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OFFICE OF TEMPORARY AND DISABILITY ASSISTANCE
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Robert Doar
Commissioner

Informational Letter

Section 1

Transmittal:	05-INF-06 REVISED
To:	Local District Commissioners
Issuing Division/Office:	Division of Temporary Assistance
Date:	Revision Date: March 15, 2005/Original Release Date: February 16, 2005
Subject:	Revised Charts of Personal Needs Allowance (PNA) in Non- Medical Facilities and Medical Facilities Desk Aid
Suggested Distribution:	Temporary Assistance Directors, Food Stamp Directors, TOP Coordinators, Medical Assistance Directors, Staff Development Coordinators, Child Assistance Program Coordinators, Employment Coordinators
Contact Person(s):	Temporary Assistance, 1-800-343-8859, Cash Assistance Bureau, extension 4-9334 Medicaid Local District Liaison Upstate- (518)474-8216, NYC - (212) 268-6855
Attachments:	Attachment 1: Certifying State Agency and Funding Source Definitions Attachment 2: Personal Needs Allowances in Non-Medical Facility-Facility Descriptions Attachment 3: Personal Needs Allowance in Non-Medical Facilities Chart Attachment 4: Personal Needs Allowances in Medical Facilities Chart
Attachment Available On – Line:	<input checked="" type="checkbox"/>

Filing References

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
04 INF-22		Section 352.8 (c) (1) Section 900.17(a)	SSL 131- o SSL 159.10 SSL 194.8 SSL 209.2 -a SSL 209.3 SSL 366.2(a) (10) (ii)		ABEL Transmittal 04-4

Section 2

I. Purpose

The purpose of this Informational Letter (INF) is to provide social services districts (SSDs) with updated charts that depict the monthly personal needs allowances (PNA) for Temporary Assistance (TA) recipients who reside in non-medical facilities, medical facilities and is revised to include information on domiciliary Care for Veterans.

II. Background

When recipients of TA reside in non-medical facilities or medical facilities, SSDs must provide a monthly PNA for clothing and incidentals. The type of facility that the individual resides in determines the amount of the PNA.

For instance, individuals residing in boarding homes or approved residential programs for victims of domestic violence in which three meals per day are provided receive a PNA of \$45 monthly. Individuals who reside in facilities certified by the Office of Alcoholism and Substance Abuse Services (OASAS) other than community residences receive a PNA in the amount of \$45 monthly. Individuals in infirmaries, nursing homes, intermediate care facilities, or similar medical facilities receive a PNA in the amount of \$40 monthly.

Individuals who reside in a Level 1, 2 or 3 congregate care facility receive a PNA based on the type of facility in which they reside and the amounts are normally increased every year when the Social Security Administration (SSA) adjusts federal SSI (Supplemental Security Income) benefits to reflect the increase in the cost of living.

To assist SSDs in determining the amount of an individual's PNA, 90 ADM – 43 provided two charts that identified PNA amounts for individuals who reside in non-medical facilities and medical facilities. These charts have been updated and are included in attachments one and two of this release.

III. Program Implications

Increased PNA amounts will result in higher TA standard of need, and higher PNAs for TA recipients residing in Congregate Care Level 1, 2 and 3 facilities. Use of the correct shelter type will generate the correct PNA. There is no need to rebudget cases because the increased PNA amounts are updated automatically with the annual Automatic Budgeting and Eligibility Logic (ABEL) January 2005 mass rebudget described in November 2, 2004 ABEL Transmittal 04-4 "Benefit Increase to SSI Congregate Care Facilities". The PNA charts are provided as a resource for informational purposes.

IV. Medical Implications

For Medicaid purposes, the PNA amount is a deduction from income for an individual who is in permanent absence status in a medical facility. Please note that, for an "institutionalized spouse" residing in the community who is receiving a waiver service or participating in a Program of All-inclusive Care for the Elderly (PACE), the PNA deduction from his/her income is equal to the difference between the Medicaid income level for one-person and two-person households. For an

SSI-related individual who resides in a Congregate Care Level 1, 2, or 3 facility, the PNA is part of the TA standard of need/SSI benefit level that is used to determine Medicaid eligibility. PNAs for MA-only recipients in permanent absence status in medical facilities have not been increased. The TA standard of need/SSI benefit level for recipients residing in Congregate Care Level 1, 2, or 3 facilities is updated automatically with the annual mass rebudgeting on Medicaid Budget Logic (MBL). See MBL Transmittal 04-2.”

Issued By _____

Name: Russell Sykes
Title: Deputy Commissioner
Division/Office: Temporary Assistance

ATTACHMENT I

Certifying Agency Definitions	
OCFS	Office of Children and Family Services
OMH	Office of Mental Health
OMRDD	Office of Mental Retardation and Developmental Disabilities
DOH	Department of Health
OASAS	Office of Alcohol and Substance Abuse Services
DV	Domestic Violence
OTDA	Office of Temporary and Disability Assistance
USDVA	US Department of Veterans' Affairs
Funding Source Definitions	
SSI	Supplemental Security Income
SSPNA	State Supplemental Personal Needs Allowance
SNA	Safety Net Assistance
FA	Family Assistance
MA	Medicaid
PNA	Personal Needs Allowance
EAF	Emergency Assistance to Family
VA	Veterans Affairs

ATTACHMENT II

PNAs in Non-Medical Facilities – Facility Descriptions
Effective January 1, 2005

Facility Type	Certifying State Agency	Facility Descriptions
Congregate Care Level 1	OCFS, OMH, or OMRDD	Family-like smaller residential programs serving the mentally retarded, the mentally ill, and the frail elderly
Congregate Care Level 2	DOH, OMH, OMRDD, or OASAS	<ul style="list-style-type: none"> <input type="checkbox"/> DOH certified Adult Homes, enriched housing programs and residences for adults (serving the frail elderly and the mentally ill) <input type="checkbox"/> OMH certified community residences (principally small group homes and supported apartments) <input type="checkbox"/> OMRDD certified community residences (principally small group homes and supported apartments) <input type="checkbox"/> OASAS certified drug/alcohol abuse treatment programs (group residences and supported apartments)
Congregate Care Level 3	OMRDD	Schools for the Mentally Retarded (only a few programs)
State-Operated Community Residence or RCCA	OMH	OMH operated (State owned/rented and State employees) small group homes and large group residences (RCCAs), programmatically similar to Congregate Care Level 2 facilities
State-Operated CR or IRA	OMRDD	OMRDD operated (State owned/rented and State employees) small group homes, programmatically similar to Congregate Care Level 2 facilities
TA room and board situations	<u>not</u> State certified	Used when a recipient is purchasing room and board (three meals a day) from an individual, family, commercial establishment or a not-for profit agency and TA provides an allowance to cover rent, board and other expenses
Domiciliary Care For Veterans	USDVA	A domiciliary is a VA facility that provides rehabilitative and long-term health-maintenance care for veterans requiring minimal medical care but do not need the skilled nursing services provided in a hospital and/or nursing home setting. (i.e.: veterans engaged in substance abuse and/or mental health programs). No shelter cost incurred
Non-medical facilities other than Congregate Care Level 1,2,3 including maternity homes, licensed DV residences, or shelters for the homeless	OCFS licensed (DV residences) or <u>not</u> State licensed or certified	<ul style="list-style-type: none"> <input type="checkbox"/> OCFS licensed residential programs for victims of domestic violence <input type="checkbox"/> Small number of maternity homes <input type="checkbox"/> Shelters for the homeless families that are not regulated under 18 NYCRR 900 and certain shelters for single individuals.
Shelter for Families – Tier II	OTDA	Shelters for homeless families that are regulated under 18 NYCRR 900.

Public Home	operated by a city or county	A county run non-medical home for the needy in that county (only 5 or 6 facilities left in the State); includes certain homeless shelters for singles operated by the City of New York
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ATTACHMENT III

Personal Needs Allowances (PNA) in Non-Medical Facilities

Effective January 1, 2005

Facility Type	Certifying State Agency	Monthly PNA	Funding Source	Legal Authority
Congregate Care Level 1	OCFS, OMH, or OMRDD	\$111¹	SSI, SNA or FA	SSL 131-o
Congregate Care Level 2	DOH, OMH, OMRDD, or OASAS	\$130¹	SSI, SNA or FA	SSL 159.10
Congregate Care Level 3	OMRDD	\$89¹	SSI	18NYCRR 352.8 (c)(1)(ii)
State-Operated Community Residence or RCCA	OMH	\$127	OMH direct payment, SSI, or other income	MHL 31.29
State-Operated CR or IRA	OMRDD	\$127	SSI or other income	MHL 33.08
TA room and board situations	<u>not</u> State certified	\$45	SNA, FA or EAF	18NYCRR 352.8 (c)(1)(i)
Domiciliary Care For Veterans	USDVA	\$45	SNA, FA or EAF	
Non-medical facilities other than Congregate Care Level 1,2,3 including maternity homes, licensed DV residences, or shelters for the homeless	OCFS licensed (DV residences) or <u>not</u> State certified	\$45²	SNA, FA or EAF	
Shelter for Families – Tier II	OTDA	\$63³	SNA, FA or EAF	18NYCRR 900.17(a)
Public Home	operated by a city or county	Up to \$10⁴	Public Institutional Care	SSL 194.8

1. This PNA amount is the minimum established in SSL. SSI recipients with other income in addition to SSI are entitled to a PNA that includes any income disregarded by SSA in determining that recipient's SSI benefit. For example, SSI recipients receiving Social Security benefits will have a PNA that is \$20 higher than the amounts note above.
2. A TA funded PNA is not provided to residents of publicly operated facilities. This PNA is provided to each person in the family and only applies when the facility provides 3 meals a day.
3. This PNA, called *special needs allowance*, is provided to each person in the family and only applies when the Tier II facility provides 3 meals a day.
4. "This is not a PNA." The facility may provide up to \$10 a month for work performed by the resident.

ATTACHMENT IV

**Personal Needs Allowances (PNA) in Medical Facilities
Effective January 1, 2005**

Facility Type	Certifying State Agency	Monthly PNA	Funding Source	Legal Authority
Hospital	DOH	\$35	\$30 SSI + \$5 SSPNA ⁵	SSL 209.2-a
		\$40²	SNA or FA	18NYCRR 352.8(c)(1)(i)
		\$50⁸	MA-only PNA ¹⁰	SSL 366.2(a)(10)(ii)
Nursing Home	DOH	\$55	\$30 SSI + \$25 SSPNA ⁵	SSL 209.2-a
		\$40²	SNA or FA	18NYCRR 352.8(c)(1)(i)
		\$50	MA-only PNA ¹⁰	SSL 366.2(a)(10)(ii)
Psychiatric Center or Residential Treatment Facility	OMH	\$35	\$30 SSI + \$5 SSPNA ^{5,6}	SSL 209.2-a
			OMH direct payment	MHL 33.08
			MA-only PNA ^{6,10}	SSL 366.2(a)(10)(ii)
Chemical Dependence Inpatient Facilities	OASAS	\$35	\$30 SSI + \$5 SSPNA ⁵	SSL 209.2-a
		\$40²	SNA or FA	18NYCRR 352.8(c)(1)(i)
		No PNA⁹	Medicaid	SSL 366.1
Developmental Center or freestanding ICF-DD	OMRDD	\$35	\$30 SSI + \$5 SSPNA ⁵	SSL 209.2-a
			MA-only PNA ¹⁰	SSL 366.2(a)(10)(ii)
Free-standing Alcoholism Facility (Non-FP)	OASAS	(Footnote 7)	SSI	SSL 209.3
		\$40²	SNA or FA	18NYCRR 352.8(c)(1)(i)
		No PNA⁹	Medicaid	SSL 366.1

5. A State-administered \$25 *State Supplemental Personal Needs Allowance* (SSPNA) benefit is provided to SSI recipients living in nursing homes. A \$5 SSPNA benefit is provided to SSI recipients living in all other medical facilities.
6. Residents of such facilities can only qualify for SSI, or for Medicaid and the MA-only PNA, if they are under age 21 or age 65 or older.
7. Since these programs are not Title XIX certified, an SSI recipient in a privately operated facility would receive the SSI *living alone* benefit.
8. A PNA is provided only when the individual has been determined to be permanently absent from his/her home. When the individual is not permanently absent, an MA-only recipient is budgeted as though he or she is temporarily absent from his or her residence.
9. An MA-only recipient is budgeted as though he or she is temporarily absent from his or her residence.
10. Income deduction for Medicaid-only.