Letter No.: 00-04E

#### **DEPARTMENT OF HEALTH SERVICES**

714/744 P Street P.O. Box 942732 Sacramento, CA 94234-7320 (916) 657-2941



April 20, 2000

TO: All County Welfare Directors

All County Administrative Officers

All County Medi-Cal Program Specialists/Liaisons

All County Public Health Directors
All County Mental Health Directors

ERRATA TO ALL COUNTY WELFARE DIRECTORS LETTER (ACWDL) 00-04: SEVERAL REVISIONS TO ACWDL 00-04

Ref.: All County Welfare Directors Letter (ACWDL) 00-04

This Errata letter transmits several revisions to ACWDL 00-04 and to a few of its enclosed charts and forms. ACWDL 00-04 implemented (with a March 1, 2000, effective date) recent statutorily-mandated changes to the Section 1931 program. The revisions transmitted by this Errata letter are as follows:

- 1. A revised camera-ready copy of the Section 1931 Program budget forms titled: "Recipient Budget Form" (MC 176 MA –1931 Group—Recip (2/00)) and "Applicant and Recipient" Budget Form (MC 176 MA –1931 Group—Appl/Recip (2/00)). These revised forms replace the "1/00" version of these forms transmitted by ACWDL 00-04.
- 2. Revised pages 7 through 10 to replace the corresponding pages in ACWDL 00-04. (The four revised pages accompanying this Errata letter are not "back-to-back." The pages they replace are "back-to-back".)
- A revised chart titled "Section 1931(b) Determinations: <u>Sneede v. Kizer Prorated federal poverty level (FPL) Income Standard and Property levels March 1, 2000" which replaces the chart by this name transmitted in ACWDL 00-04.
  </u>
- A revised camera-ready copy of the "Principal Wage Earner (PWE) Working 100 Hours Or More Unemployed Parent Determination Worksheet" (Draft— 12-3-99) Orange County) which replaces the chart by this name transmitted by ACWDL 00-04.

All County Welfare Directors
All County Administrative Officers
All County Medi-Cal Program Specialists/Liaisons
All County Public Health Directors
All County Mental Health Directors
Page 2

Please direct question regarding the Section 1931 budget forms to Dave Rappolee at (916) 657-0163, and questions regarding revised pages 7, 8, and 9 to Marge Buzdas at (916) 657-0726, and questions regarding the Sneede Pro-Rated FPL Income Standard Chart to Ms. Erin Lynch at (916) 654-5769.

Sincerely,

**ORIGINAL SIGNED BY** 

Angeline Mrva, Chief Medi-Cal Eligibility Branch

**Enclosures** 

## SEC. 1931 APPLICANT AND RECIPIENT BUDGET FORM: FOR DETERMINING NET NON-EXEMPT INCOME AND SECTION 1931 INCOME ELIGIBILITY FOR APPLICANTS; AND FOR RECIPIENTS UNDER ALTERNATIVE B

| CASE N   | IAME:  |                                   |      |                                      |          |                 | COUNTY DIST   | RICT:        | COUN            | ITY USE:   |
|----------|--|-----------------------------------|------|--------------------------------------|----------|-----------------|---------------|--------------|-----------------|--|
| ☐ NE     | EW APP. ☐ REDETERMINATION ☐ CI   | HANGE   R                         | RETF | RO ELIG. 🔲                           | CORR     | ECTION          | EFFECTIVE E   |              |                 | S BUDGET; AR:  |
| NAME !   | MFBU MEMBER #1:  |                                   | NA   | NAME MFBU MEMBER #6: OTHER COVERAGE: |          |                 |               |              | OTHER COVERAGE: |  |
| NAME I   | MFBU MEMBER #2:  |                                   | NA   | ме мғви мемв                         | ER #7:   |                 | 900na-00      |              |                 |  |
| NAME !   | MFBU MEMBER #3:  |                                   | NA   | ме мғви мемв                         | ER #8:   |                 |               | Parts 4.     |                 |  |
| NAME N   | MFBU MEMBER #4:  |                                   | NA   | NAME MFBU MEMBER #9:                 |          |                 |               |              |                 |  |
| NAME N   | MFBU MEMBER #5:  |                                   | NA   | ME MFBU MEMB                         | ER #10:  |                 |               |              |                 |  |
| 1        | ENTER UNEARNED INCOME OF EACH MFBU<br>MEMBER, THEN TOTAL FOR MFBU (INCLUDE<br>NON-EXEMPT DISABILITY-BASED INCOME<br>HERE).   | TOTAL MFBU<br>UNEARNED<br>INCOME: |      | UNEARNED IN  UNEARNED IN  \$         | COME M   | +<br>FBU MEMBEF |               | \$           | NED INC         | OME MFBU MEMBER #  + OME MFBU MEMBER # +   |
|          |  | \$                                | _    |                                      |          |                 | PT INCOME HER | 1            |                 | , , , , , , , , , , , , , , , , , , ,  |
| 2        | ☐ EDUCATIONAL EXPENSE (§50547)   | - \$                              |      | EXEMIT 1                             | II COINE | - (EIOT EXEMI   | T MOOME TIEF  | <b>νω</b> ). |                 |  |
| 3        | \$50 SUPPORT RECEIVED (§50554.5)   | - \$                              |      |                                      |          |                 |               |              |                 |  |
| 4        | REMAINING NON-EXEMPT UNEARNED INCOME   | BOX 4 = \$                        | ;    |                                      |          |                 |               |              |                 |  |
| 5        | ENTER EARNINGS OF EACH MFBU MEMBER,<br>SUBTRACT \$90 WORK EXPENSE DEDUCTION<br>FROM EACH, THEN TOTAL REMAINDERS FOR<br>MFBU. | TOTAL MFBU<br>EARNINGS:           |      |                                      | DED      | = \$            | \$ \$ = =     | \$           | XP DED          | = \$   |
| 6        | DEPENDENT CARE DEDUCTION (§50553.5)  | - \$                              |      | COÜNTY USE                           |          |                 | <u> </u>      |              |                 |  |
| 7        | REMAINING NON-EXEMPT EARNED INCOME   | BOX 7 = \$                        |      |                                      |          |                 |               |              |                 |  |
| 8        | TOTAL REMAINING INCOME: NON-EXEMPT UNEARNED INCOME & NON-EXEMPT EARNED INCOME (LINES 4 + 7)                                  | \$                                | -    |                                      |          |                 |               |              |                 |  |
| 9        | ☐ CHILD/SPOUSAL SUPPORT PYMTS (§50554)   | - \$                              |      |                                      |          |                 |               |              |                 |  |
| 10       | ☐ ALLOCATION TO EXCLUDED CHILDREN (§50558)   | - \$                              |      |                                      |          |                 |               |              |                 |  |
| 11       | ☐ ALLOCATION TO PA FAMILY MEMBER<br>(§50557)   | <u>+</u> \$                       |      |                                      |          |                 |               |              |                 |  |
| 12       | TOTAL MFBU NET NON-EXEMPT INCOME (ROUNDED DOWN TO THE NEAREST DOLLAR).   | = \$                              |      |                                      |          |                 |               |              |                 | and the second s |
| 13       | SEC. 1931 <b>FPL</b> INCOME LIMIT FOR FAMILY   | \$                                |      | (ENTER                               | FPL INC  | COME LIMIT A    | PPROPRIATE F  | OR FAMILY    | / SIZE H        | ERE)   |
|          | IF INCOME FROM LINE 12 IS LESS THAN OR<br>EQUAL TO LIMIT FROM LINE 13, FAMILY IS<br>INCOME ELIGIBLE.                         | ☐ ELIGIBLE                        |      |                                      |          |                 |               | BER, EVALI   | UATE FO         | ATE FOR OTHER MEDI-CAL<br>DR SEC. 1931 UNDER   |
| ELIGIBIL | ITY WORKERS SIGNATURE:   | WORKER NUM                        | MBEŔ | : 0                                  | OMPUT    | ATION DATE:     |               | COUN         | TY USE:         |  |

### SEC. 1931 **RECIPIENT** BUDGET FORM: FOR DETERMINING NET NON-EXEMPT INCOME AND SECTION 1931 INCOME ELIGIBILITY FOR RECIPIENTS UNDER ALTERNATIVE A

| CASE   | NAME:  |  |             |                      |   | COUNTY       | DISTRICT:  | COUN            | NTY USE:                                |
|--------|--|--|-------------|----------------------|---|--------------|------------|-----------------|---|
| 0      | EW APP.   REDETERMINATION   CH   | HANGE   R                              | RETRO       | ELIG.                | ☐ CORRECTION  |              |            | ATE FOR TH      | IS BUDGET;                              |
| NAME   | MFBU MEMBER #1:  |  | NAME !      | NAME MFBU MEMBER #6: |   |              |            | OTHER COVERAGE: |   |
| NAME   | MFBU MEMBER #2:  |  | NAME !      | NAME MFBU MEMBER #7: |   |              |            |                 |   |
| NAME   | MFBU MEMBER #3;  |  | NAME I      | MFBU MI              | EMBER #8:   |              |            |                 |   |
| NAME   | MFBU MEMBER #4:  |  | NAME I      | MFBU ME              | EMBER #9:   |              |            |                 |   |
| NAME   | MFBU MEMBER #5:  |  | NAME I      | MFBU ME              | EMBER #10;  |              |            |                 |   |
| 1      | ENTER UNEARNED INCOME OF EACH MFBU<br>MEMBER, THEN TOTAL FOR MFBU (DO NOT<br>INCLUDE NON-EXEMPT DISABILITY-BASED   | TOTAL MFBU<br>UNEARNED IN              |             | \$                   |   | +            | \$_        |                 | DME MFBU MEMBER #  +  DME MFBU MEMBER # |
|        | INCOME HERE).  | \$                                     |             | \$_                  |   | _ +          | \$         |                 | +                                       |
| 2      | ☐ EDUCATIONAL EXPENSE (§50547)   | - \$                                   |             |                      | EXEMPT INCOME (LIST   | EXEMPT IN    | COME HER   | RE):            |   |
| 3      | \$50 SUPPORT RECEIVED (§50554.5)   | - \$                                   |             |                      | ·   |              |            |                 |   |
| 4      | REMAINING NON-EXEMPT UNEARNED INCOME   | BOX 4 = \$                             |             |                      |   |              |            |                 |   |
| 5      | ENTER DISABILITY-BASED INCOME (DBI) OF<br>EACH MFBU MEMBER, THEN TOTAL FOR MFBU  | TOTAL MFBU<br>DISABILITY-BA<br>INCOME: |             | l <del></del>        | F MERLI MEMBER #  |              | \$         |                 | +                                       |
|        |  | \$                                     |             | \$                   | F MFBU MEMBER #   | _ +          | \$         | WI DO WILWID    | +                                       |
| 6      | \$240 DEDUCTION  | - \$240                                |             |                      |   |              |            |                 |   |
| 7      | REMAINING NON-EXEMPT DISABILITY – BASED INCOME (DBI) (IF DEDUCTION EXCEEDS DISABILITY BASED INCOME, ENTER "0")   | BOX 7 = \$                             | <del></del> |                      | 7A UNUSED<br>LINE 5; IF NE  |              |            |                 | D \$240)                                |
| 8      | ENTER EARNINGS FOR UP TO TWO MFBU MEMBERS, THEN TOTAL FOR MFBU (IF 3 OR MORE PERSONS WITH EARNINGS, SKIP LINES 8 & 9 AND PROCEED TO WORKSHEET FOR 3+ EARNERS). | TOTAL MFBU<br>EARNINGS:                |             |                      | INGS OF MFBU MEMBER :   |              | -          |                 | DF MFBU MEMBER #                        |
| 9      | UNUSED \$240 DEDUCTION (FROM BOX 7A)   | - \$                                   | _           | 14                   | TOTAL REMAINING NOI<br>NON-EXEMPT DISABILI<br>EXEMPT EARNED INCO      | TY-BASED II  | NCOME &    | NON-            | \$                                      |
| 10     | REMAINING NON-EXEMPT EARNED INCOME (OR FROM LINE 12 WORKSHEET); IF DEDUCTION EXCEEDS EARNED INCOME, ENTER "0"  | = \$                                   |             | 15                   | CHILD/SPOUSAL SU  | PORT PYM     | TS (§50554 | 4)              | - \$                                    |
| 11     | 50% DEDUCTION (DIVIDE AMOUNT IN LINE 10 BY 2)  | = \$                                   | _           | 16                   | ☐ ALLOCATION TO EXC   | CLUDED CHI   | LDREN (§   | 50558)          | - \$                                    |
| 12     | DEPENDENT CARE DEDUCTION (§50553.5)  | - \$                                   |             | 17                   | ☐ ALLOCATION TO PA  | FAMILY MEN   | MBER (§50  | 0557)           | <u>+</u> \$                             |
| 13     | REMAINING NON-EXEMPT EARNED INCOME   | BOX 13                                 |             | 18                   | TOTAL MFBU NET NON-<br>DOWN TO THE NEARES                             |              | NCOME (R   | OUNDED          | = \$                                    |
|        |  |  |             | 19                   | SEC. 1931 MBSAC IN  | COME LIMIT   | FOR FAM    | IILY            | \$_·                                    |
|        | IF INCOME FROM LINE 18 IS LESS THAN LIMIT<br>FROM LINE 19, FAMILY IS INCOME ELIGIBLE.  | ☐ ELIGIBLE                             |             | ME                   | T ELIGIBLE: IF NO SNEED<br>DI-CAL PROGRAMS; IF SN<br>11 UNDER SNEEDE. | IEEDE – ELIG | GIBLE CLA  | ASS MEMBER      |   |
| ELIGIE | ILITY WORKERS SIGNATURE:   | WORKER NUM                             | MBER:       |                      | COMPUTATION DATE:   | C            | OUNTY U    | SE:             |   |
|        |  |  |             |                      |   |              |            |                 |   |

All County Welfare Directors
All County Administrative Officers
All County Medi-Cal Program Specialists/Liaisons
All County Outstationed Eligibility Workers Coordinators
All County Public Health Directors
All County Mental Health Directors
Page 7

Two months later, Mom begins working and receives net nonexempt earnings of \$400 per month. Since the U-parent income test applies to recipients of the MN program and the family's net nonexempt earnings are now \$1,400 which is over the 100 Percent U-parent limit for 3. Mom and Dad are no longer eligible as parents of a deprived child. The child is still eligible for the 133 Percent program.

#### Example 3

#### **U-Parent Income Test**

| Mom                        | \$ 300 (net nonexempt earned income)  |
|----------------------------|---------------------------------------|
| Dad (PWE)                  | \$1,000 (net nonexempt earned income) |
| Mom's separate child       | \$ 300 (net nonexempt earned income)  |
| Mutual child               | \$ 0                                  |
| Total net earned income    | \$1,600                               |
| U Parent 100\$ Limit for 4 | \$1,392                               |

This unmarried couple, their mutual (age 5), and separate children (age 19), apply for Medi-Cal. Dad is working over 100 hours and family is over the U-parent income limit. Dad and the mutual child are not eligible for the Section 1931(b) or the MN programs due to lack of deprivation. They are not eligible for TMC because they have not received CalWORKs or Section 1931(b) for three of the last six months. Since Mom's separate child is age 19, she has no deprived child in the home and is not eligible for Section 1931(b). Evaluate her and her separate child for the MN program. Evaluate the mutual child for the MI or Percent program, if applicable. Dad is ineligible for any program because he is not a spouse and cannot qualify as an essential person.

Mom has \$1,000 of net nonexempt unearned income. The total family unearned and earned income equals \$2,600. The maintenance need for the MN/MI program for 4 persons is \$1,100. Sneede rules apply.

All County Welfare Directors
All County Administrative Officers
All County Medi-Cal Program Specialists/Liaisons
All County Outstationed Eligibility Workers Coordinators
All County Public Health Directors
All County Mental Health Directors
Page 8

| MBU #1   |                              | MBU #2   |                                    |
|--|------------------------------|--|------------------------------------|
| Mom'stotal net nonexempt income<br>Less Parental Needs Deduction<br>Income to be Allocated ÷ 2             | \$1,300<br>- 600<br>\$ 700   | Mom's Separate Child<br>Allocation from Mom<br>Total                       | \$300<br><u>350</u><br>\$650       |
| MBU #3   |                              | MBU #4   |                                    |
| <dad's> total net nonexempt income<br/>Less Parental Needs Deduction<br/>Income to be Allocated ÷1</dad's> | = \$1,000<br>- 600<br>\$ 400 | Mutual Child<br>Allocation from Mom<br>Allocation from Dad<br>Total income | \$ 0<br>350<br><u>400</u><br>\$750 |

Mom is eligible for the MN program with no SOC as a parent of a deprived child (age 21 for this program). Mom's separate child is also eligible with a SOC of \$275. Dad is not eligible for any Medi-Cal program. The mutual child has a SOC of \$438 under the MI program. Evaluate the mutual child for the 133 Percent program. Only the income of the mutual child and his/her parents are counted.

| Mom's total income   | \$1,300 |
|----------------------|---------|
| Dad's total income   | \$1,000 |
| Child's total income | \$ 0    |
| Mom's separate child | N/A     |
| Total                | \$2,300 |
| Limit for 4 (133%)   | \$1,851 |

Mutual child is not eligible for the 133 Percent program. He/She would have a \$438 SOC in the MI program.

Two months later, Mom and her separate child stop working. Redetermine the U-parent earned income deprivation income test. Since the PWE is still working over 100 hours and the family is not a recipient of the Section 1931(b) program, the U-parent income test is required. The net nonexempt earned income of Dad is \$1,000 which is under the 100 percent limit for 4.

All County Welfare Directors
All County Administrative Officers
All County Medi-Cal Program Specialists/Liaisons
All County Outstationed Eligibility Workers Coordinators
All County Public Health Directors
All County Mental Health Directors

Page 9

| Dad's earned income | \$1,  | 000 |
|---------------------|-------|-----|
| Mom's earned income | \$    | 0   |
| Mom's child " "     | \$    | 0   |
| Mutual child " "    | \$    | 0   |
| Total               | \$1,0 | 000 |
| Limit for 4 (100%)  | \$1,  | 392 |

Reevaluate family for the Section 1931(b) program as applicants.

| Mom's total income        | \$1,  | 000 |
|---------------------------|-------|-----|
| Dad's total income        | \$1,0 | 000 |
| Mom's separate child      | \$    | 0   |
| Mutual child              | \$    | 0   |
| Total                     | \$2,0 | 000 |
| Section 1931(b) limit (4) | \$1,3 | 392 |

Mom, Dad, and the mutual child are not eligible for Section 1931(b). <u>Sneede</u> rules would then again apply.

#### Section 1931(b) MBU#1

#### Section 1931(b) MBU #2

| Mom's net nonexempt income<br>Less Parental Needs<br>Income ÷ 2 | •               | Dad's net nonexempt incor<br>Less Parental Needs Income ÷ 1 | ne \$1,000<br>- <u>687</u><br>\$ 313 |
|---|-----------------|---|--------------------------------------|
| Mom's Income  | \$ 687          | Dad's Income  | \$ 687                               |
| <mom's child="" separate=""></mom's>                            | \$ 157 from Mom | Total   | \$ 687                               |
| Total   | \$ 844          | Limit for 1   | \$ 687                               |
| Limit for 2   | \$ 922          |   | •                                    |

#### MBU #3

| Mutual Child | \$313 from Dad |
|--------------|----------------|
|              | \$157 from Mom |
| Total        | \$470          |
| Limit        | \$386          |

All County Welfare Directors
All County Administrative Officers
All County Medi-Cal Program Specialists/Liaisons
All County Outstationed Eligibility Workers Coordinators
All County Public Health Directors
All County Mental Health Directors
Page 10

Dad and Mom are eligible for the Section 1931(b) program. The 19-year-old and the mutual child should be evaluated for the MN program.

#### MN MFBU

| Mom's separate child | \$   | 0              |
|----------------------|------|----------------|
| Mutual child         |      | 0              |
| Limit                | \$75 | $\overline{0}$ |

Since neither child has income, they are eligible with no SOC.

#### Example 4

Married couple and their children apply for Medi-Cal. They have one mutual 4-year-old child and each have one separate child under age 18. Dad is determined to be the PWE and he is working under 100 hours. No applicant U-parent earned income test is required. Mom has \$699 net nonexempt income and Dad has \$1000 net nonexempt income. The children have no income. We will assume that the family is property eligible.

| Mom                   | \$ 699 net nonexempt income |
|-----------------------|-----------------------------|
| Dad                   | 1,000 net nonexempt income  |
| Mutual Child          | 0                           |
| Dad's Separate Child  | 0                           |
| Mom's Separate Child  | 0                           |
| Total                 | \$1,699                     |
| Section 1931(b) Limit | \$1,627                     |

Since the new March 1, 2000 income limit for Section 1931(b) applicants for 5 is \$1,627, the family fails to qualify for Section 1931(b). Sneede rules apply since this is a stepparent household.

| Mom's Net Income     | \$699       | Dad's Net Income     | \$1,000.00 |
|----------------------|-------------|----------------------|------------|
| Mom's Parental Needs | - 687       | Dad's Parental Needs | - 687.00   |
| Total                | \$ 12       | Total                | \$ 313.00  |
| Total Allocation ÷3  | <b>\$ 4</b> | Total Allocation ÷3  | ** 104.30  |

#### Section 1931(b) Determinations: <u>Sneede v. Kizer</u> Prorated FPL Income Standard and Property Levels - March 1, 2000 -

#### I. MBU Contains an Adult - May also Include an Unborn

| Person Type                               | 1931(b) Income | Property |
|---|----------------|----------|
| Single Parent                             | \$ 687         | \$3,000  |
| Single Parent with Unborn                 | 922            | 3,000    |
| Married Couple -Two Adults                | 922            | 3,000    |
| Married Couple with Unborn                | 1,157          | 3,150    |
| Unmarried Couple - Each Unmarried Partner | 687            | 3,000    |

#### II. MBU Confains Adult(s) and Child(ren)

Allow the full non-Sneede Section 1931(b) income/property limits for the MBU based on the number of individuals in the MBU.

## III. MBU Contains a Nonparent Caretaker Relative, or Child(ren) with No Parents Living in the Home, or Child(ren) Whose Parent is PA/Other PA and Not in the MFBU

Each MBU receives full non-<u>Sneede</u> 1931(b) income/property limit based on the number of persons in each MBU. If there is a pregnant minor in the MFBU, include the unborn in the pregnant minor's MBU.

# IV. MBU Contains Only Children Who Live with One or Both Parents (Not Stepparents) and They Are in the Same MFBU (Do not include a parent who is PA/other PA and not in the MFBU. Also, if there is a pregnant minor in the MFBU, her unborn is considered as another child in the pregnant minor's MBU.)

| No. of Children | One Parent      |                   | Two Parents     |                   |
|-----------------|-----------------|-------------------|-----------------|-------------------|
| in MBU          | Prorated Income | Prorated Property | Prorated Income | Prorated Property |
| 1               | \$ 461          | \$1,500           | - *** \$ 386 ** | \$1,050           |
| 2               | 772             | 2,100             | 696             | 1,650             |
| 3               | 1,044           | 2,475             | 977             | 2,070             |
| 4               | 1,302           | 2,760             | 1,242           | 2,400             |
| 5               | 1,552           | 3,000             | 1,498           | 2,679             |
| 6               | 1,798           | 3,215             | 1,749           | 2,925             |
| 7               | 2,041           | 3,413             | 1,997           | 3,150             |
| 8               | 2,282           | 3,600             | 2,242           | 3,360             |
| 9               | 2,522           | 3,780             | 2,485           | 3,437             |
| 10*             | 2,761           | 3,819             | 2,727           | 3,500             |

\*NOTE:

Add \$235 for each additional child after 10 to Section 1931(b) income standards to determine prorated income standards.

No. Children in MBU
Parent(s) + No. Children in MBU
X 1931(b) Income Standard for = Prorated income Parent(s) + Child(ren) in MBU

# PRINCIPAL WAGE EARNER (PWE) WORKING 100 HOURS OR MORE UNEMPLOYED PARENT DETERMINATION WORKSHEET

| Cas               | e Name:   |        | Case Numi   | per:        |
|-------------------|---|--------|-------------|-------------|
|                   |   |        |             |             |
| l .               | CTION 1931(b) APPLICANTS AND MEDICALLY NEEDY  | -      |             | County Use: |
| <b>Not</b><br>mor | e: If the PWE is a Section 1931(b) recipient he/she may we without a separate unemployment income test.   | ork 10 | 00 hours or | -           |
| 1                 | Earnings of Principal Wage Earner (PWE) - \$90  |        |             |             |
| 2                 | Earnings of Second Parent/Spouse \$90   |        |             | -           |
| 3                 | Earnings of Child #1 - \$90   |        |             |             |
| 4                 | Earnings of Child #2 - \$90   |        | 200         |             |
| 5                 | Earnings of Child #3 - \$90   |        |             |             |
| 6                 | Countable Earned Income (lines 1+2+3+4+5)   | \$     |             |             |
| 7                 | Dependent Care Deduction  |        |             |             |
| 8                 | Court Ordered Child/Spousal Support Deduction   |        |             |             |
| 9                 | Allocation to PA Member   |        |             |             |
| 10                | Allocation to Excluded Children   |        |             | -           |
| 11                | Total Deductions (lines 7+8+9+10)   | \$     |             |             |
| 12                | Total Net Nonexempt Earned Income (lines 6-11)  | \$     |             |             |
| 13                | 100% FPL Limit for Family Size of   | \$     |             |             |
|                   | (# in MFBU)   |        |             |             |
| 14                | Is Total Net Nonexempt Earned Income at or below 100% of the FPL?   |        | Yes         |             |
|                   | 100% Of the FFL?  |        | No          |             |
| 15                | If line 14 is Yes, then the PWE is considered an Unem   | ploye  | d Parent.   |             |
|                   | Evaluate family for the Section 1931(b) program if the youngest child in the home is under 18 or 18 and enrolled in school and expected to graduate prior to age 19. If not and the youngest child is under 21, then determine eligibility for the Medically Needy program. |        |             |             |
|                   | If line 14 is <u>No</u> , then the PWE is employed and there is<br>Unemployed Parent deprivation.   | s no   |             |             |

| Eligibility Worker Name: | Worker #: | Date: |
|--------------------------|-----------|-------|
|                          |           |       |