

NEW YORK STATE

DEPARTMENT OF SOCIAL SERVICES

40 NORTH PEARL STREET, ALBANY, NEW YORK 12243

BARBARA B. BLUM
Commissioner



[An Administrative Directive is a written communication to local Social Services Districts providing directions to be followed in the administration of public assistance and care programs.]

ADMINISTRATIVE DIRECTIVE

TRANSMITTAL NO.: 81 ADM-14
[Medical Assistance]

TO: Commissioners of Social Services

SUBJECT: Order of the U.S. District Court in the Case of Calkins et. al. v. Blum

DATE: April 13, 1981

SUGGESTED DISTRIBUTION: All Medical Assistance Staff

Effective Immediately

CONTACT PERSON: Any questions concerning this release should be directed to your Medical Assistance County Representative by calling (800) 342-3715, Extension 4-9141.

I. PURPOSE:

The purpose of this Administrative Directive is to advise local social services districts of the Order of the U.S. District Court for the Northern District of New York in the case of Calkins et. al. v. Blum and to direct local social services districts to take appropriate action which will be necessary to carry out the requirements of that Order.

II. BACKGROUND:

In January of 1974, New York State entered into an agreement, with the Social Security Administration, for the determination of eligibility for medical assistance for individuals in receipt of Federal Supplemental Security Income benefits and/or State Supplements thereto.

In January 1977, the Department of Health, Education and Welfare implemented regulations regarding eligibility determination for SSI-related medically needy applicants and recipients for states in which persons eligible for SSI were automatically eligible for Medicaid. The Department of Health, Education and Welfare did not advise the

FILING REFERENCES

Previous ADMs /INFs	Releases Cancelled	Dept. Regs.	Social Services Law and Other Legal References	Bulletin/Chapter Reference	Miscellaneous References
74 ADM-107		18 NYCRR§360.5	SSL §366	Bulletin 182	SSI Claims Manual

States as to the nature of the required changes, nor did they issue implementing instructions.

On August 29, 1980 New York State terminated its eligibility determination agreement with the Social Security Administration, and as such, is no longer in a position in which it is believed that these regulatory requirements are applicable.

III. PROGRAM IMPLICATIONS:

In the Calkins et. al. v. Blum Decision, the U.S. District Court for the Northern District of New York established a class of individuals who are affected by the Order. The class may be in receipt of or eligible for Medicaid benefits for the medically needy in New York State, are aged, blind or disabled and reside with their spouses and/or minor children. In addition, their spouses and their minor children who reside with them are considered members of this class.

For members of this class, the Court has decided that for the period prior to the termination of the State SSA eligibility determination agreement, the Department's failure to use SSI budgeting methodology to determine medical assistance eligibility for medically needy aged, blind and disabled persons was illegal. The Department's failure to provide these persons with a choice of method between SSI determination and the determination applicable to families and children where there is no SSI relationship was similarly illegal.

The Court ordered the Department to give notice to local social services districts that for August 1980 and the three months preceding August they will be required to review the eligibility of all active medical assistance cases and all denials during this period of time to determine whether any members of the class were affected.

The Court further ordered that after notification of class members who were affected and upon their request, local social services districts shall provide the members of the class with their choice of budgeting methodologies between the SSI budgetary method and the method used to determine medical assistance eligibility for families and children where there is no SSI relationship. In addition, the Court ordered that local social services districts must inform the class members of the results of the computation under the different budget methodologies and allow them to make an informed choice of the method which is preferable to them.

IV. REQUIRED ACTION:

As a result of the Decision and Order in Calkins et. al. v. Blum a number of actions are required on the part of local social services districts. These are as follows:

A. Identification of Affected Class

1. Local social services districts shall review all under-care excess income medical assistance-only cases which were active in the months May, June, July and/or August 1980 and all denials for those four months to determine whether there are any members of the affected class in either of those two groups. This would include both individuals whose eligibility as a result of utilization of a six months excess continued through any of the four months previously mentioned and individuals who applied in September, October and November for retroactive coverage during the May-August period. (It should be noted that there was an increase in medical assistance eligibility levels on July 1, 1980 as well as an increase in Social Security benefit levels on that same date.)
2. In the event that any members of the affected class are found upon this review, the local social services district shall provide them with notification by May 15, 1981 of their membership in the affected class and that upon their request, within 45 days of the date of the notice, the local social services district will redetermine their eligibility for medical assistance or the amount of excess income which will be applied toward the cost of their care, using the methodologies required in the Court Order, and providing them with their choice of category. (Required letter attached.)
3. Upon the verbal or written request of the affected class member, the local social services district shall determine eligibility on the basis of the requirements in the Court Order. The verbal or written request shall be considered an application for medical assistance and entitles the applicant to all the rights of any other applicant for medical assistance including timeliness of decision, notification of decision and right to Fair Hearing.
4. The local social services district shall determine the eligibility of members of the affected class according to the requirements of the Court Order based on the information in the original application for medical assistance upon which the request is made as well as any additional information which is necessary to properly determine eligibility.

In the event that the affected class member does not feel that the re-computation is beneficial to him, he should be allowed to withdraw, in writing, his request for re-computation at this point.

5. Local social services districts shall keep records of the number of members of the affected class identified, the number of notifications and dates sent, the number of requests for reconsideration which are made, any withdrawals and the results of the reconsiderations, such as, newly established eligibility or changes in the amount of excess income.

B. Recomputation of Eligibility Under the Requirements of the Court Order

There are three basic types of cases which are affected by the Court Order in Calkins v. Blum. These are as follows:

1. Two parent households with children where one or both of the parents are aged, blind or disabled.
2. Single parent households with children where the parent is aged, blind or disabled.
3. Couples without children where one member of the couple is aged, blind or disabled and the other is not. (SSI Cash Recipients and their families are not members of the class.)

Following are the procedures which are to be used for each of the three types of cases which are affected by the Court Order.

1. Two parent households where one or both parents are aged, blind or disabled and minor dependent children are present must be budgeted according to SSI budgetary methodology in determining the eligibility of the SSI related parents. This is accomplished by using the medical assistance income exemption level for a two person household after income has been allocated according to SSI rules and appropriate disregards have been given.
 - a. Both parents are SSI related --

Where both parents are SSI related, all earned and unearned income of both parents, after the disregards contained in Department Regulation Section 360.5 for aged, blind or disabled persons are given, is used against the medical assistance income standard for a two person household in determining the eligibility or the amount of excess income of both of the SSI parents.

In determining the medical assistance eligibility of the entire household, family size is determined by counting the number of children in the application in addition to both parents and establishing the appropriate medical assistance income standard according to that family size.

After the application of any disregards in Department Regulation §360.5 which apply to ADC related individuals or to children (including work-related expenses from earned income and including the income of the children, if any) the net available income is compared against the medical assistance income standard for the appropriate household size. The eligibility of the SSI related parents or the amount of their excess income to be applied toward the cost of medical care is dependent upon the SSI determination. The eligibility of the children or the amount of their excess income to be applied toward the cost of medical care is based upon the determination for the whole family against the rules which apply to families and children. One or both of the parents may opt to be included with the children. (For sample budgetary methodology, see Example 1a.)

- b. Two parent households with children in which only one parent is aged blind or disabled --

In the event that all the income of the parents belongs to the SSI-related parent, eligibility is determined just the same as it would be in the previous section 1a. The only difference is that only the SSI related parent's eligibility or amount of excess income is dependent upon this determination. The non-SSI-related parent and children's eligibility is dependent on the determination for families and children.

In those instances, where the non-SSI related parent has income, it is necessary to allocate a portion of that income for the support of the children. This is accomplished by first allocating \$119 per month (\$104 prior to July 1, 1980) to each child. This allocation comes first from the unearned income of the non-SSI related parent and then from the earned income of the non-SSI related parent. This \$119 or \$104 figure is offset on a dollar for dollar basis by any income which the children have.

Once the allocation process is complete, any remaining income on the part of the non-SSI related parent is deemed to the SSI-related parent. This income, both earned and unearned is combined with the income of the SSI related parent and appropriate SSI disregards according to Department Regulation Section 360.5 are applied to it. The net available income resulting from this method of calculation is then compared to the two person medical assistance income standard in determining

eligibility or the amount of excess income to be applied toward the cost of medical care of the SSI related parent only.

In determining the eligibility of the remaining household members which include the non-SSI related parent and the children, the family household is established to include the SSI-related parent, the non-SSI related parent and the children. The appropriate medical assistance income standard for households of that size is obtained. The income of all household members is considered by the methods shown in Department Regulations Section 360.5 which are applicable to families and children. The eligibility of the remaining family members is based on this determination, in the event that they are all related to a Federal category of assistance. In the event that the non-SSI related parent cannot be related to a Federal category of assistance, it may be necessary to conduct a third determination to show whether that parent is eligible for public assistance. (For sample budgetary methodology, see Example 1b.)

2. Single parent household with children in which the parent is aged, blind or disabled --

To determine eligibility for medical assistance for a single parent household in which there are children and in which the parent is aged, blind or disabled, all of the earned and unearned income of the parent is considered. After appropriate SSI-related disregards according to Department Regulation Section 360.5 are deducted, this income is compared against the medical assistance income standard for a one person household. Eligibility or the amount of excess income available to meet the cost of medical care of the SSI-related parent is based upon this determination.

The eligibility of the children is determined by establishing a family household which includes the children and the single parent who is SSI related and again, using the income of the parent and any income of the children according to applicable Department Regulations. After exemptions and disregards which are applicable to families and children are placed against this income, net available income is compared to the medical assistance income standard for the appropriate family size to determine eligibility or the amount of excess income to be applied toward the cost of care for the children. (For sample budgetary methodology, see Example 2)

3. Childless couples in which one member is SSI related and one member is not --

In determining the medical assistance eligibility of the SSI-related member of a couple in which the other individual is not SSI related, all of the income of both members is considered, using SSI disregards according to Department Regulation Section 360.5 to establish the available income. Once this net available income is established it is compared against the medical assistance income standard for two persons to determine the eligibility or the amount of excess income to be paid toward the cost of medical care for the SSI related member of the couple only.

To determine the medical assistance eligibility of the remaining member of the couple, the income of both members is again considered using the appropriate exemptions and disregards in Section 360.5 of Department Regulations for non-SSI related individuals. If the remaining member of the couple is not federally related, that individual's eligibility is determined on the basis of eligibility of the household for public assistance. (For sample budgetary methodology, see Example 3.)

C. Additional factors of eligibility determination under SSI budgetary method.

1. Medicaid resource levels for the appropriate household sizes are used in making these determinations. Resources of SSI related parents as well as non-SSI related parents would be combined and used in determining the eligibility of the SSI related parent or parents against the appropriate resource exemption levels for households of that size. These same resources would then be applied against the resource level, either MA or PA, for the entire family household according to the size of the household.
2. Exempt resources such as homestead, automobile and personal property are not duplicated. Only one homestead can be exempt as well as essential personal property of the individual or family household. Resources which are exempt under the SSI related determination are also exempt under the ADC related determination.
3. PA Standard of Need budgeting (Aitchison v. Berger) is applicable in determining the medical assistance income eligibility level for both SSI related and non-SSI Federally related members of the family household.
4. In some instances as a result of the distribution and amounts of income, and the relationship between the medical assistance eligibility levels for households of various sizes it may be

possible that parts of some households will lose eligibility rather than gain additional eligibility as a result of the SSI budget methodology. For example, as a result of a previous surplus income determination for the SSI-related parent, the spouse and children gained eligibility. It is possible, that if the amount of spend-down is reduced for the SSI-related parent, but not for the spouse and children, they might not gain eligibility. In this instance, if the parent opted for the reduced surplus, he might become liable for some or all of the care paid by Medicaid for the spouse and children.

In those instances where different parts of the household change eligibility status as a result of use of the SSI budgetary methodology, the situation should be explained very carefully to the applicant/recipient to assure that he chooses the option which is most beneficial to him.

5. This budgetary methodology is also to be used in those instances where members of the affected class are considered to be part of the same household although one is living outside the household in a medical institution. For the six month period used when both members of an applicant couple are SSI related and for the one month period used when only one member of the couple is SSI related, this budgetary methodology takes precedence over that which was previously used.

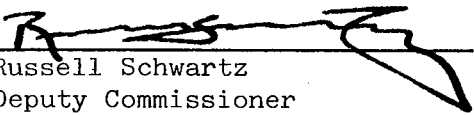
D. WMS/MMIS Instructions

Special instructions will be communicated separately to districts active on MMIS as of May, June, July and August 1980 (Chemung, Nassau and Washington counties and New York City.)

All other districts should process or adjust medical claims for affected cases according to local procedures in effect May-August 1980.

E. Paid Medical Bills

Local social services districts shall maintain a list of affected class members who have paid medical bills for this period of time. Instructions for processing will be forwarded as soon as they are available.


Russell Schwartz
Deputy Commissioner
Division of Medical Assistance

ATTACHMENT

Department of Social Services

Date:

Dear

Under the terms of the Order of the U.S. District Court for the Northern District of New York, in Galkins v. Blum we have identified you as an individual who might be affected by the Court Order in relation to your (denial/eligibility) for medical assistance for May, June, July or August 1980.

If you wish to have your eligibility re-computed for the months of May, June, July or August 1980 under the terms of the Court Order, please notify this agency at _____ within 45 days of the date of this notice. It may be necessary for you to provide additional information for us to properly re-compute your eligibility. If that is the case, we will inform you as to the information which is required, if any. It is possible, as a result of the terms of the Court Order, that you will gain additional eligibility for medical assistance for that period through this recomputation. You will be offered a choice of methods of computation and be able to select the method which results in treatment most favorable to you.

Sincerely,

Example 1a

Assume resources are within MA levels and categorical requirements are met.

Mr. and Mrs. Adams are an SSI related couple applying for medical assistance along with their two children aged 18 and 20. Mr. Adams has a social security benefit of \$300 per month for himself and his wife is employed with gross earnings of \$400 per month. The children have no income. The MA income exemption standard is higher than the PA standard of need.

To determine eligibility of Mr. and Mrs. Adams using SSI budgetary methodology.

Mr. Adams income	\$300	Mrs. Adams income	\$400
SSI disregard	<u>- 20</u>		<u>- 65</u>
Mr. Adams' countable	\$280		335
Mrs. Adams' countable	<u>167.50</u>		<u>167.50</u>
	\$447.50		<u>167.50</u>
MA income level for 2	<u>-442.00</u>		
surplus	5.50		= 5.00

To determine eligibility of Adams family using ADC budgetary methodology, see budget work sheet attached.

SECTION C: EARNED INCOME	NAME (First)	NAME (First)
1. Gross Mo. Inc. (Sec. B)	Mrs. A	
2. Mo. SSI Rel. Inc. Disregard (i.e. \$20, \$65 + 1/2)	400	
3. Gross Adj. Income (1 - 2)	—	
4. Fed. Income Tax	400	
5. State Income Tax		
6. City Income Tax		
7. Soc. Sec. (FICA)		
8. Court Ord. Support Pay.	43	
9. Work Related Expenses		
a. FNP Spec. Work Exp. (\$20, \$40)		
b. Union Dues	5	
c. Tools, License Fee, etc		
d. NYS Disability Ins.	1.30	
e. Transportation		
f. Lunch	21.67	
g. Child Care		
h. Health Ins. Premium		
i. Other (specify)		
10. TOTAL DEDUCTIONS (4 thru 9)	70.97	
11. NET EARNED INCOME (7 less 10)	329.03	

SECTION D: UNEARNED INCOME				APPLIC. DED. (Health Ins. Prem., FICA, etc.)
PERSON RECEIVING	SOURCE	AMOUNT PER MONTH	APPLICABLE DISREGARD	
Mrs. A	SSA	300		
NET UNEARNED INCOME (Tot. Inc. less Dis. & Ded.)				300

SECTION E: TOTAL INCOME	
1. NET EARNED INCOME (Section C 11)	329.03
2. NET UNEARNED INCOME (Section D Total)	300 -
3. TOTAL NET INCOME (Line 1 + 2)	629.03

SECTION F: NEEDS (FNP or FP Standard of Need)	
ITEM OF NEED	MO. ALLOWANCE
1. Allowance (Pre-Add)	
2. Shelter	
3. Fuel for Heating	
4. Restaurant Allowance	
5. Room and Board	
6. Accidental Allowance	
7. Other	
8. TOTAL NEEDS	

SECTION G: MONTHLY INCOME AVAILABLE FOR CONTRIBUTION TOWARD COST OF MEDICAL CARE	
1. Method for FNP or FP Standard of Need	
a. Total Income (Section E3)	
b. Total Need (Section F8)	
c. Avail. Monthly Income (a less b)	

2. Method for FP Non-Standard of Need Type Cases	
a. Total Income (Section E3)	629.03
b. Monthly MA Le. (14)	459
c. Chronic Care Personal Allowance	
d. Total (b + c)	459
e. Available Monthly Income (a less d)	170.03

3. Computation of 6 month Surplus for Inpatient Care (FP only)			
AVAILABLE MONTHLY INCOME	From Sec. G, 1c	Select	NO. OF MO.
	From Sec. G, 2c	Lowest	
		x 6 =	APPLICANT LIABILITY

SECTION H: CATASTROPHIC ILLNESS COMPUTATION OF ELIGIBILITY (FNP Only)			
NET INCOME (Sec. E3)	me/yr Net Annual Inc.	x 12 =	x .25 =
NET ANNUAL INC.	Annual Need (Sec. F8 x 12 mos.)	=	Excess over PA Std.
Lesser of Two Answers = Amt. to be paid by Applicant for Catastrophic Illness			

SECTION I: ACTION		
DISPOSITION		
<input type="checkbox"/> Accepted	<input type="checkbox"/> Withdrawn	<input type="checkbox"/> Closed
<input checked="" type="checkbox"/> Denied	Other: Excess Income \$ 170	

PERIOD OF CERTIFICATION	FROM	TO
WORKER'S SIGNATURE	DATE	
X SUPERVISOR'S SIGNATURE	DATE	

NOTES: (can be used for income spend-down on FP clients)

Example 1a

In the event that they wish a re-computation under the terms of the Court Order, Mr. and Mrs. Adams who are SSI-related can be eligible for medical assistance with a surplus of \$5.00 per month by choosing the option of using the SSI budgetary method. Their two children have surplus of \$170 per month to be met before becoming income eligible for MA.

If either Mr. or Mrs. Adams or both were to opt to be included with their children, they would have a \$170 surplus. Mr. and/or Mrs. Adams, since they have a choice of category can opt to be covered under the SSI budgetary method or the method which applies to families and children. The children do not have such a choice.

The surplus of \$5.00 per month and the surplus of \$170 per month are independent and apply only to those individuals who are covered under the specific determination which yields that surplus. Incurred costs of medical care by individuals can be used to reduce their surplus and also the surplus of those persons who are also dependent on the same source of income. If Mr. or Mrs. Adams or their children were to incur a \$5.00 medical bill, this would eliminate the \$5.00 per month surplus and reduce the \$170 surplus to \$165 for the current month.

Example 1b

Assume resources are within MA levels and categorical requirements are met.

Mr. and Mrs. Atkins and their two children apply for medical assistance. Mr. Atkins is disabled and receives OASDI of \$300 per month. Mrs. Atkins is employed and earns \$500 per month. Each of the children has an OASDI dependent's benefit of \$75 per month. The MA income exemption standard is higher than the PA standard of need.

To determine eligibility of Mr. Atkins using SSI budgetary methodology:

First to determine Mrs. Atkins' contribution:

Child's allocation	\$119
Child's income	<u>75</u>
Mrs. Atkins' contribution	44
2 children	<u>88</u>
Total allocation	\$ 88
Mrs. Atkins' income	\$500
Allocation to children	<u>- 88</u>
Balance	\$412
SSI disregard	<u>65</u>
Balance	\$347
$\frac{1}{2}$ remainder	<u>-173.50</u>
Mrs. Atkins' contribution	<u>173.50</u>

Then to determine Mr. Atkins' income:

Mr. Atkins' OASDI	\$300
SSI disregard	<u>- 80</u>
	\$220
Mrs. Atkins' contribution	<u>+173.50</u>
	\$453.50
MA income level for two	<u>442.00</u>
Mr. Atkins' surplus	11.50 = \$11.00

SECTION C: EARNED INCOME		NAME (First)	NAME (First)
1. Gross Mo. Inc. (Sec. B)		MRS ATKINS	
Mo. SSI Rel. Inc. Disregard (i.e. \$20, \$65 + 1/2)		500	
3. Gross Adj. Income (1 - 2)		500	
4. Fed. Income Tax		—	
5. State Income Tax		—	
6. City Income Tax			
7. Soc. Sec. (FICA)		45	
8. Court Ord. Support Pay.			
9. Work Related Expenses			
a. FNP Spec. Work Exp. (\$20, \$40)			
b. Union Dues		5.00	
c. Tools, License Fee, etc			
d. NYS Disability Ins.		1.30	
e. Transportation		—	
f. Lunch		21.67	
g. Child Care			
h. Health Ins. Premium			
i. Other (specify)			
TOTAL DEDUCTIONS (4 thru 9)		72.97	
11. NET EARNED INCOME (3 less 10)		427.03	

SECTION D: UNEARNED INCOME				APPLIC. DED. (Health Ins. Prem., FICA, etc.)
PERSON RECEIVING	SOURCE	AMOUNT PER MONTH	APPLICABLE DISREGARD	
Mr. ATKINS	OASDI	300		
CHILD 1	OASDI	75		
CHILD 2	OASDI	75		
NET UNEARNED INCOME (Tot. Inc. less Dis. & Ded.)		450		

SECTION E: TOTAL INCOME	
1. NET EARNED INCOME (Section C11)	427.03
2. NET UNEARNED INCOME (Section D Total)	450.
3. TOTAL NET INCOME (Line 1 + 2)	877.03

SECTION F: NEEDS (FNP or FP Standard of Need)	
ITEM OF NEED	MO. ALLOWANCE
1. Allowance (Pre-Add)	
2. Shelter	
3. Fuel for Heating	
4. Restaurant Allowance	
5. Room and Board	
6. Incidental Allowance	
7. Other	
8. TOTAL NEEDS	

SECTION G: MONTHLY INCOME AVAILABLE FOR CONTRIBUTION TOWARD COST OF MEDICAL CARE			
1. Method for FNP or FP Standard of Need			
a. Total Income (Section E3)			
b. Total Need (Section F8)			
c. Avail. Monthly Income (a less b)			
2. Method for FP Non-Standard of Need Type Cases			
a. Total Income (Section E3)		877.03	
b. Monthly MA Level		459	
c. Chronic Care Personal Allowance			
d. Total (b + c)		459	
e. Available Monthly Income (a less d)		418.03	
3. Computation of 6 month Surplus for Inpatient Care (FP only)			
AVAILABLE MONTHLY INCOME	From Sec. G, 1c	Select	NO. OF MO.
	From Sec. G, 2e	Lowest	x 6 =

SECTION H: CATASTROPHIC ILLNESS COMPUTATION OF ELIGIBILITY (FNP Only)		
NET INCOME (Sec. E3)	mo./yr IN or Annual Inc. x 12 =	x .25 =
NET ANNUAL INC.	Annual Need (Sec. F8 x 12 mos.)	Excess over PA Std. =
Lesser of Two Answers = Amt. to be paid by Applicant for Catastrophic Illness		

SECTION I: ACTION	
DISPOSITION	
<input type="checkbox"/> Accepted	<input type="checkbox"/> Withdrawn <input type="checkbox"/> Closed
<input checked="" type="checkbox"/> Denied	
<input type="checkbox"/> Other	EXCESS INCOME \$418

PERIOD OF CERTIFICATION		FROM	TO
WORKER'S SIGNATURE		DATE	
SUPERVISOR'S SIGNATURE		DATE	

NOTES: (can be used for income spend-down on FP clients)

Example 1b

In the event that they wish a re-computation under the terms of the Court Order, Mr. Atkins, an SSI related individual can be eligible for Medicaid by use of surplus income of \$11.00 per month. Mrs. Atkins and the children could only become eligible after utilization of \$418 per month of surplus.

Mr. Atkins could be included in the budget for the entire family (although it is unlikely that he would do so) and then he would be subject to the \$418 per month surplus, also.

If he opts for the \$11 per month surplus and coverage as an SSI-related person, his medical expenses would be used toward his surplus and the surplus of the rest of the family. Their medical expenses would be used toward reducing their surplus and also the surplus of Mr. Atkins.

Example 2

Single Parent - SSI related with child(ren)

- Assume resource and categorical eligibility -

Mrs. Baker is a disabled single parent who has income of \$250 per month OASDI income and \$150 per month Worker's Compensation as a result of a job related injury. Her child has an OASDI dependent's benefit of \$70 per month. She applies for MA in July 1980. The MA income exemption standard is higher than the PA standard of need.

To determine the eligibility of Mrs. Baker using the SSI budgetary methodology.

Mrs. Baker's OASDI Income	\$250
Mrs. Baker's Worker's Compensation	<u>\$150</u>
	\$400
SSI Disregard	<u>- 20</u>
	\$380
one person MA level	<u>-309</u>
Excess	\$ 71 per month

To determine the eligibility of Mrs. Baker and her child using ADC budgetary methodology:

SECTION C:	NAME (First)	NAME (First)
SECTION C: CONTRIBUTION INCOME		
1. Gross Mo. Inc. (Sec. B)		
2. Mo. SSI Rel. Inc. Disregard (i.e., \$20, \$65 + 1/2)		
3. Gross Adj. Income (1 - 2)		
4. Fed. Income Tax		
5. State Income Tax		
6. City Income Tax		
7. Sec. Sec. (FICA)		
8. Court Ord. Support Pay.		
9. Work Related Expenses		
a. FNP Spec. Work Exp. (\$20, \$40)		
b. Union Dues		
c. Tools, License Fee, etc		
d. NYS Disability Ins.		
e. Transportation		
f. Lunch		
g. Child Care		
h. Health Ins. Premium		
i. Other (specify)		
10. TOTAL DEDUCTIONS (4 thru 9)		
11. NET EARNED INCOME (3 less 10)		

\$80 max. for FNP

SECTION G: MONTHLY INCOME AVAILABLE FOR CONTRIBUTION TOWARD COST OF MEDICAL CARE

1. Method for FNP or FP Standard of Need

a. Total Income (Section E3)	
b. Total Need (Section F8)	
c. Avail. Monthly Income (a less b)	

2. Method for FP Non-Standard of Need Type Cases

a. Total Income (Section E3)	470
b. Monthly MA Level ③	442
c. Chronic Care Personal Allowance	
d. Total (b + c)	442
e. Available Monthly Income (a less d)	\$ 28

3. Computation of 6 month Surplus for Inpatient Care (FP only)

AVAILABLE MONTHLY INCOME	From Sec. G, 1c	Select	NO. OF MO.	APPLICANT LIABILITY
	From Sec. G, 2e			
		Lowest	x 6 =	

SECTION H: CATASTROPHIC ILLNESS COMPUTATION OF ELIGIBILITY (FNP Only)

NET INCOME (Sec. E3)	mo./yr Net Annual Inc. x 12 =	x .25 =
NET ANNUAL INC.	Annual Need (Sec. F8 x 12 mos.)	Excess over PA Std.

Lesser of Two Answers = Amt. to be paid by Applicant for Catastrophic Illness

SECTION D: UNEARNED INCOME

PERSON RECEIVING	SOURCE	AMOUNT PER MONTH	APPLICABLE DISREGARD	APPLIC. DED. (Health Ins. Prem., FICA, etc.)
Mrs. B	OASDI	250		
Mrs. B	W. Comp	150		
Child	OASDI	70		
NET UNEARNED INCOME (Tot. Inc. less Dis. & Ded.)		470		

SECTION I: ACTION DISPOSITION

Accepted Withdrawn Closed
 Denied
 Other *\$28/mo spend down*

SECTION E: TOTAL INCOME

1. NET EARNED INCOME (Section C11)	
2. NET UNEARNED INCOME (Section D Total)	
3. TOTAL NET INCOME (Line 1 + 2)	

PERIOD OF CERTIFICATION	FROM	TO
WORKER'S SIGNATURE	DATE	
X SUPERVISOR'S SIGNATURE	DATE	

SECTION F: NEEDS (FNP or FP Standard of Need)

ITEM OF NEED	MO. ALLOWANCE
1. Allowance (Pre-Add)	
2. Shelter	
3. Fuel for Heating	
4. Restaurant Allowance	
5. Room and Board	
6. Incidental Allowance	
7. Other	
8. TOTAL NEEDS	

NOTES: (can be used for income spend-down on FP clients)

Example 2

In the event that she wishes a re-computation under the terms of the Court Order, Mrs. Baker who is an SSI-related individual can be eligible for medical assistance with a surplus of \$71 per month by using the SSI budgetary method. Her child can be eligible with a surplus of \$28 per month.

Mrs. Baker may opt to be included with her child (and in this instance probably will) and avail herself of the smaller surplus of \$28 per month.

Once this option is taken, the \$28 surplus becomes controlling and Mrs. Baker and her child must incur this amount in medical expenses before becoming eligible for medical assistance. The \$71 surplus is not used at all under the option which Mrs. Baker has chosen.

Example #3

Couple in which one individual is SSI-related and the other is not. Assume resource and categorical requirements are met.

Mr. and Ms. Collins are a married couple, ages 67 and 63 respectively. Mr. Collins receives an OASDI benefit of \$300 per month. Mrs. Collins is employed, 3 hours per day with gross earnings of \$250 per month. They reside in Albany County and pay \$150 per month for rent including heat.

To determine eligibility of Mr. Collins using SSI budgetary methodology.

Mr. Collins income	\$300	Mrs. Collins income	\$250
SSI disregard	<u>- 20</u>	SSI disregard	<u>- 65</u>
Mr. Collins countable	\$280		185
Mrs. Collins countable	<u>92.50</u>	$\frac{1}{2}$	<u>- 92.50</u>
	372.50		\$ 92.50
MA income level for 2	<u>-422.00</u>		
Surplus	0		

To determine eligibility of Mrs. Collins using PA standards:

SECTION C: EARNED INCOME		NAME (First)	NAME (First)
1. Gross Mo. Inc. (Sec. B)	250	Mrs. Collins	
2. Mo. SSI Rel. Inc. Disregard (i.e. \$20, \$65 + 1/2)			
3. Gross Adj. Income (1 - 2)	250		
4. Fed. Income Tax	10.00		
5. State Income Tax	5.00		
6. City Income Tax			
7. Sec. Sec. (FICA)	15.00		
8. Court Ord. Support Pay.			
9. Work Related Expenses			
a. FNP Spec. Work Exp. (\$20, \$40)			
b. Union Dues			
c. Tools, License Fee, etc			
d. NYS Disability Ins.	1.30		
e. Transportation			
f. Lunch			
g. Child Care			
h. Health Ins. Premium			
i. Other (specify)			
10. TOTAL DEDUCTIONS (4 thru 9)	31.30		
11. NET EARNED INCOME (11 less 10)	218.70		

SECTION D: UNEARNED INCOME				APPLIC. DED. (Health Ins. Prem., FICA, etc.)
PERSON RECEIVING	SOURCE	AMOUNT PER MONTH	APPLICABLE DISREGARD	
Mrs. Collins	OASDI	300		
NET UNEARNED INCOME (Tot. Inc. less Dis. & Ded.)		300		

SECTION E: TOTAL INCOME	
1. NET EARNED INCOME (Section C11)	218.70
2. NET UNEARNED INCOME (Section D Total)	300.00
3. TOTAL NET INCOME (Line 1 + 2)	518.70

SECTION F: NEEDS (FNP or FP Standard of Need)	
ITEM OF NEED	MO. ALLOWANCE
1. Allowance (Pre-Add)	150
2. Shelter Agency Max 171	150
3. Fuel for Heating	
4. Restaurant Allowance	
5. Room and Board	
6. Incidental Allowance	
7. Other	
8. TOTAL NEEDS	300

SECTION G: MONTHLY INCOME AVAILABLE FOR CONTRIBUTION TOWARD COST OF MEDICAL CARE						
1. Method for FNP or FP Standard of Need						
a. Total Income (Section E3)	518.70					
b. Total Need (Section F8)	300					
c. Avail. Monthly Income (a less b)	218.70					
2. Method for FP Non-Standard of Need Type Cases						
a. Total Income (Section E3)						
b. Monthly MA Level						
c. Chronic Care Personal Allowance						
d. Total (b + c)						
e. Available Monthly Income (a less d)						
3. Computation of 6 month Surplus for Inpatient Care (FP only)						
AVAILABLE MONTHLY INCOME	<table border="1"> <tr> <td>From Sec. G, 1c</td> <td rowspan="2">Select</td> <td rowspan="2">NO. OF MO.</td> <td rowspan="2">APPLICANT LIABILITY</td> </tr> <tr> <td>From Sec. G, 2e</td> </tr> </table>	From Sec. G, 1c	Select	NO. OF MO.	APPLICANT LIABILITY	From Sec. G, 2e
From Sec. G, 1c	Select	NO. OF MO.				APPLICANT LIABILITY
From Sec. G, 2e						
	Lowest x 6 =					

SECTION H: CATASTROPHIC ILLNESS COMPUTATION OF ELIGIBILITY (FNP Only)		
NET INCOME (Sec. E3)	mo./yr Net Annual Inc. x 12 =	x .25 =
NET ANNUAL INC.	Annual Need (Sec. F8 x 12 mos.)	Excess over PA Std.
Lesser of Two Answers = Amt. to be paid by Applicant for Catastrophic Illness		

SECTION I: ACTION	
DISPOSITION	
<input type="checkbox"/> Accepted	<input type="checkbox"/> Withdrawn
<input checked="" type="checkbox"/> Denied	<input type="checkbox"/> Closed
<input type="checkbox"/> Other	

PERIOD OF CERTIFICATION	FROM	TO
WORKER'S SIGNATURE	DATE	
X SUPERVISOR'S SIGNATURE	DATE	

NOTES: (can be used for income spend-down on FP clients)

Example 3

In the event that he wishes a re-computation under the terms of the Court Order, Mr. Collins is eligible for Medicaid with no surplus as an SSI-related person. Mrs. Collins is ineligible and since she is not a Federally participating individual, cannot spend-down to reach eligibility. Only in the event of hospitalization could Mrs. Collins become eligible for using catastrophic illness budgeting.