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## EVALUATOR MANUAL TRANSMITTAL SHEET

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<p><b><u>Distribution:</u></b></p> <p>____ All Child Care Evaluator Manual Holders</p> <p>____ All Residential Care Evaluator Manual Holders</p> <p><input checked="" type="checkbox"/> All Evaluator Manual Holders</p>	<p><b><u>Transmittal No.</u></b></p> <p>14APX-14</p> <hr/> <p><b><u>Date Issued</u></b></p> <p>December 2014</p>
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**Subject:**

Appendix C

Estimated SSI/SSP Payment Standards effective January 2015

**Reason for Change:**

To incorporate the new SSI/SSP Payment Standards into Appendix C

**Filing Instructions:**

REMOVE: SSI/SSP Payment Standards effective January 2014

INSERT: SSI/SSP Payment Standards effective January 2015

**Approved:**

Original Document signed by  
Wendy Nelson

12/12/14

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**WENDY NELSON Chief**  
Policy Development Bureau  
Community Care Licensing Division

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Date

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Contact Person: Susan Hutchinson

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**Non-Medical Out-of-Home Care (NMOHC)  
Payment Standard  
Effective January 1, 2015**

Supplemental Security Income (SSI)	\$ 733.00
State Supplementary Payment (SSP)	<u>\$ 412.00</u>
Total NMOHC Payment Standard	\$1145.00*

The NMOHC Payment Standard includes the following components:

Room and Board	\$ 492.00
Care and Supervision (maximum)	<u>\$ 522.00</u>
<b>Amount Payable for Basic Services</b>	<b><u>\$1014.00</u><sup>1</sup></b>
Personal and Incidental Needs Allowance (minimum)	<u>\$ 131.00</u>
(Must be provided to the recipient)	\$1145.00

\*Amounts are double for SSI/SSP couples.

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1 NOTE: Recipients who have income in addition to their SSI/SSP check (for example, a pension, Social Security retirement, or disability benefits) can be charged the **\$1145.00** amount for basic services plus an additional \$20. Because federal rules do not count the first \$20 of a recipient's income against his/her SSI/SSP grant, an SSI/SSP recipient with other income has an extra \$20 that people who receive only an SSI/SSP check do not have. Neither federal nor state law restricts the recipient in how this additional \$20 amount is spent. Thus, if the recipient agrees in the admission agreement to pay the additional \$20 for basic services, the facility may charge the additional amount.

## SSI/SSP PAYMENT STANDARDS\*

EFFECTIVE JANUARY 1, 2015

Includes Pass-Through of SSI COLA and Suspension of SSP COLA

CPI: 1.7%  
CNI: N/A

	INDEPENDENT LIVING			REDUCED NEEDS		
	RESIDING IN OWN HOUSEHOLD			HOUSEHOLD OF ANOTHER WITH IN-KIND ROOM & BOARD		
	TOTAL	SSI	SSP	TOTAL	SSI	SSP
<b><u>INDIVIDUAL:</u></b>						
AGED OR DISABLED - without cooking facilities (RMA) <sup>1</sup>	<b>\$889.40</b>	\$733.00	\$156.40	<b>\$648.50</b>	\$488.67	\$159.83
BLIND	<b>\$973.40</b>	\$733.00	\$240.40	<b>\$703.50</b>	\$488.67	\$214.83
DISABLED MINOR - living with parent(s) - living with non-parent relative/guardian	<b>\$944.40</b>	\$733.00	\$211.40	<b>\$703.50</b>	\$488.67	\$214.83
	<b>\$796.40</b>	\$733.00	\$63.40	<b>\$555.50</b>	\$488.67	\$66.83
<b><u>COUPLE:</u></b>						
AGED OR DISABLED - per couple - without cooking facilities (RMA) <sup>1</sup>	<b>\$1,496.20</b>	\$1,100.00	\$396.20	<b>\$1,134.67</b>	\$733.34	\$401.33
BLIND - per couple	<b>\$1,664.20</b>	\$1,100.00	\$564.20	<b>\$1,281.67</b>	\$733.34	\$548.33
BLIND/AGED OR DISABLED - per couple	<b>\$1,643.20</b>	\$1,100.00	\$543.20	<b>\$1,281.67</b>	\$733.34	\$548.33
	<b>\$1,587.20</b>	\$1,100.00	\$487.20	<b>\$1,225.67</b>	\$733.34	\$492.33

**TITLE XIX MEDICAL FACILITY**

	Individual	Couple
Total	\$50	\$100
SSI	\$30	\$60
SSP	\$20	\$40

<sup>1</sup> RMA - \$84 Individual; \$168 Couple

**SSI/SSP PAYMENT STANDARDS\***

EFFECTIVE JANUARY 1, 2015

Includes Pass-Through of SSI COLA and Suspension of SSP COLA

CPI: 1.7%

CNI: N/A

	NMOHC <sup>2</sup>					
	HOUSEHOLD OF RELATIVE WITH IN-KIND ROOM & BOARD			IN LICENSED FACILITY OR HOUSEHOLD OF RELATIVE WITHOUT IN-KIND ROOM & BOARD		
	TOTAL	SSI	SSP	TOTAL	SSI	SSP
<b><u>INDIVIDUAL:</u></b>						
AGED OR DISABLED - without cooking facilities (RMA) <sup>1</sup>	<b>\$895.67</b>	\$488.67	\$407.00	<b>\$1,145.00</b>	\$733.00	\$412.00
BLIND	<b>\$895.67</b>	\$488.67	\$407.00	<b>\$1,145.00</b>	\$733.00	\$412.00
DISABLED MINOR - living with parent(s) - living with non-	<b>\$895.67</b>	\$488.67	\$407.00	<b>\$1,145.00</b>	\$733.00	\$412.00
<b><u>COUPLE:</u></b>						
AGED OR DISABLED - per couple - without cooking facilities (RMA) <sup>1</sup>	<b>\$1,779.00</b>	\$733.34	\$1,045.66	<b>\$2,290.00</b>	\$1,100.00	\$1,190.00
BLIND - per couple	<b>\$1,779.00</b>	\$733.34	\$1,045.66	<b>\$2,290.00</b>	\$1,100.00	\$1,190.00
BLIND/AGED OR DISABLED - per couple	<b>\$1,779.00</b>	\$733.34	\$1,045.66	<b>\$2,290.00</b>	\$1,100.00	\$1,190.00

<sup>2</sup> NMOHC

Personal and Incidental Needs Maximum:	\$231	Minimum:	\$131
Care and Supervision Minimum:	\$422	Maximum:	\$522
Room and Board:	\$492		