



**NEW YORK STATE  
OFFICE OF TEMPORARY AND DISABILITY**

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**Informational Letter**

**Section 1**

<b>Transmittal:</b>	08-INF-04
<b>To:</b>	Local Department of Social Services Commissioners
<b>Issuing Division/Office:</b>	Center for Employment and Economic Supports
<b>Date:</b>	January 24, 2008
<b>Subject:</b>	Personal Needs Allowance (PNA) in Non-Medical Facilities and Medical Facilities Desk Aid
<b>Suggested Distribution:</b>	Temporary Assistance Directors Food Stamp Directors TOP/CAP Coordinators Medical Assistance Directors Staff Development Coordinators Employment Coordinators
<b>Contact Person(s):</b>	Temporary Assistance: 1-800-343-8859, Temporary Assistance Bureau, extension 4-9344, Medicaid Local District Liaison: Upstate (518) 474-8216, NYC (212) 268-6855
<b>Attachments:</b>	Attachment 1: Personal Needs Allowance in Non-Medical Facilities Chart Attachment 2: Personal Needs Allowances in Medical Facilities Chart Attachment 3: Personal Needs Allowances in Non-Medical Facility-Facility Descriptions Attachment 4: Certifying State Agency and Funding Source Definitions
<b>Attachments Available On – Line:</b>	yes

**Filing References**

<b>Previous ADMs/INFs</b>	<b>Releases Cancelled</b>	<b>Dept. Regs.</b>	<b>Soc. Serv. Law &amp; Other Legal Ref.</b>	<b>Manual Ref.</b>	<b>Misc. Ref.</b>
06-INF-08 06 ADM-03 06 INF-33	07-INF-07	Section 352.8 (c) (1) Section 900.17 (a)			ABEL Transmittal 07-3

## **Section 2**

### **I. Purpose**

The purpose of this Informational Letter (INF) is to provide social services districts (SSDs) with updated charts that present the monthly Personal Needs Allowances (PNA) for Residents of Non-Medical Facilities (Attachment 1) and the PNA in Medical Facilities (Attachment 2). For informational purposes, this release includes two additional attachments, “Personal Needs Allowances in Non-Medical Facility - Facility Descriptions” (Attachment 3) and “Certifying State Agency and Funding Source Definitions” (Attachment 4).

### **II. Background**

When recipients of Temporary Assistance (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.

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

### **III. Program Implications**

Increased PNA amounts result in a higher TA standard of need and a higher PNA for a TA recipient residing in Congregate Care Level 1, 2 or 3 facilities. Use of the correct shelter type will generate the correct PNA. There is no need to re-budget these cases because of a January 2008 update to the Automatic Budgeting and Eligibility Logic (ABEL) subsystem. The October 30, 2007 ABEL Transmittal 07-3, “Congregate Care Facility TA and FS Benefit Changes” describes the mass re-budget. Attached for informational purposes are the PNA charts (Attachments 1, 2, and 3) and Certifying State Agency and Funding Source Definitions (Attachment 4).

### **IV. Medicaid 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 participation 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 Medicaid-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, and 3 facilities is updated automatically with the annual mass re-budgeting on Medicaid Budget Logic (MBL). (See MBL Transmittal 07-4 for additional information).

**Issued By**

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**Title:** Deputy Commissioner

**Division/Office:** Center for Employment and Economic Supports