

# FAMILY ASSISTANCE STANDARDS DESK GUIDE

AG/HH Size	1	2	3	4	5	6	7	<b>Maximum Dependent Care Deduction</b>	
FF Gross (GIS)-07/01/06	1197	1515	1782	2002	2185	2337	2466	FS/FF: \$200 for child under age 2 \$175 for age 2 and over.	
FF Net (CNS) -07/01/06	647	819	963	1082	1181	1263	1333	<b>Maximum Shelter Deduction</b> Non-special Household: <b>\$417 eff. 10/01/06</b> Special HH: No maximum, Homeless HH: \$143 BUA: \$126 Phone Standard: \$25	
FF Grant - 07/01/99	95	142	185	226	264	305	345		
FF Diff Pay - 07/01/99	140	192	232	242	291	305	345	FS Standard Deduction: HH size 1-3: \$134; HH size 4 - <b>\$139</b> HH size 5: <b>\$162</b> ; HH size 6+: <b>\$186</b>	
MNIS - 07/01/99	241	258	317	325	392	408	467		
AFDC-MO Addtl. Earning	*See Memorandum MA-02-12 dated 6/30/02							FS Standard Deduction: HH size 1-3: \$134; HH size 4 - <b>\$139</b> HH size 5: <b>\$162</b> ; HH size 6+: <b>\$186</b>	
Disregard - 07/01/02	100	171	217	229	292	294	328		
PLIS 200% QDWI	*TCS Children Std. (Reverification Only) 3/1/06							<b>FF Work Deduction</b> : \$150/indv; MA T - \$90/indv.  <i>Standard Maintenance Amount (SMA) - \$1650.00</i> <i>Excess Shelter Amount (ESA) 30% of SMA= \$495.00</i>	
03/01/06	1633	2200	2767	3333	3900	4467	5033		
PLIS 185% Pregnant, infant to age 1 - 03/01/06	1511	2035	2559	3083	3608	4132	4656	Spousal/Dependent Allocation - \$2489 Spousal Allocation from - \$19,908 to \$99,540	
PLIS 135% QI 03/01/06	1103	1485	1868	2250	2633	3015	3398		
PLIS 133% - 03/01/06								Full SSI/FBR Individual \$603; Couple \$904 Deemed to Child/Spouse \$301.50; Medicare Prem. \$88.50; Medicare Ded. \$952; MN income cap for Institutionalized \$1809	
Age 1 to 6th B-day	1086	1463	1840	2217	2594	2970	3347		
PLIS 120% SLMB	980	1320	1660	2000	2340	2680	3020	<b>Resources</b> Families First: \$2000; Food Stamps: \$2000 for non-special HH; \$3000 for elderly or disabled HH member; MN: \$2000 for 1 person, \$3000 for 2, add \$100 per additional individual; QMB/SLMB: \$4000 for 1 person; \$6000 for 2	
PLIS 100% QMB, age 6 to 19th B-day	817	1100	1383	1667	1950	2233	2517		
FS Gross - 10/01/06	1062	1430	1799	2167	2535	2904	3272	<b>Vehicles</b> Families First/MA T: \$4600 - equity/loan Food Stamps: All family vehicles are excluded	
FS Net - 10/01/06	817	1100	1384	1667	1950	2234	2517		
FS Allotment - 10/01/06	155	284	408	518	615	738	816	<b>Override Screens</b>  * <b>These overrides require supervisor approval</b> <b>AEOAG:</b> Change a new or delete a pending AG Change composition of pend AG (EA to DM) <b>AEWFT:</b> Change eligibility of AG (pass to fail) or (fail to pass) <b>AEWIF:</b> Change eligibility of individuals (pass to fail) or (fail to pass)	
FS SUA - 7/01/06	272	282	292	302	312	322	332		
<b>Electronic Benefit Availability</b> FS: Last 2 digits of case number determine date put on EBT card; FF: Available 1st day of month			00-09 <b>1st</b>	10-19 <b>2nd</b>	20-29 <b>3rd</b>	30-39 <b>4th</b>	40-49 <b>5th</b>		
			50-59 <b>6th</b>	60-69 <b>7th</b>	70-79 <b>8th</b>	80-89 <b>9th</b>	90-99 <b>10th</b>		
<b>Month</b>	<b>Client Sched</b>		<b>Adv Action</b>			<b>Cut-off</b>		* <b>These overrides do not require supervisor approval</b> <b>AEOCI:</b> Remove sibling with income MA C (Code child in question as RC and code 396) Transfer individual from MA J to MA T Transfer EA: MA T to MA A, MA B, MA D (Code parent in question as XA, code 597) <b>AEOMM:</b> Remove padded members MA J, MA T, MA L; Change parent's participation in MA T Remove eligible child in MA T  <b>Differential Pay:</b> time limit exemptions: child-only cases; disabled caretakers; caretaker caring F/T for disabled family member(s); caretaker 60 or older.  <b>Transitional Child Care:</b> An AG closed for any reason - except failure to cooperate w/CS gets 18 mos. TCC. Include newborn added to case. Must be income eligible! <b>Transitional Medicaid:</b> An AG closed for any reason - unless all AG members die or move out of state - gets 18 mos. of TM. Include newborn added. Caretaker not eligible, if non-cooperative with CS.	
January	01/13/06		01/19/06			01/20/06			
February	02/10/06		02/16/06			02/17/06			
March	03/10/06		03/17/06			03/17/06			
April	04/13/06		04/17/06			04/21/06			
May	05/12/06		05/18/06			05/19/06			
June	06/09/06		06/16/06			06/16/06			
July	07/14/06		07/20/06			07/21/06			
August	08/11/06		08/18/06			08/18/06			
September	09/15/06		09/18/06			09/22/06			
October	10/13/06		10/19/06			10/20/06			
November	11/09/06		11/17/06			11/17/06			
December	12/15/06		12/18/06			12/22/06			
<b>Hotline Numbers</b>		<b>Dial 9-1</b>		<b>MCO's</b>					
Service Center		866-311-4287		1	Omni				
Child Support		800-838-6911		2	Blue Care (not Knox/E TN)				
Medicare/Crossover		800-523-2863		6	UNISON (Better Health Plan)				
OCI		866-452-6482		8	John Deere				
MTO		800-342-3276		9	TLC Family Care Health				
QMB		800-624-5547		11	TennCare Select				
EBT		888-997-9444		14	Preferred Health Partnership				
Medicare		800-772-1213		15	Prudential				
TennCare		800-669-1851		19	Blue Care (Knox & E TN)				
TennCare Consumer Advocacy		800-722-7474		20	VHP Community Care				
Fax		615-383-9714							
ACCENT Helpdesk		800-253-8702							