



Nathan Deal, Governor

Frank W. Berry, Commissioner

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MEMORANDUM

TO: Alternative Living Services (ALS) Providers

FROM: Brian Dowd, Program Director, Waiver Programs
Department of Community Health *Brian Dowd*

DATE: October 17, 2017

SUBJECT: Supplemental Security Income (SSI) and Social Security Payment Increases for 2018

Effective January 1, 2018, SSI and Social Security recipients will receive a 2% cost-of-living increase in their monthly payments. The 2018 SSI payments will be \$750.00 for single individuals and \$1,125.00 for couples.

Effective January 1, 2018, a resident's personal needs allowance will change also. Please refer to the charts below when determining personal needs allowances and room and board payments:

SINGLE INDIVIDUALS

<u>LEVELS</u>	<u>CURRENT LEVELS</u>	<u>JANUARY 1, 2018</u>
Gross Monthly Income	\$735.00	\$750.00
Personal Needs allowance	\$115.00*	\$118.00*
Room & Board Payment	\$620.00	\$632.00 (client to provider)

* The ALS individual who receives Social Security and SSI will have \$138.00 for the personal needs allowance.

COUPLES (both on Medicaid)

<u>LEVELS</u>	<u>CURRENT LEVELS</u>	<u>JANUARY 1, 2018</u>
Gross Monthly Income	\$1,103.00	\$1,125.00
Personal Needs Allowance	\$218.00	\$221.00
Room & Board Payment	\$885.00	\$897.00



**Alternative Living Services Providers
2018 SSI/SS Payment
Page 2**

As indicated in the Department of Community Health, Healthcare Facilities Regulations Division, Rules and Regulations for Personal Care Homes, **the provider must give written notices to residents and their sponsors sixty (60) days prior to the effective date of increased room and board payments.** The ALS provider should amend all Admission Agreements to reflect the payment level changes as soon as possible, **but must do so no later than January 1, 2018.** Each amended agreement must be signed by the provider and the client.


While there should be no change to resident Medicaid eligibility, if the Department of Community Health (DCH) terminates a client's Medicaid benefits effective January 1, 2018, the provider must refer the individual to the county Department of Family and Children Services (DFCS) for a continuing Medicaid eligibility determination. When referring a client to DFCS, ask the client or representative to provide the following information to the Medicaid eligibility worker:

- individual's SSI Medicaid number
- effective date of Medicaid termination or copy of the SSI termination letter
- name of the client's care coordinator

The provider also advises the care coordinator of the referral to DFCS, and if possible, sends a copy of the SSI termination letter to the care coordinator. Once DFCS determines the client's continuing Medicaid eligibility, the caseworker will send a Medicaid certification letter to the care coordinator and the client. The letter will include the client's Medicaid number and the cost share amount. The care coordinator will adjust the Service Authorization Forms to reflect changes.

Should you have any questions or need additional information, please contact your assigned CCSP specialist at 404.657.1999.

BD:jc

Cc: Thomas Underwood, CCSP Unit Manager, DCH 
Ginger Henry, DFCS
AAA Directors
CCSP Care Coordinators
LTCO Coordinators
Elderly Legal Assistance Projects