

STATE OF VERMONT  
AGENCY OF HUMAN SERVICES

# DCF

## Department for Children and Families

BULLETIN NO.: 10-18

**FROM:** Pam Dalley, Interim Deputy Commissioner  
Economic Services Division

**DATE:** September 1, 2010

**SUBJECT:** 10/1/10 3SquaresVT (Food Stamps), Reach Up, and Medicaid Standards updates

CHANGES ADOPTED EFFECTIVE 10/1/10

### INSTRUCTIONS

- Maintain Manual - See instructions below.
- Proposed Regulation - Retain bulletin and attachments until you receive Manual Maintenance Bulletin: \_\_\_\_\_
- Information or Instructions - Retain until \_\_\_\_\_

### MANUAL REFERENCE(S):

P-2210          P-2590  
P-2420

**The following standards were updated effective January 1, 2010, however the procedures page was not issued at that time.**

- Medicare copayments for nursing home care
- Social Security's Substantial Gainful Activity (SGA) income limit

**The following standards are updated effective October 1, 2010.**

All programs

- Business expenses for providing day care meals and snacks
- Business expenses for providing room and board

Medicaid long-term care

- Average monthly and daily cost to a private patient of nursing facility services
- Fuel and utility standard

3SquaresVT (SNAP or Food Stamps)

- Standard deductions
- Shelter cost maximum deduction
- Fuel and utility standard with heat or cooling
- Fuel and utility standard without heat

**The following standards remain as is until further notice.**

- Maximum net monthly income levels
- Maximum gross monthly income levels
- Formula for households of more than 10 people
- Agreement to Report Change, ESD 201A (130% FPL chart on back)

**Manual Maintenance**

Significant changes are indicated by vertical lines in the margin. Changes to clarify, rearrange or correct references without changing the procedure are dotted.

**Remove**

P-2210 C22 (09-26)

**Reach Up Procedures**

**Insert**

P-2210 C22 (10-18)

**Medicaid Procedures**

P-2420 B4 (08-50)

P-2420 B4 (10-18)

P-2420 D1 (09-36)

P-2420 D1 (10-18)

P-2420 D2 (09-26)

P-2420 D2 (10-18)

P-2420 D4 (09-36)

P-2420 D4 (10-18)

P-2420 D5 (09-36)

P-2420 D5 (10-18)

**3SquaresVT / Food Stamps Procedures**

P- 2590 A1 (09-26)

P- 2590 A1 (10-18)

P- 2590 A2 (09-26)

P- 2590 A2 (10-18)

P-2210 Determination and Documentation Eligibility Factors

C. Financial Eligibility Computation (Continued)

- Business Expenses - Providing Day Care Meals and Snacks (effective 10/1/10)

A recipient providing day care for other children in his or her own home is entitled to deduct, as a business expense from earned income, the cost of meals and snacks provided to those children. Use the following standard deductions or actual documented expenses, if higher.

Breakfast	\$1.19 per day
Lunch only	\$2.22 per day
Dinner only	\$2.22 per day
Snack	\$ .66 per day

In cases that have documented non-meal related expenses, do the following:

- Manually figure the total monthly meal expense using either the standard deduction table or the actual verified expenses (whichever is higher).
- Figure the monthly total for non-meal related expenses.
- Add a) to b) and enter the total in the ACTUALS field on the DCIN panel. For these cases the entries in the meals fields will be disregarded and the amount in the ACTUALS field used.

- Business Expenses - Providing Room and/or Board (effective 10/1/10)

Use either A or B below, whichever is the higher amount, for the business expense deduction.

A.

ACCESS Code	Type	Group Size					
		1	2	3	4	5	6+
1	Room Only	145	266	381	484	575	690
2	2/3 Board	133	245	351	445	529	635
3	Board Only	200	367	526	668	793	952
4	Room and 2/3 Board	278	511	732	929	1104	1325
5	Room and Board	345	632	907	1152	1368	1642

- The actual documented amount of business expenses for room and/or board providing the amount does not exceed the income received from the roomers and boarders.

P-2420 Eligibility Determination for Medicaid

B. Monthly Income Standards (Continued)

**4. SSI/AABD payment levels (2700)**

<u>Living Arrangement</u>		<u>Effective 1/1/09</u>	<u>1/1/08 – 12/31/08</u>
Independent Living	Individual	\$ 726.04	\$ 689.04
	Couple	1,109.88	1,054.88
Another's Household	Individual	488.63	463.97
	Couple	722.31	685.65
Residential Care Home w/ Assistive Community Care Level III	Individual	722.38	685.38
	Couple	1,107.77	1,052.77
Res. Care Home w/ Limited Nursing Care Level III	Individual	941.13	904.13
	Couple	1,614.69	1,559.69
Residential Care Home Level IV	Individual	897.94	860.94
	Couple	1,573.06	1,518.06
Custodial Care Family Home	Individual	772.69	735.69
	Couple	1,343.82	1,288.82
Long-term Care	Individual	47.66	47.66
	Couple	95.33	95.33

**5. Institutional income standard for long-term care (4281.5)**

<u>Effective 1/1/09</u>		<u>1/1/08 – 12/31/08</u>	
Individual	\$2,022.00	Individual	\$1,911.00
Couple	\$4,044.00	Couple	\$3,822.00

**6. Personal needs allowance for long-term care (4462.1)**

Individual	\$47.66
Couple	\$95.33

**7. Substantial Gainful Activity (SGA) income limit (4213.1)**

Effective 1/1/10

Blind	\$1,640
Disabled	\$1,000

10/1/10

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P-2420 D1

P-2420 Eligibility Determination for Medicaid

D. Other Standards

1. **SSI Federal Benefit Payment Rate (4222, 4281.1, 4281.2)**

These are used when determining the eligibility of SSI-related adults, allocations to ineligible children and parents, and the amount of income deemed to SSI-related child applicants.

Effective 1/1/09

Individual	\$ 674 per month
Couple	\$1,011 per month

Maximum allocation for  
Ineligible child \$ 337 per month

2. **Business Expenses - Providing Room and/or Board**

Use either A or B below, whichever is the higher amount, for the business expense deduction:

A. Standard monthly deduction, as follows:

- Room - Scaled according to the size of the group.
- Board - Equal to the thrifty food plan allowance for the group size.

Effective 10/1/10

ACCESS Code	Type	Group Size						
		1	2	3	4	5	6+	
1	Room Only	145	266	381	484	575	690	
2	2/3 Board	133	245	351	445	529	635	
3	Board Only	200	367	526	668	793	952	
4	Room and 2/3 Board	278	511	732	929	1104	1325	
5	Room and Board	345	632	907	1152	1368	1642	

B. The actual documented amount of business expenses for room and/or board providing the amount does not exceed the income received from the roomers and boarders.

10/1/10

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P-2420 D2

P-2420 Eligibility Determination for MedicaidD. Other Standards (Continued)**3. Business Expenses - Providing Day Care Meals**

A recipient providing day care for other children in his or her own home is entitled to deduct, as a business expense from earned income, the cost of meals and snacks provided to those children. Use the following standard deductions or actual documented expenses, if higher.

Effective 10/1/10

Breakfast	\$1.19 per day
Lunch only	\$2.22 per day
Dinner only	\$2.22 per day
Snack	\$ .66 per day

In cases that have documented non-meal related expenses, do the following:

- a) Manually figure the total monthly meal expense using either the standard deduction table or the actual verified expenses (whichever is higher).
- b) Figure the monthly total for non-meal related expenses.
- c) Add a) to b) and enter the total in the ACTUALS field on the DCIN panel. For these cases the entries in the meals fields will be disregarded and the amount in the ACTUALS field used.

**4. Dependent Care Expense Maximums - ANFC-Related Medicaid Only (4382.4)**

Effective 10/1/08

\$175.00 per month per person for children two years of age or older and for incapacitated adults.

\$200.00 per month per child for children under two years of age.

Transportation: \$0.585 per mile.

P-2420 Eligibility Determination for Medicaid

D. Other Standards (Continued)

**8. Allocation to Community Spouse - Long-Term Care (4462.4 and P-2430 E)**

- a. Maximum income allocation. If actual verified housing costs excluding fuel and utilities are greater than the base housing cost, allow up to the maximum allocation.

Effective 1/1/09  
\$2,739.00

- b. Standard income allocation. (Maintenance income standard) This is 150 percent of the current poverty level for 2 people.

Effective 1/1/09  
\$1,829.00

- c. Shelter standard This is 30 percent of the maintenance income standard in paragraph b, above.

Effective 1/1/09  
\$ 549.00

- 1. Fuel and utility standard. Current food stamp fuel and utility standard is on page P-2590 A1.

<u>Effective 10/1/10</u>	<u>(10/1/08 – 9/30/09)</u>
\$ 614.00	\$ 744.00

- 2. Base housing cost

<u>Effective 1/1/06</u>	<u>(10/1/05 – 12/31/05)</u>
\$ 0.00	\$ 9.00

**9. Allocation to Each Family Member Living with a Community Spouse - Long-Term Care (4462.3)** This is the maximum allocation if family member has no income.

Effective 1/1/09  
\$ 609.67

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P-2420 D5

P-2420 Eligibility Determination for Medicaid

D. Other Standards (Continued)

Allocation if family member has income:

- Maintenance income standard (P-2420 D#8b)
- Gross income of family member
- Remainder
- Remainder ÷ by 3 = Allocation

**10. Community Maintenance Allowance in the Home-and-Community-Based Waiver Program (P-2430 H)**

Effective 1/1/09

\$ 991.00

**11. Medicare Copayments for Nursing Home Care (P-2430 E)**

For the 21st through 100th day that a Medicare eligible person is in a nursing home, Medicare will pay the daily costs in excess of the following patient co-payment:

Effective 1/1/10  
\$ 137.50

1/1/09 – 12/31/09  
\$ 133.50

**12. Standard Deductions for Assistive Community Care Services (ACCS) and Personal Care Services (PCS) (4452.3) (4452.4) (P-2421 D)**

Effective 1/1/09

ACCS \$ 37.00 per day  
\$ 1,110.00 per month

Effective 1/1/03

PCS \$ 17.83 per day  
\$ 535.00 per month

**13. Average Cost to a Private Patient of Nursing Facility Services (4474.2)**

This amount is used to calculate a penalty period for an individual in a nursing home or in the home-and-community-based waiver program.

Effective 10/1/10  
\$ 7477.20 per month  
\$ 249.24 per day

10/1/09 – 9/30/10  
\$7185.52 per month  
\$ 239.52 per day



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P-2590 A1

P-2590 Reference MaterialsA. Calculating Net Income1. Standard Deduction (Effective 10/1/10)

The standard deduction varies by household size:

\$142 for households of 1 to 3 members

\$153 for households of 4 members

\$179 for households of 5 members

\$205 for households of 6 or more members

2. Basic Medical Liability (Effective 1/1/81)

The base amount for medical liability is \$35. Refer to section 273.9(d)(3) of the 3SquaresVT/food stamp manual.

3. Dependent Care Maximum Deduction (Effective 10/1/09)

There is no cap on the dependent care deduction for 3SquaresVT/food stamps.

4. Shelter Cost Maximum Deduction (Effective 10/1/10)

The maximum deduction for households without elderly or disabled members is \$458.

5. Fuel and Utility Standards

	<u>Effective 10/1/10</u>	<u>10/1/09 – 9/30/10</u>
With heat or cooling	\$614.00	\$744.00
Without heat	\$210.00	\$215.00
Phone only	\$ 36.00	\$36.00

See P-2510 E on selecting the correct standard and ACCESS manual - STAT 5.14 (UTIL Panel) and STAT 5.17 (PHON Panel) for ACCESS-related information.

P-2590 Reference Materials

A. Calculating Net Income (Continued)

6. Business Expenses - Providing Day Care Meals (Effective 10/1/10)

A recipient providing day care for other children in his or her own home is entitled to deduct, as a business expense from earned income, the cost of meals and snacks provided to those children. Use the following standard deductions or actual documented expenses, if higher.

Breakfast	\$1.19 per day		Dinner only	\$2.22 per day
Lunch only	\$2.22 per day		Snack	\$ .66 per day

In cases that have documented non-meal related expenses, do the following:

- a) Manually figure the total monthly meal expense using the higher of the standard deduction table or the actual verified expenses. Convert weekly (bi-weekly) expenses to a monthly figure.
- b) Figure the monthly total for non-meal related expenses.
- c) Add a) to b) and enter the total in the ACTUALS field on the DCIN panel. For these cases the entries in the meals fields will be disregarded and the amount in the ACTUALS field used.

Business Expenses - Providing Room and Board (Effective 10/1/10)

The following table outlines the monthly business expenses allowance for room and board. If the client provides documentation of separate identifiable costs of providing room and/or board that exceed the applicable table amount, allow the higher amount. In no case, however, may the business expense allowed exceed the amount of gross income received from the roomer and boarder.

ACCESS		Group Size					
Code	Type	1	2	3	4	5	6+
1	Room Only	145	266	381	484	575	690
2	2/3 Board	133	245	351	445	529	635
3	Board Only	200	367	526	668	793	952
4	Room and 2/3 Board	278	511	732	929	1104	1325
5	Room and Board	345	632	907	1152	1368	1642

If five or more roomer/boarders are in one payment group, the case should be handled FIAT. The RBIN panel allows only four roomer/boarders per panel. Splitting one payment onto two RBIN panels results in an incorrect business expense deduction.