

DEPARTMENT OF SOCIAL SERVICES



ERRATA

TO: ALL-COUNTY WELFARE DIRECTORS

SUBJECT: JANUARY 1997 SOCIAL SECURITY TITLE II (RETIREMENT,
SURVIVOR'S AND DISABILITY INSURANCE [RSDI] AND TITLE XVI
(SUPPLEMENTAL SECURITY INCOME/STATE SUPPLEMENTARY
(COLA) AND RELATED ISSUES THAT AFFECT IN-HOME SUPPORTIVE
SERVICE (IHSS) RECIPIENTS

REFERENCE: ACL 96-70, DATED 12/17/96

This Errata provides the corrected version of Attachment A (SSI/SSP Payment Standards) in ACL 96-70. We apologize for any inconvenience this may have caused.

ATTACHMENT A

SSI/SSP PAYMENT STANDARDS EFFECTIVE JANUARY 1, 1997

CNI - Chapter 206 (SB 1780) suspended the SSP COLA
CPI - Includes the pass-through of the 1/97 SSI COLA

CNI: 0.52% (a)
CPI: 2.90% (a)

	INDEPENDENT LIVING			REDUCED NEEDS			NON-MEDICAL OUT-OF-HOME CARE 1/ (NMOHC)					
	RESIDING IN OWN HOUSEHOLD			HOUSEHOLD OF ANOTHER WITH IN-KIND ROOM & BOARD			HOUSEHOLD OF RELATIVE WITH IN-KIND ROOM & BOARD			IN LICENSED FACILITY OR HOUSEHOLD OR RELATIVE WITHOUT IN-KIND ROOM & BOARD		
	Total	SSI	SSP	Total	SSI	SSP	Total	SSI	SSP	Total	SSI	SSP
INDIVIDUAL:												
AGED OR DISABLED - without cooking facilities (RMA) 2/	640.40 708.40	484.00 484.00	156.40 224.40	482.50 N/A	322.67 N/A	159.83 N/A	631.67 N/A	322.67 N/A	309.00 N/A	786.00 N/A	484.00 N/A	302.00 N/A
BLIND	695.40	484.00	211.40	537.50	322.67	214.83	631.67	322.67	309.00	786.00	484.00	302.00
DISABLED MINOR - living with parent(s) - living with non-parent relative or non-relative guardian	547.40	484.00	63.40	389.50	322.67	66.83	631.67	322.67	309.00	786.00	484.00	302.00
COUPLE:												
AGED OR DISABLED - per couple - without cooking facilities (RMA) 2/	1,122.20 1,258.20	726.00 726.00	396.20 532.20	891.43 N/A	484.00 N/A	407.43 N/A	1,302.33 N/A	484.00 N/A	818.33 N/A	1,572.00 N/A	726.00 N/A	846.00 N/A
BLIND - per couple	1,269.20	726.00	543.20	1,065.91	484.00	581.91	1,302.33	484.00	818.33	1,572.00	726.00	846.00
BLIND/AGED OR DISABLED - per couple	1,213.20	726.00	487.20	1,000.82	484.00	516.82	1,302.33	484.00	818.33	1,572.00	726.00	846.00

TITLE XIX MEDICAL FACILITY

Individual \$42
Couple \$84
Total.....\$42
SSI..... 30
SSP..... 12

1/NON-MEDICAL OUT-OF-HOME CARE

Personal and Incidental Needs Maximum: \$162 Minimum: \$92

2/RMA - Restaurant Meals Allowance