

September 11, 2023

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

**EXECUTIVE SUMMARY**

**ALL COUNTY INFORMATION NOTICE NO. I-48-23**

This notice releases the United States Department of Agriculture, Food and Nutrition Service, Federal Fiscal Year (FFY) 2024 Cost-of-Living Adjustments (COLAs) for the period of October 1, 2023 through September 30, 2024. This notice provides the maximum allotments, deduction amounts, including the Standard Utility Allowance (SUA) and Limited Utility Allowance (LUA), maximum resource limits and income eligibility standards for FFY 2024. This notice also releases the updated *Notice to All CalFresh Recipients* (CF 11) which provides clients information about the FFY 2024 COLAs.



KIM JOHNSON  
DIRECTOR

CALIFORNIA HEALTH & HUMAN SERVICES AGENCY  
**DEPARTMENT OF SOCIAL SERVICES**  
744 P Street • Sacramento, CA 95814 • [www.cdss.ca.gov](http://www.cdss.ca.gov)



GAVIN NEWSOM  
GOVERNOR

September 11, 2023

ALL COUNTY INFORMATION NOTICE NO. I-48-23

TO: ALL COUNTY WELFARE DIRECTORS  
ALL CALFRESH PROGRAM SPECIALISTS  
ALL CONSORTIUM PROJECT MANAGERS  
ALL QUALITY CONTROL PROGRAM COORDINATORS

SUBJECT: CALFRESH COST-OF-LIVING ADJUSTMENTS EFFECTIVE  
OCTOBER 1, 2023

REFERENCE: [UNITED STATES DEPARTMENT OF AGRICULTURE, FOOD  
AND NUTRITION SERVICE SNAP - FISCAL YEAR 2024 COST-  
OF-LIVING ADJUSTMENTS; ALL COUNTY LETTER 19-38;](#)  
APPROVAL OF CALIFORNIA'S SUPPLEMENTAL NUTRITION  
ASSISTANCE PROGRAM INDIVIDUAL UTILITY ALLOWANCES  
DATED AUGUST 9, 2023, EFFECTIVE OCTOBER 1, 2023

This notice informs County Welfare Departments (CWDs) that the United States Department of Agriculture, Food and Nutrition Service (FNS) has issued the Federal Fiscal Year (FFY) 2024 Cost-of-Living Adjustments (COLAs) for the period of October 1, 2023, through September 30, 2024. This notice provides the maximum allotments, deduction amounts, including the Standard Utility Allowance (SUA) and Limited Utility Allowance (LUA), maximum resource limits and income eligibility standards for FFY 2024. This notice also releases the updated *Notice to All CalFresh Recipients* (CF 11), which provides clients with information about the FFY 2024 COLAs.

FFY 2024 Maximum Allotments

The maximum allotment by household size is listed in the following table (ATTACHMENT I):

**FFY 2024 Maximum Allotment by Household Size:**

1	2	3	4	5	6	7	8	+Each Additional Person
\$291	\$535	\$766	\$973	\$1,155	\$1,386	\$1,532	\$1,751	\$219

FFY 2024 Minimum Allotment for Households of One and Two Members

The minimum benefit allotment amount remains at \$23.

FFY 2024 Maximum Shelter Deduction

The maximum shelter deduction for households without an elderly or disabled member increased from \$624 to \$672. (ATTACHMENT I)

FFY 2024 Homeless Shelter Deduction

The homeless shelter deduction increased from \$166.81 to \$179.66. (ATTACHMENT I)

FFY 2024 Standard Deduction

The standard deduction by household size is listed in the table below (ATTACHMENT I):

**FFY 2024 Standard Deduction by Household Size:**

<b>Household Size</b>	<b>Standard Deduction</b>
1 to 3 persons	\$198
4 persons	\$208
5 persons	\$244
6 or more persons	\$279

FFY 2024 Standard Utility Allowance (SUA)

The SUA amount increased from \$560 to \$596 (ATTACHMENT I). A household that has heating and cooling costs separate from their rent or mortgage is eligible for the SUA.

FFY 2024 Limited Utility Allowance (LUA)

The LUA amount increased from \$150 to \$158 (ATTACHMENT I). A household that does not qualify for the SUA but incurs expenses for at least two separate utilities other than heating and cooling, is eligible for the LUA.

#### FFY 2024 Telephone Utility Allowance (TUA)

The TUA amount has increased from \$18 to \$19 (ATTACHMENT I). A household that is not eligible for the SUA or LUA, but incurs a telephone expense, or an expense for an equivalent form of communication, is eligible for the TUA.

#### FFY 2024 Maximum Resource Limits

The resource limit for households remains at \$2,750. The resource limit for households where at least one person is age 60 or older or is disabled remains at \$4,250. As a reminder, the resource limit for elderly or disabled households also serves as the threshold for substantial lottery or gambling winnings.

#### FFY 2024 Income Eligibility Standards

Income eligibility standards are listed in ATTACHMENT I, which includes charts displaying the “Net Monthly Income Eligibility Standards,” “Gross Monthly Income Eligibility Standards for Households Where Elderly/Disabled Are a Separate Household,” and “Gross Monthly Income Eligibility Standards for Modified Categorical Eligibility (MCE)/Broad-Based Categorical Eligibility (BBCE).”

#### Tables of Benefit Issuance

To request a copy of the bracketed issuance tables that are effective October 1, 2023, please send an e-mail request to [CalFreshPolicy@dss.ca.gov](mailto:CalFreshPolicy@dss.ca.gov).

#### FFY 2024 COLA Notice

The CF 11, “Notice to All CalFresh Recipients,” which informs all CalFresh households of the impact of the COLA on the maximum allotment amounts and standard deduction as well as the new SUA and LUA amounts, has been updated and is included as an attachment to this letter. Prior to duplication, CWDs must ensure that the CF 11 notice contains the county-specific address that clients may use to mail state hearing requests.

To increase awareness of program reporting requirements, the income reporting threshold (IRT) levels have been included. As stated in ACL 15-42, issued April 15, 2015, households are required to report mid-period when their income exceeds their IRT. The CalFresh IRT is the amount of household gross income that renders most households ineligible for CalFresh benefits. The IRT was set at 130 percent of the federal poverty level (FPL) per household size.

In accordance with [MPP Section 63-504.39](#), CWDs must inform all households on or before October 1, 2023, of the new CalFresh benefit amounts and deductions. The CWDs may opt to use the CF 11 or can notify households via other mass noticing practices, such as disseminating information through news or other media outlets, using social media, county websites, posters in lobbies or other locations frequented by

CalFresh households. **Households must be informed of the changes no later than October 1, 2023.**

### **COPIES AND TRANSLATIONS**

Forms referenced in this letter are available on the [CDSS Forms-Brochures web page](#).

When CDSS completes all translations of a form, they are posted on the [Translated Forms and Publications web page](#). When made available by CDSS, forms translated into an individual's preferred language must be provided to the individual pursuant to [MPP Section 21-115.2](#). For questions on translated materials, please contact Language Services at (916) 651- 8876. If translations are not available, recipients who have elected to receive materials in languages other than English should be sent the English version of the form or notice along with the [GEN 1365-Notice of Language Services](#) and a local contact number.

Per California Code Section 7290, et seq., the CWDs must ensure that effective bilingual services are provided. This requirement may be met through utilization of paid interpreters, qualified bilingual employees, and qualified employees of other agencies or community resources. These services must be provided, free of charge, to the applicant/recipient. If CDSS does not provide translations of a form, it is the county's responsibility to read and interpret the form if an applicant or recipient requests it.

Additionally, the CWDs must provide auxiliary aids and services to persons who are deaf or hearing impaired, or persons with impaired speech, vision, or manual skills, where applicable. More information regarding provisions for services to applicants and recipients who have limited English proficiency or who have disabilities can be found in [MPP Section 21-115](#) and [ACL 19-45](#) issued May 16, 2019.

This ACL and other CDSS letters and notices are available on the internet at:  
<http://www.cdss.ca.gov/inforesources/Letters-and-Notices>

If you have any questions or need additional guidance regarding the information in this letter, please contact the CalFresh Policy and Employment Bureau at [CalFreshPolicy@dss.ca.gov](mailto:CalFreshPolicy@dss.ca.gov).

Sincerely,

### ***Original Document Signed By***

ANDREA BRAYBOY, Chief  
CalFresh and Nutrition Branch  
Family Engagement and Empowerment Division

Attachments

**CALFRESH PROGRAM  
OCTOBER 1, 2023 – SEPTEMBER 30, 2024  
California Monthly Income Eligibility Standards  
Allotments and Deductions**

**Net Monthly Income Eligibility Standards (100% of Poverty Level)**

Household Size	Net Income
1	\$1,215
2	1,644
3	2,072
4	2,500
5	2,929
6	3,357
7	3,785
8	4,214
Each Additional Member	+429

**Gross Monthly Income Eligibility Standards for Households Where Elderly/Disabled Are a Separate Household (165% of Poverty Level)**

Household Size	Gross Income
1	\$2,005
2	2,712
3	3,419
4	4,125
5	4,832
6	5,539
7	6,246
8	6,952
Each Additional Member	+707

**Maximum CalFresh Allotments**

Household Size	Allotment
1	\$291
2	535
3	766
4	973
5	1,155
6	1,386
7	1,532
8	1,751
Each Additional Member	+219

**Gross Monthly Income Eligibility Standards for Semi-Annual Reporting (SAR) (130% of Poverty Level)**

Household Size	Gross Income
1	\$1,580
2	2,137
3	2,694
4	3,250
5	3,807
6	4,364
7	4,921
8	5,478
Each Additional Member	+557

**Gross Monthly Income Eligibility Standards for Modified Categorical Eligibility (MCE)/Broad-Based Categorical Eligibility (BBCE) (200% of Poverty Level)**

Household Size	Gross Income
1	\$2,430
2	3,288
3	4,144
4	5,000
5	5,858
6	6,714
7	7,570
8	8,428
Each Additional Member	+858

**Deduction**

Standard Deduction	\$198 (HH size 1-3) \$208 (HH size 4) \$244 (HH size 5) \$279 (HH size 6+)
Maximum Shelter Deduction	\$672
SUA	\$596
LUA	\$158
TUA	\$19
Homeless Household Shelter Allowance	\$179.66

## NOTICE TO ALL CALFRESH RECIPIENTS

### IMPORTANT — PLEASE READ

Effective October 1, 2023, State and Federal laws provide for the following:

**Maximum CalFresh Allotments:** These are the benefit amounts your household will receive based on your household size if your household has no income

**Income Reporting Threshold (IRT):** You must report any time your household’s total monthly income is more than your current IRT. The report must be made within 10 days after the change in income is discovered.

The max allotments and IRTs are:

	HH SIZE 1	HH SIZE 2	HH SIZE 3	HH SIZE 4	HH SIZE 5	HH SIZE 6	HH SIZE 7	HH SIZE 8	Household Size Each Additional Person
<b>Max</b>	\$291	\$535	\$766	\$973	\$1155	\$1386	\$1532	\$1751	+\$219
<b>IRT</b>	\$1,580	\$2,137	\$2,694	\$3,250	\$3,807	\$4,364	\$4,921	\$5,478	+\$557

- The maximum excess shelter deduction will increase from \$624.00 to \$672.00.
- The homeless shelter allowance will increase from \$166.81 to \$179.66.
- The Standard Utility Allowance (SUA) of \$560.00 will increase to \$596.00.
- The Limited Utility Allowance (LUA) of \$150.00 will increase to \$158.00.
- The Telephone Utility Allowance (TUA) of \$18.00 will increase to \$19.00.

If the SUA or the LUA was used as part of your shelter deduction before October 1, and if you have had no changes in your CalFresh case, your CalFresh benefits may change after October 1.

The amount of the change depends on your household. You will be told about any change in your benefits in a separate notice.

**Resource Limits:**

Please note that the elderly/disabled household resource limit also serves as the threshold for substantial lottery or gambling winnings.

HOUSEHOLD RESOURCE LIMIT	ELDERLY/DISABLED HOUSEHOLD RESOURCE LIMIT
\$2,750	\$4,250

**Standard Deductions for FFY 2024:**

These are the standard deduction amounts your household will receive based on your household size.

HOUSEHOLD SIZE	STANDARD DEDUCTIONS
1 to 3 persons	\$198.00
4 persons	\$208.00
5 persons	\$244.00
6 or more persons	\$279.00

If you think we made a mistake calculating your October CalFresh benefits due to the new allotment amounts or the SUA/LUA, you may ask for a state hearing within 90 days of when you got this letter by writing to:

or you may call toll free: 1-800-952-5253. If you are deaf and use TDD, call 1-800-952-8349. When you ask for a state hearing, you must tell us why you think we made a mistake. You can speak for yourself at the hearing, or you can have a friend, attorney, or other person speak for you. If you need someone to speak for you, you must get someone to help you. You may ask for free legal aid at a legal aid office in your area.