



State of Florida
Department of Children and Families

Charlie Crist
Governor

George H. Sheldon
Secretary

DATE: May 29, 2009

TO: Regional Directors

THROUGH: Elwood McElhane, Acting Assistant Secretary for Administration
John K. Cooper, Acting Assistant Secretary for Operations
David L. Fairbanks, Assistant Secretary for Programs

FROM: Alan Abramowitz, State Director, Office of Family Safety

SUBJECT: 2009 Federal Poverty Levels Guidelines - **Effective July 1, 2009**

PURPOSE: This memorandum provides 2009-2010 federal poverty level guidelines that take effect July 1, 2009.

BACKGROUND: The United States Secretary of the Department of Health and Human Services updates at least annually the poverty guidelines. The poverty guidelines are used as an eligibility criterion for a number of federal programs including the Temporary Assistance for Needy Families (TANF).

For many years, the Department has exercised the flexibility allowed under federal regulation on TANF uses. In child welfare, we use TANF to help pay for administrative costs of the hotline, child protective investigations, and case management staff. This necessitates an eligibility determination for the child and family at investigation and every 12 months thereafter. The TANF 200% of Eligibility must be determined every 12 months for children receiving protective services in their own home or in the home of a relative. The one-page form, TANF 200% of Eligibility, must be completed to document TANF eligibility.

Additionally, TANF helps fund maintenance adoption subsidy for (eligible) children who are not eligible under Title IV-E. Please refer to CFOP 175-93, TANF Uses in Child Welfare/Community Based Care.

We anticipate having the TANF 200% of Eligibility documentation process supported in FSFN with Release 2b. Until it is implemented, the manual forms and processes will continue.

New Information: Effective July 1, 2009, the 200 percent of the federal poverty levels will increase for TANF-funded programs in Family Safety.

1317 Winewood Boulevard, Tallahassee, Florida 32399-0700

Mission: Protect the Vulnerable, Promote Strong and Economically Self-Sufficient Families, and Advance Personal and Family Recovery and Resiliency

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ACTION REQUIRED: Please share this memorandum and attachments with all appropriate staff in your circuits, sheriff offices, and community-based care lead agencies. Effective July 1, appropriate staff must stop using the 2008 federal poverty level figures and related forms, and replace them with 2009 figures attached to this memorandum.

CONTACT INFORMATION: If you have any questions or need clarification regarding this memorandum, please contact Mukweso Mwenene of my staff at 850.488.8762. Mr. Mwenene's electronic mail address is Mukweso_Mwenene@dcf.state.fl.us.

Attachments

cc: Angie Boyer, Acting Comptroller
Walter Sachs, Staff Director, Contracts



**2009/2010
Request for TANF Funds/Eligibility Determination**

Eligibility Requirement: To be eligible for the TANF funds: the child/family income must be less than 200% of the federal poverty level; the child must be living in the home of a parent or other specified relative; the individual must be a United States citizen or qualified non-citizen; and the child/family must be residing in Florida.

REGION/CBC Agency _____

Date of Request: _____

Table 1: Information on Children and Adults in Household.

#	Name	Social Security #	Date of Birth	Citizen or Qualified Noncitizen
1				<input type="checkbox"/> Yes <input type="checkbox"/> No
2				<input type="checkbox"/> Yes <input type="checkbox"/> No
3				<input type="checkbox"/> Yes <input type="checkbox"/> No
4				<input type="checkbox"/> Yes <input type="checkbox"/> No
5				<input type="checkbox"/> Yes <input type="checkbox"/> No

1) Is (are) child(ren) living with a parent or other specified relative?

- YES if Yes, continue with item # 2; list name of relative and relationship to child: _____ / _____
- NO if No, child is not eligible for TANF

2) Is (are) child(ren) residing in Florida?

- YES if Yes, continue with item # 3
- NO if No, child is not TANF eligible

3) Is the family currently receiving temporary cash assistance under WAGES or the Relative Caregiver Program?

- YES if Yes, *financial criteria met*, submit to supervisor/designee for TANF eligibility determination.
- NO if No, continue with item # 4.

4) Family Income. Information obtained from:

- Parent/relative (circle one: Self declaration or documented: _____)
list document, i.e. pay stub, etc.
- Collateral Source: _____
List the source

Using information obtained from the parent or specified relative or through available/collateral contact information, make the "best determination possible" of the family's gross income. When income information is not obtained from the family it may be obtained from the employment history of responsible adults or any prior determination of eligibility for public assistance [i.e., Food Stamps Temporary Cash Assistance (WAGES)].

Determine: (A) What is the family size? _____

(B) Estimated Family Income: \$_____ per month year

Table 2: 200% of the FPL by family size: Effective Date July 1, 2009.
(For households larger than 10, add \$624 per month or \$7,480 per year for each additional household member.)

	HOUSEHOLD SIZE AND FAMILY INCOME									
Household size	1	2	3	4	5	6	7	8	9	10
Monthly Income	1,805	2,429	3,052	3,675	4,299	4,922	5,620	6,169	6,792	7,415
Yearly income	21,660	29,140	36,620	44,100	51,580	59,060	67,440	74,020	81,500	88,980

SIGNED: _____

Date: _____

Based on the household information above, the family income is: (check one)

- less than 200% of the FPL...CHILD/FAMILY IS ELIGIBLE
- at or above 200% of the FPL... CHILD/FAMILY IS INELIGIBLE

SIGNED: _____

Date: _____

Supervisor or Designee

Child(ren)'s eligibility was entered into FSFN on (the date): _____ Person entering information: _____

INSTRUCTIONS

Request for TANF Funds/Eligibility Determination

PURPOSE: TANF funding in Family Safety is used to pay the administrative costs of the Florida Abuse Hotline, eligible staff activities of protective investigators and protective services counselors, services for children who are in their own homes with a parent or specified relative and who are at imminent risk of removal and for services to expedite reunification. The information requested in this form is used to determine the child/family's eligibility for TANF.

INFORMATION REQUESTED:

1. Enter the name of the region/CBC in which the child/family resides.
2. Enter the date of request (date the form is initiated).
3. Enter the names of all the family members/children in the household, their social security numbers and dates of birth. Indicate whether each individual is a United States citizen or qualified noncitizen.

ELIGIBILITY:

1. When the application is being completed at the time of the investigation, check "YES" if the child is being removed from the home of a parent or specified relative; otherwise, check "NO". When the application is being completed to provide TANF funded protective services in the child's home or the home of a specified relative, check "YES" if the child is currently living with a parent or **specified** relative, otherwise check "NO".

If "YES", continue with Item # 2. Write the name of the specified relative with whom the child(ren) is(are) living and the relationship to the child(ren).

If "NO" the child is ineligible for TANF funding.

2. Check "YES" or "NO"

IF "YES," child/family meets residency criteria, continue with Item # 3

IF "NO," child is ineligible for TANF funding.

3. Check "YES" or "NO"

IF "YES," child/family meets financial criteria; submit form to supervisor or designee for TANF eligibility determination.

IF "NO," Continue with Item # 4.

4. **FAMILY INCOME:** If the family income information is "documented", list the type of documentation. When child is in the home of his/her parent(s) the income of the child(ren) and child's parent(s) living in the home is counted. The family size will include the parent(s) and the child(ren). When child is in the home of a non-parent specified relative, only the child's income is counted and each child will be considered a family on "one". Two hundred percent (200%) of the FPL by family size is listed in the chart.

Note: The source of the income information must be documented on the request form. When efforts to obtain income information are unsuccessful, the child will be ineligible for TANF funding. Indicate in the top margin of the request form that income information could not be obtained then initial and date.

The person completing the form - parent, adult non-parent specified relative, CPI, case manager or region/circuit/CBC designee - must sign and date the form.

The supervisor or region/circuit/CBC designee conducts the eligibility determination by indicating whether the family's income is less than 200% of the FPL for the household size and marks the appropriate space whether the child/family is eligible for TANF 200% funds .

The supervisor or region/circuit/CBC designee must sign and date the form.

DISTRIBUTION:

Original must remain in child's file (copies can be used when the family has more than one child)

Copy to region/circuit/CBC Revenue Maximization Unit, as appropriate.

CODING:

The child's eligibility must be recorded in FSFN. When the child's eligibility has not been determined, the child must be coded as "TANF Ineligible."

2009 TANF 200% of Federal Poverty Level

TANF Maintenance Adoption Subsidy Desk Reference

Year	2009	2008	2007	2006	2005	2004	2003	2002	2001
Monthly Income Threshold for Child ¹	1,805	1,734	1,702	1,634	1,595	1,552	1,497	1,477	1,432

¹ For TANF MAS, only the income of the child is considered in the eligibility determination; i.e considered a “Child Only” case.