	4	2297	1767	668
5	**1075**	1417	627	1935	3224	4299	3976	**4299**	**3224**	5	2687	2067	793
6	**1231**	1578	698	2215	3692	4922	4553	**4922**	**3692**	6	3077	2367	952
7	**1387**	1761	780	2496	4159	5545	5130	**5545**	**4159**	7	3467	2667	1052
8	**1543**	1954	864	2776	4627	6169	5706	**6169**	**4627**	8	3857	2967	1202
9	**1698**	2149	951	3057	5094	6792	6283	**6792**	**5094**	9	4247	3267	1352
10	**1854**	2345	1037	3337	5562	7415	6859	**7415**	**5562**	10	4637	3567	1502

Earned Income Deduction is $250 & ½ Remainder (7/96)

Dependent Care Maximum for each dependent = NO LIMIT

The 100% Need Standard is also referred to as the Allocation Allowance Standard.

150% Healthy Start Standard is for pregnant women AND children from birth through age 18.

200% Healthy Start Standard is for pregnant women AND children from birth through age 18. (SCHIP)

Dependent Care Maximum
- $200 full time per child under 2 years
- $175 full time per child 2 & over or incapacitated adult
- $120 part time per child or incapacitate adult

Child Care (07/08)

AG Size	200% FPL
2	2334
3	2934
4	3534
5	4134
6	4734
7	5334
8	5934
9	65342
10	7134

Earned Income Deduction = 20%
Standard Deduction:
- $144 for an AG size of 1-3 persons
- $147 for an AG size of 4 persons
- $172 for an AG size of 5 persons
- $197 for an AG size of 6 or more

Dependent Care Maximum for each dependent = NO LIMIT
Standard Utility Allowance = $586
Limited Utility Allowance = $287
Single Utility Allowance = $64
Single Telephone Allowance = $31
Maximum Excess Shelter Deduction for non elderly or non disabled = $446
Homeless Shelter Deduction = $143

Disability Assistance Information

AG Size	DA Payment	Parental Responsibility Table 1	Parental Responsibility Table 2	Other DA Information
1	115	755	1226	Pregnancy Allowance eliminated 7/1/98.
2	159	1038	1604	
3	193	1267	1981	Dependent Care Maximum - same as OWF.
4	225	1567	2359	
5	251	1830	2735	
6	281	2039	2114	Parental Responsibility = 50% reduction in need for 18-22 year olds if parent's income is between Table 1 and 2.
7	312	2281	3184	
8	361	2531	3255	
9	394	2782	3326	
10	426	3032	3381	

PRC Program

February 2009

HH Size	Monthly Income 165%FPL
1	1490
2	2004
3	2518
4	3032
5	3547
6	4061
7	4575
8	5089
9	5604
10	6118

Medicaid Information

Table: TMEP

Income Disregard = $20
Earned Income Disregard = $65 & ½ of the remainder

Need Standards	Individual	Couple
Own HH (1/09)	589	1011
HH of Another (1/09)	393	674
QMB (3/09)	903	1215
SLMB (3/09)	1083	1457
QI-1 (3/09)	1219	1640
QWDI (3/09)	1805	2429
MBIWD1 (1/09)	1354	NA
MBIWD2 (1/09)	2257	NA

Medicare Premium	
2009 Amount	96.40
2008 Amount	96.40

Deeming Amounts	
Ineligible Spouse	163
Ineligible Parent	325
Ineligible Parents	488
Ineligible Child	163
Work Expense Deduction for Ineligible Spouse	65

SSI Payment (1/09)	
Single	674
Couple	1011