



NEW YORK STATE
OFFICE OF TEMPORARY AND DISABILITY
ASSISTANCE
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 ALBANY, NY 12243-0001
Andrew M. Cuomo
Governor

Informational Letter

Section 1

Transmittal:	12-INF-04
To:	Local District Commissioners
Issuing Division/Office:	Center for Employment and Economic Supports
Date:	April 2, 2012
Subject:	Personal Needs Allowance (PNA) in Non-Medical and Medical Facilities Desk Aids
Suggested Distribution:	Temporary Assistance Directors Food Stamp Directors TOP/CAP Coordinators Medical Assistance Directors Staff Development Coordinators Employment Coordinators
Contact Person(s):	Temporary Assistance: 1-800-343-8859, Temporary Assistance Bureau, extension 4-9344 Medicaid Local District Liaison: Upstate (518) 474-8887, NYC (212) 417-4500
Attachments:	Attachment 1: Personal Needs Allowance in Non-Medical Facilities Chart Attachment 2: Personal Needs Allowance in Medical Facilities Chart Attachment 3: Personal Needs Allowance in Non-Medical Facility Descriptions Attachment 4: Certifying State Agency and Funding Source Definitions
Attachment Available On – Line:	Yes <input checked="" type="checkbox"/>

Filing References

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
06 INF-08 06 ADM-03 06 INF-33 09 INF-14		Section 352.8 (c)(1) Section 900.17 (a)			ABEL Transmittal 11-4 ABEL Transmittal 08-3 GIS Message 10 MA/026

Section 2

I. Purpose

This Informational Letter (INF) provides social services districts (SSDs) with updated charts that represent 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 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. The PNA amounts normally increase every year when the Social Security Administration (SSA) adjusts federal Supplemental Security Income (SSI) benefits to reflect the increase in the cost of living.

III. Program Implications

Temporary Assistance Implications

Increased PNA amounts result in a higher TA standard of need and higher PNAs for TA recipients 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 the November 1, 2011 ABEL Transmittal 11-4, “General Instructions to WMS Support for January 2012 Mass Changes,” describes the mass re-budget.

Attached for informational purposes are the PNA charts (Attachments 1 and 2), Facility Definitions (Attachment 3), and Certifying State Agency and Funding Source Definitions (Attachment 4).

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. **PNAs for Medicaid-only recipients in permanent absence status in medical facilities have not increased.**

Please note that for an “institutionalized spouse” residing in the community, who is enrolled in certain Home and Community Based waivers or who participate 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. **Effective January 1, 2012, the PNA is \$367.**

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. The TA standard of need/SSI benefit level for recipients residing in Congregate Care Level 1, 2, and 3 facilities will be automatically updated in Phase II of Medicaid mass re-budgeting (See GIS message 10 MA/026) for additional information.

Issued By

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Title: Acting Deputy Commissioner

Division/Office: Center for Employment and Economic Supports

**Personal Needs Allowances (PNA) in Non-Medical Facilities
Effective January 1, 2012**

Facility Type	Certifying State Agency	Monthly PNA	Funding Source	Legal Authority
Congregate Care Level 1	OCFS, OMH, or OPWDD	\$135¹	SSI, SNA or FA	SSL 131-o (Subd. 7)
Congregate Care Level 2	DOH, OMH, OPWDD, or OASAS	\$155¹	SSI, SNA or FA	SSL 159.10
Congregate Care Level 3	DOH, OPWDD	\$184¹	SSI, SNA or FA	18NYCRR 352.8 (c)(1)(ii)
State-Operated Community Residence or RCCA	OMH	\$155	OMH direct payment, SSI, or other income	MHL 31.29
State-Operated CR or IRA	OPWDD	\$155	SSI or other income	MHL 16.31
TA room and board situations	not 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 not 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 is the minimum established in Social Services Law. 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 noted 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 provided 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.

**Personal Needs Allowances (PNA) in Medical Facilities
Effective January 1, 2012**

Facility Type	Certifying State Agency	Monthly PNA	Funding Source	Legal Authority
Hospital	DOH	\$35	\$30 SSI + \$5 SSPNA ⁵	SSL 209.2-a
		\$40 ²	SNA or FA	18NYCRR 352.8(c)(1)(i)
		\$50 ⁸	MA-only PNA ¹⁰	SSL 366.2(a)(10)(ii)
Nursing Home	DOH	\$55	\$30 SSI + \$25 SSPNA ⁵	SSL 209.2-a
		\$40 ²	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
		\$40 ²	SNA or FA	18NYCRR 352.8(c)(1)(i)
		No PNA ⁹	Medicaid	SSL 366.1
Developmental Center or freestanding ICF-DD	OPWDD	\$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
		\$40 ²	SNA or FA	18NYCRR 352.8(c)(1)(i)
		No PNA ⁹	Medicaid	SSL 366.1

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 provided 3 meals a day.

5. A State-administered \$25 State Supplemental Personal Needs Allowance (SSPNA) benefit is provided only 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 Medicaid and the MA-only PNA, if they are under age 21 or age 65 or older.

7. Since these programs do not get Federal Medicaid, 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.

PNAs in Non-Medical Facilities – Facility Descriptions

Effective January 1, 2012

Facility Type	Certifying State Agency	Facility Descriptions
Congregate Care Level 1	OCFS, OMH, or OPWDD	Family-like smaller residential programs serving the developmentally disabled, mentally ill, and the frail elderly
Congregate Care Level 2	DOH, OMH, OPWDD, or OASAS	<ul style="list-style-type: none"> ○ DOH certified residences for adults (serving the frail elderly and the mentally ill) ○ OMH certified community residences (principally small group homes and supported apartments) ○ OPWDD certified community residences (principally small group homes and supported apartments) ○ OASAS Residential programs certified by OASAS under Title 14 NYCRR Part 819 as either: A) Certified Intensive Residential Rehabilitation; B) Community Residential; or C) Supportive Living Programs.
Congregate Care Level 3	DOH, OPWDD	<ul style="list-style-type: none"> ○ DOH Certified Adult Homes and Enriched Housing Programs ○ OPWDD Certified 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	OPWDD	OPWDD operated (State owned/rented and State employees) small group homes, programmatically similar to Congregate Care Level 2 facilities.
TA room and board situations	not 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 not State licensed or certified	<ul style="list-style-type: none"> ○ OCFS licensed residential programs for victims of domestic violence ○ Small number of maternity homes. ○ 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.

Certifying State Agency and Funding Source Definitions

Certifying Agency Definitions	
OCFS	Office of Children and Family Services
OMH	Office of Mental Health
OPWDD	Office for People With Developmental Disabilities (formerly OMRDD)
DOH	Department of Health
OASAS	Office of Alcoholism and Substance Abuse Services
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 Families
VA	Veterans Affairs