



UNITED STATES
DEPARTMENT OF
AGRICULTURE

FARMERS
HOME
ADMINISTRATION

194 W. Main Street, Suite F
Woodland, CA 95695-2915
(916) 668-2090
(916) 668-2056 (FAX)

Office Hours 7:30 - 4:30

September 10, 1993

Subject: AFDC and SSI Reductions

To: All Management Agents and Owner/Managers of FmHA
Multifamily Housing Complexes in California

This is to alert management of FmHA projects that appropriate and prompt action is to be taken to recertify tenants, upon request, who experience a reduction in AFDC and SSI benefits and possibly, in some counties, in General Assistance levels, due to State law changes. Prompt action is necessary to mitigate impact on residents who experience a reduction in income levels.

For purposes of expediting recertification due to reductions in AFDC and SSI benefits, a Notice of Action from Social Services for AFDC benefits or Notice of Planned Action from Social Security for SSI benefits is adequate verification of these income sources. Only if there is a question as to the Notice information would it be necessary to verify by direct contact with Social Services or Social Security. Other sources of income for the household, if applicable, must still be verified directly with the income source.

Section 8 assisted tenants, who are effected by these reductions, may be recertified in accordance with the instructions issued by HUD (see attachments).

Tenants should be advised of their rights regarding rent determinations. No tenant may be denied a redetermination regardless of dollar amount. The enclosed Notice is to be posted at the project site and given to all tenants who are known to be effected by these benefit reductions.

Please contact the FmHA District Office servicing your account should you have any questions.

James C. Rathbone
JAMES C. RATHBONE
Chief, Rural Housing

Enclosure

cc: All District Directors, FmHA, CA

WE INVEST IN PEOPLE.....

Farmers Home Administration is an Equal Opportunity Lender.
Complaints of discrimination should be sent to:
Secretary of Agriculture, Washington, D.C. 20250

NOTICE TO ALL TENANTS WHO RECEIVE AFDC OR SSI

YOU MAY BE ENTITLED TO
A RENT REDUCTION

If you pay a fixed percentage of your Income for rent (that is, 30 percent) and if your income has fallen because of the reduction in AFDC or SSI benefit levels, you may be entitled to a rent reduction.

If your income has fallen, you should immediately notify the manager, or the local public housing authority if you receive you Section 8 certificate or voucher from them. If you have a copy of the Notice of Action that you received from the Department of Social Services or Notice of Planned Action from the Social Security Administration, please give a copy of it to your manager, or to the local public housing authority if you receive your Section 8 or voucher from them. You will then be recertified to determine you correct rent level.

If you have any further questions please contact the manager or you may contact a Legal Services Office.

✓ From: Janet L. Browder at SFCPOST 8/19/93 1:55PM (927 bytes: 11 ln)
 To: Kathleen J. Ragan at SFCPOST1, Sebastian M. Adame at SDGPOST,
 Malcolm H. Findley at LOSPOST, Robert L. Hirsch at SACPOST
 cc: Keith E. Axtell at SFCPOST1, William N. Fisher at SFCPOST1,
 Janet L. Browder
 Subject: AFDC REDUCTIONS - CALIFORNIA

----- Message Contents -----

For the third year in a row benefits are being reduced. We have been advised of the details, as in the past, by the National Housing Law Project, letter dated August 10, 1993. Their letter and attachments are being faxed to you today so you can handle this situation as we have in the past. Refer to previous cc:mail dated 8/22/91.

If you have any problems with these procedures, call Bill Fisher to discuss further.

Thanks for you cooperation in this matter.

[461] From: Janet L. Browder at SFCPOST 8/24/93 12:43PM (1409 bytes: 23 ln)
 To: Sebastian M. Adame at SDGPOST, Malcolm H. Findley at LOSPOST,
 Kathleen J. Ragan at SFCPOST1, Robert L. Hirsch at SACPOST
 cc: Janet L. Browder
 Subject: AFDC REDUCTIONS-Missing pages?

----- Message Contents -----

In checking one of the copies we sent out it appears you all might be missing pages 2 and 4 of the "All County Letter". In case you are, I am faxing you those two pages (which the Law Project has just faxed to me).

The package you should have on this matter is:

1. My cc:mail message of 8/19/93: (1 page);
2. Law Project letter of August 10, 1993 (2 pages);
3. My cc:mail message of 8/22/91 (1 page);
4. All County Letter, dated 7/7/93 (4 pages);
5. Attachment 1 - "Important Notice for Cash and Recipients-State Law Changes" (1 page);
6. Letter dated July 19, 1993 from Dept. of HHS, John Woodbury - 1 page
AND
7. Attachment 5 - 1 page - "California SSI/SSP Payment Rates"

The above is the complete package you need on this subject.

If you do not have all of the above, contact Bill Fisher or me. (415) 556-7317

Thanks, and sorry for any confusion on the transmittal.

20] From: Janet L. Browder at sfcpst 8/22/91 9:14AM (2077 bytes: 40 ln)
: Kathleen J. Ragan at SFCPOST1, Malcolm H. Findley at LOSPOST,
: Sebastian M. Adame at SDGPOST, Carlos G. Mendoza at SACPOST
: William N. Fisher at SFCPOST1, Janet L. Browder, Keith E. Axtell at
SFCPOST1, Joyce M. Roberson at SFCPOST1
Subject: AFDC Reductions-CA,

----- Message Contents -----

Message to Branch Chiefs (S.F., L.A., Sacto & S.D.):

For consistent and expedited processing of the recertification of the residents income agents/owners should proceed as follows:

1. All County Letter No. 91-60, dated July 2, 1991 should be used for purposes of resident income verification for residents with AFDC income as their sole source of income.
2. Residents with AFDC income and income from other sources must have computation from Social Services advising of the new assistance amount (Notice of Action Message). For purposes of the interim recertification, separate verification from the other sources is not necessary. At the time of the next required recertification, income verification directly from all sources would be required.
3. The effective date of the new rent for the resident is September 1, 1991.
4. Agents/owners should use whatever means they determine to accomplish the recertifications as quickly as possible. Prompt recertification will assist the resident and minimize the need for extensive retroactive adjustments in the Section 8 claims. Suggestions can be shared, i.e. Survey the rent roll to determine which residents receive income from AFDC, etc.

Questions from the agents/owners should be directed to the Field Office. If further Regional guidance is necessary, the Field Office should contact Bill Fisher, at FTS 556-3880.

20] From: Janet L. Browder at sfcpost 8/22/91 9:14AM (2077 bytes: 40 ln)
: Kathleen J. Ragan at SFCPOST1, Malcolm H. Findley at LOSPOST,
Sebastian M. Adams at SDBPOST, Carlos G. Mendoza at SACPOST
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DEPARTMENT OF SOCIAL SERVICES
744 P Street, Sacramento, CA 95814



July 7, 1993

ALL-COUNTY LETTER NO. 93-49

TO: ALL COUNTY WELFARE DIRECTORS

REASON FOR THIS TRANSMITTAL

- State Law Change
 Federal Law or Regulation Change
 Court Order
 Clarification Requested by One or More Counties
 Initiated by CDSS

SUBJECT: IMPLEMENTATION OF AFDC PROGRAM CHANGES ENACTED IN THE BUDGET AND COMPANION LEGISLATION AND THE EFFECT ON THE FOOD STAMP PROGRAM

The purpose of this letter is to inform you of two new provisions which were enacted with the State Budget and the accompanying legislation, Senate Bill 35, Chapter 69, Statutes of 1993. These provisions will affect the computation of aid payments for recipients of Aid to Families with Dependent Children (AFDC), Refugee Cash Assistance (RCA), and Entrant Cash Assistance (ECA). Also provided are the proposed AFDC regulations in draft, the AFDC Payment Standard Table, Notices of Action (NOAs), and the mass informing notice that will be needed to implement these provisions. These provisions will be included as part of the existing Assistance Payments Demonstration Project (APDP).

\$30 AND 1/3 EARNED INCOME DISREGARDS

Beginning September 1, 1993, the 4- and 12-month time limitations of the \$30 and 1/3 earned income disregards will no longer apply to earned income received on or after September 1, 1993.

Example 1: An AFDC recipient with ongoing earnings exhausted the \$30 and 1/3 earned income disregards six months ago.

The recipient will become re-entitled to the \$30 and 1/3 earned income disregards beginning with earned income received on September 1, 1993.

Page Four

The Legislature did not take any additional action regarding the Cost of Living Adjustment (COLA) affecting the Minimum Basic Standard of Adequate Care (MBSAC) for Fiscal Year 1993/1994. Therefore, the 1.67 percent COLA increase is effective July 1, 1993.

CONTACTS

If you have any questions regarding this package, please contact the following staff regarding the specific areas:

\$30 and 1/3 Earned Income Disregards: Julie Lopes (916) 654-1786, CALNET 464-1786;

MAP Reduction: Pam Kian (916) 654-1801, CALNET 464-1801;

Food Stamps: Suzanne McNamee (916) 657-3815, CALNET 437-3815;

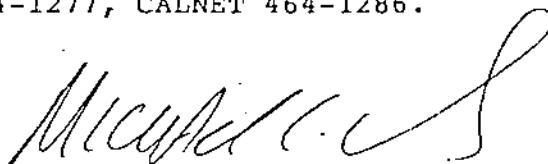
APDP: Leslie Raderman (916) 657-2357, CALNET 437-2357;

Mass Informing Notice: Elizabeth Allred (916) 657-3350, CALNET 437-3350;

Regulation Package: Jane Laciste (916) 654-1047, CALNET 464-1047;

AFDC NOAs: John Honeycutt (916) 654-1077, CALNET 464-1077;

Translations: Shirley Lukung (916) 654-1277, CALNET 464-1286.



MICHAEL C. GENEST
Deputy Director
Welfare Programs Division

Attachments

IMPORTANT NOTICE FOR CASH AID RECIPIENTS - STATE LAW CHANGES

PLEASE READ

MAXIMUM AID PAYMENT (MAP)

As of September 1, 1993, State law lowers the Maximum Aid Payment (MAP) that a family can get by 2.7 percent. See the Table to the right to find how much this change will lower your MAP on September 1.

You will get a Notice of Action in August showing your new aid amount starting September 1 because of the MAP change. Don't ask for a State Hearing or call the County about this change now. When you get that notice, you will be able to ask for a state hearing if you want to.

If cash aid is your only income, you will have less money to meet your family's needs. You will need to plan for this change.

\$30 and 1/3 EARNED INCOME DISREGARDS

As of September 1, 1993, State law takes away the limit on the number of months you can work and still get the \$30 and 1/3 earned income disregards. If you go to work, even part-time, you can keep more money to meet your family's needs.

FOOD STAMP CHANGES

Most families will get more Food Stamps when their cash aid goes down. Most families will get less Food Stamps when their cash aid goes up. You will get a separate notice if your Food Stamps go down.

AVISO IMPORTANTE PARA BENEFICIARIOS DE ASISTENCIA MONETARIA

CAMBIO EN LA LEY ESTATAL

POR FAVOR LEALO

PAGO MAXIMO DE ASISTENCIA MONETARIA (MAP)

A partir del 1 de septiembre de 1993, la ley estatal reduce en un 2.7 por ciento, el Pago Máximo de Asistencia (MAP) que puede recibir una familia. Vea la tabla al lado derecho para enterarse de lo máximo que su asistencia monetaria puede cambiar el 1 de septiembre.

Usted recibirá una notificación de acción en agosto mostrando su nueva cantidad de asistencia comenzando el 1 de septiembre a causa del cambio en el MAP. No pida una audiencia ni llame al condado sobre este cambio ahora. Cuando usted reciba esa notificación, usted podrá solicitar una audiencia si quiere hacerlo.

Si la asistencia monetaria es su único ingreso, usted tendrá menos dinero para cubrir las necesidades de su familia. Necesita hacer planes para este cambio.

DEDUCCIONES DE \$30 Y 1/3 POR INGRESOS GANADOS

A partir del 1 de septiembre de 1993, la ley estatal quita el límite en el número de meses que usted puede trabajar y todavía seguir recibiendo las deducciones de \$30 y 1/3 por ingresos ganados. Si usted trabaja, aunque sea parte del tiempo, puede quedarse con más dinero para satisfacer las necesidades de su familia.

CAMBIOS EN LAS ESTAMPILLAS PARA COMIDA

La mayoría de las familias recibirán más estampillas para comida cuando su asistencia monetaria baja. La mayoría de las familias recibirán menos estampillas para comida cuando su asistencia monetaria sube. Recibirá una notificación por separado si sus estampillas para comida bajan.

CASH AID MAP TABLE

Persons on Aid	Old MAP	New MAP	Decrease
1	\$ 307	\$ 299	\$ 8
2	504	490	14
3	624	607	17
4	743	723	20
5	847	824	23
6	952	926	26
7	1,045	1,017	28
8	1,139	1,108	31
9	1,230	1,197	33
10 or more	1,322	1,286	36

IF YOU NEED MORE INFORMATION ABOUT THE CHANGE IN THE MAP :

Please call toll free: 1-800-248-8068
or
TDD for hearing impaired 1-800-952-8349

TABLA DE MAP PARA ASISTENCIA MONETARIA

Personas que reciben ayuda	MAP anterior	MAP nuevo	Reducción
1	\$ 307	\$ 299	\$ 8
2	504	490	14
3	624	607	17
4	743	723	20
5	847	824	23
6	952	926	26
7	1,045	1,017	28
8	1,139	1,108	31
9	1,230	1,197	33
10 o más	1,322	1,286	36

SI NECESITA MAS INFORMACION SOBRE EL CAMBIO EN EL MAP:

Por favor llame al número gratuito: 1-800-248-8068
o al
TDD para las personas sordas 1-800-952-8349



DEPARTMENT OF HEALTH & HUMAN SERVICES
SOCIAL SECURITY ADMINISTRATION

Refer to:

Chico District Office
555 Rio Lindo Ave, 2nd Floor
Chico, CA 95926

July 19, 1993

Legal Services of Northern California
Box 3728
Chico CA 95927

Dear Colleague:

This is to advise you that effective September 1, 1993, the State of California is decreasing the amount of the state portion of the SSI payments for most California recipients. In cases where the SSI payment is very small the payment may stop entirely, which would also cause the loss of SSI-linked Medi-Cal coverage. These individuals will automatically continue to be covered by Medi-Cal as long as the SSP reduction is the reason for ineligibility.

Past experience has shown that any reduction in SSI has a severe effect on the recipients, especially those who are elderly or are suffering from a mental disability. As a result you may experience an increase in the number of contacts from affected SSI recipients.

As many of these recipients may come to you for assistance and an explanation of this change, we are enclosing a flyer and a payment rate chart. We hope you find these useful.

Since the reduction is solely determined by the state, and the Social Security Administration has no control over the decision, any concerns you or your clients have about this change should be addressed to:

Department of Social Services
Public Inquiry and Response
744 P Street
Sacramento CA 95814

Other questions concerning the SSI program can be answered by our toll-free number, 1-800-772-1213, between the hours of 7 a.m. and 7 p.m.

Sincerely,

John Woodbury
District Manager

Enclosures

CALIFORNIA SSI/SSP PAYMENT RATES

RATES FOR ELIGIBLE COUPLES

RATES FOR ELIGIBLE INDIVIDUALS

CATEGORY	1993-8/93			9/93-			
	LAOS	SSI	SSP	TOTAL	SSI	SSP	TOTAL
AGED OR DISABLED Own household	A-A.....	434.00	186.00	620.00	434.00	169.40	603.40
	B-D*.....	289.34	200.66	490.00	289.34	167.43	476.77
	No cooking facilities	434.00	254.00	688.00	434.00	237.40	671.40
DISABLED MINOR Living with parent or relative	C-E-A-E	434.00	63.40	497.40	434.00	63.40	497.40
	Household of another	289.34	76.66	366.00	289.34	66.83	356.17
BLIND Own household	A-A C-A	434.00	255.00	689.00	434.00	236.40	670.40
	Household of another	289.34	269.66	559.00	289.34	254.57	543.91
ALL INDIVIDUALS Nonmedical	A-B.....	434.00	302.00	736.00	434.00	302.00	736.00
	out-of-home care Household of another with nonmedical	289.34	309.00	598.34	289.34	309.00	598.34
	out-of-home care Certified medical facility	30.00	12.00	42.00	30.00	12.00	42.00
Title XIX pays 60% Medical facility not certified under Title XIX	A-Z.....	434.00	0.00	434.00	434.00	0.00	434.00

CATEGORY	1993-8/93			9/93-			
	LAOS	SSI	SSP	TOTAL	SSI	SSP	TOTAL
AGED OR DISABLED Own household	A-A.....	652.00	488.00	1140.00	652.00	457.22	1109.22
	Household of another	434.67	510.00	944.67	434.67	484.49	919.16
	No cooking facilities	652.00	624.00	1276.00	652.00	593.22	1245.22
BLIND/AGED-DISABLED Own household	A-A.....	652.00	608.00	1260.00	652.00	574.95	1226.95
	Household of another	434.67	631.00	1065.67	434.67	602.23	1036.90
BOTH BLIND Own household	A-A.....	652.00	681.00	1333.00	652.00	645.01	1297.01
	Household of another	434.67	703.00	1137.67	434.67	672.28	1106.95
ALL COUPLES Nonmedical	A-B.....	652.00	808.00	1460.00	652.00	808.00	1460.00
	out-of-home care Household of another with nonmedical	434.67	818.33	1253.00	434.67	818.33	1253.00
	out-of-home care Certified medical facility	60.00	24.00	84.00	60.00	24.00	84.00
Title XIX pays 50% Medical facility not certified under Title XIX	A-Z.....	652.00	0.00	652.00	652.00	0.00	652.00

INCOME FROM ANY OTHER SOURCE IS SUBTRACTED FROM THE PAYMENT RATE (FOR INCOME NOT BASED ON NEED, THE FIRST \$20 IS NOT COUNTED)

Household of another --- An individual lives in the household of another when he/she does not own the shelter, rent the shelter, pay a pro rata share of the household expenses, live in a public assistance household, or live in a noninstitutional care situation.

No cooking facilities --- The rate for "No cooking facilities" applies if any of the following situations exist:

- (1) The individual/couple's immediate living quarters do not have adequate cooking or food storage facilities with which meals can be prepared on a daily basis.
- (2) There is no access to adequate cooking or food storage facilities as part of the living arrangement for the purpose of preparing meals or having them prepared on their behalf.
- (3) The individual/couple lives in a boarding house that does not have a communal kitchen with adequate cooking or food storage facilities to which they have access for preparation of meals.
- (4) They live with friends or relatives in private living quarters and do not have access to cooking or food storage facilities.
- (5) They live in a room and board facility and do not contract with the facility to have meals prepared as part of the living arrangement.