ASSISTANCE PAYMENT CHART – JANUARY 2013

OWF Information				Covered Families & Children Medicaid				Child Care		Food Assistance			
AG Size	Initial Eligibility Test Standard 07/12	CFC/OWF Allocation Allowance Standard 10/97	Cash Payment Standard LIF Limit 01/13	HF 90% FPL Need Standard 1/12	150% FPL Healthy Start Standard 1/12	200% FPL Healthy Start Standard 1/12	185% FPL Transitional Standard for 2nd 6 mos 1/10	125% FPL Initial Eligibility 07/11	200% FPL Ongoing Eligibility 07/11	AG Size	Gross Test 130% of FPL 10/12	Net Test 100% of FPL 10/12	Issuance Maximum (Thrifty Food Plan) 04/09
1	466	583	**273**	838	1397	1862	Effective 1/1/10, MAY has a 12-month continuous eligibility period; no income limit.	N/A	N/A	1	1211	931	200
2	631	802	**374**	1135	1892	2522		1533	2452	2	1640	1261	367
3	796	980	**458**	1432	2387	3182		1931	3090	3	2069	1591	526
4	961	1210	**564**	1729	2882	3842		2329	3726	4	2498	1921	668
5	1126	1417	**661**	2026	3377	4502		2726	4362	5	2927	2251	793
6	1291	1578	**735**	2323	3872	5162		3125	5000	6	3356	2581	952
7	1456	1761	**822**	2620	4367	5822		3523	5636	7	3785	2911	1052
8	1621	1954	**910**	2917	4862	6482		3920	6272	8	4214	3241	1202
9	1786	2149	**1002**	3214	5357	7142		4319	6910	9	4643	3571	1352
10	1951	2345	**1092**	3511	5852	7802		4716	7546	10	5072	3901	1502

Table: TOWF

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

Transitional Eligibility

AG Size	150% FPL 01/12
2	1892
3	2387
4	2882
5	3377
6	3872
7	4367
8	4862
9	5357
10	5852

Earned Income Deduction = 20%
Standard Deduction (10/12):
$149 for an AG size of 1-3 persons
$160 for an AG size of 4 persons
$187 for an AG size of 5 persons
$214 for an AG size of 6 or more
Dependent Care Maximum for each dependent = NO LIMIT
Standard Utility Allowance = **$456 (01/13)**
Limited Utility Allowance = **$301 (01/13)**
Single Utility Allowance = $65 (4/12)
Single Telephone Allowance =**$37 (01/13)**
Maximum Excess Shelter Deduction for non elderly or non disabled = **$**469 (10/12)
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	3114	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
January 2011

HH Size	Monthly Income 165%FPL
1	1498
2	2023
3	2548
4	3074
5	3599
6	4124
7	4649
8	5175
9	5700
10	6225

Medicaid Information

Table: TMEP

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

Need Standards	Individual	Couple
Own HH (1/13)	**622**	**1066**
HH of Another (1/12)	408	699
QMB (3/12)	931	1261
SLMB (3/12)	1117	1513
QI-1 (3/12)	1257	1703
QWDI (3/12)	1862	2522
MBIWD1 (3/12)	1397	NA
MBIWD2 (3/12)	2328	NA

Medicare Premium 2013 Amount	**104.90**

Deeming Amounts	
Spouse-Child	**356**
1 Parent	**710**
2 Parents	**1066**
or use ABD Deeming Calculator	
Work Expense Deduction for Ineligible Spouse	65
SSI Payment (01/13) Single	**710**
Couple	**1066**