

**DEPARTMENT OF HEALTH SERVICES**

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



April 28, 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

Letter No.: 00-27

**CAMERA-READY COPIES OF THE UNEMPLOYED PARENT DETERMINATION WORKSHEET AND THE REVISED SNEEDE BUDGET FORMS**

Ref.: All County Welfare Directors Letter (ACWDL) Nos. 99-20, 99-39, 00-04, and 00-10

The purpose of this letter is to provide counties with camera ready-copies of the Unemployed Parent Determination Worksheet and the new March 1, 2000 Sneede v. Kizer Net Nonexempt Income Determination and Mini Budget Unit Determination Forms.

The MC 337 Unemployed Parent Determination Worksheet should be available in the warehouse; however, the Sneede forms are not yet available and must be photocopied until they are available.

The MC 175-3I.2A is for all applicants and those recipients who would benefit more from using the \$90 income disregard and the 100 percent federal poverty level. The MC 175-3I.2R is for those recipients who benefit more from the \$240 plus one-half income disregard. The income limit remains at \$389 for one person. The Sneede Prorated Income Standard and Property Levels chart for 1999 were contained in ACWDL No. 99-20. The April 1, 2000, Sneede Prorated Income Standard and Property Levels was sent in ACWDL 00-10. The Section 1931(b) Program Income Limits for recipients was enclosed in ACWDL No. 99-39.

For information on the MC 337, please contact Margie Buzdas at (916) 657-0726. For information about the Sneede Budget Forms, please contact Erin Lynch at (916) 654-5769.

Sincerely,

**ORIGINAL SIGNED BY**

Angeline Mrva, Chief  
Medi-Cal Eligibility Branch

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

Case name	Case number
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### SECTION 1931(b) APPLICANTS AND MEDICALLY NEEDY (MN) FAMILIES

*County Use*

*Note: If the PWE is a Section 1931(b) recipient he/she may work 100 hours or more without a separate unemployment income test.*

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	
5	Earnings of Child #3	– \$90	
<b>6</b>	<b>Countable Earned Income</b> (lines 1+2+3+4+5)	<b>\$</b>	
7	Dependent Care Deduction		
8	Court Ordered Child/Spousal Support Deduction		
9	Allocation to PA Member		
10	Allocation to Excluded Children		
<b>11</b>	<b>Total Deductions</b> (lines 7+8+9+10)	<b>\$</b>	
<b>12</b>	<b>Total Net Nonexempt Earned Income</b> (lines 6-11)	<b>\$</b>	
13	100% FPL Limit for Family Size of  _____ (Number in MFBU)	\$	
14	Is Total Net Nonexempt Earned Income at or below 100% of the FPL?	<input type="checkbox"/> Yes  <input type="checkbox"/> No	
15	<p><b>If line 14 is <u>Yes</u>, then the PWE is considered an Unemployed Parent.</b></p> <p>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.</p> <p><b>If line 14 is <u>No</u>, then the PWE is employed and there is no Unemployed Parent deprivation.</b></p>		

Eligibility Worker name	Worker number	Date
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## SECTION 1931(b) SNEEDE V. KIZER NET NONEXEMPT INCOME DETERMINATION AND MINI BUDGET UNIT (MBU) DETERMINATION – APPLICANT

Case Name	County District	County Use
Case Number	Effective Date Month	Year

Case Type: **APPLICANT OR RECIPIENT USING FEDERAL POVERTY LEVEL (FPL) INCOME STANDARD**

### PART 1

**NOTE:** The only deduction applicable to the Section 1931(b) program is the deduction for educational expenses, as provided in Section 50547, Title 22, California Code of Regulations.

ENTER NAME OF EACH MFBU MEMBER (Do not list unborns)	Name	Name	Name	Name	Name
<b>Person Type</b>	<input type="checkbox"/> Parent A or <input type="checkbox"/> Caretaker Relative	<input type="checkbox"/> Parent B or <input type="checkbox"/> Caretaker Relative	<input type="checkbox"/> Child	<input type="checkbox"/> Child	<input type="checkbox"/> Child

A. NONEXEMPT UNEARNED INCOME (EXCLUDING DISABILITY-BASED INCOME)					
1. Source and amount of nonexempt unearned income:*					
2. Net child/spousal support received. ①					
3. In-kind income (IKI). ②					
4. Income available from PA/other PA (see MC 175-6, line A.4).					
5. Total nonexempt unearned income (add lines 1, 2, 3, and 4).					

\* Sources include: net income from property, Social Security nondisability payments, etc.

① Child/Spousal Support Payments Received	Child support is income to the child, not to the parent or caretaker relative.  Divide the \$50 per month child/spousal support deduction by the number of persons for whom the income is intended. Any unused remainder will be prorated among the remaining persons who still have support payments to apply against the deduction.
② Unearned IKI	Prorate the unearned IKI among the persons who receive the income. Example: Medi-Cal family budget unit (MFBU) of four receives free housing. Use IKI for four and each person receives one-fourth of the IKI. Add an unborn's share of IKI to the pregnant woman's share. If the pregnant woman is Public Assistance (PA)/other PA, and not in the MFBU, give the unborn's share to the father of the unborn if he is in the MFBU.
Child/Spousal support and/or IKI computations:	

B. DISABILITY-BASED INCOME					
6. Source and amount of disability-based income:					

<b>C. NONEXEMPT EARNED INCOME</b>					
7. Source and amount of nonexempt earned income (include TWC, SDI and earned IKI).					
8. \$90 work expense deduction.					
9. Remaining nonexempt earned income (subtract line 8 from line 7).					
10. Child care deduction.					
11. Other deductions.					
12. Total deductions (add lines 10 and 11).					
13. Total net nonexempt earned income (subtract line 12 from line 9).					

<b>D. TOTAL COUNTABLE INCOME</b>					
14. Total countable nonexempt unearned income (line 5).					
15. Total countable disability-based income (line 6).					
16. Total countable nonexempt earned income (line 13).					
17. Income allocated from LTC/B&C person to family members at home (from MC 176W, Part B, or from MC 175-7, line C.2).					
18. Total countable income (add lines 14, 15, 16 and 17).					

<b>E. TOTAL NET COUNTABLE INCOME AFTER OTHER DEDUCTIONS</b>					
19. Court-ordered child support or alimony.					
20. Income used to determine PA eligibility (see MC 175-6, Section B).					
21. Other deductions:					
22. Total deductions (add lines 19, 20 and 21).					
23. Total net countable income (subtract line 22 from line 18). Enter this amount on MC 175-4 if no parent in MFBU. If parent in MFBU, continue.					

<b>F. PARENTAL/SPOUSAL (P/S) ALLOCATION COMPUTATION (Skip if no parent in MFBU)</b>					
24. P/S own needs (FPL for one person).					
25. Total unearned in-kind income, income from PA, or income allocated from LTC/B&C spouse (add lines 3, 4 and 17).					
26. Parent's total net nonexempt income (subtract line 25 from line 23).					
27. Parent's net nonexempt income less P/S own needs (subtract line 24 from line 26); if negative, enter 0.					
28. Number of persons for whom Parent A is responsible (MC 175-2, Section A). DO NOT COUNT PARENT A.					
29. Number of persons for whom Parent B is responsible (MC 175-2, Section B). DO NOT COUNT PARENT B.					
30. Child's natural/adoptive parent – check if Parent A and/or B (see MC 175-2).			<input type="checkbox"/> A <input type="checkbox"/> B	<input type="checkbox"/> A <input type="checkbox"/> B	<input type="checkbox"/> A <input type="checkbox"/> B
31. Parent A's allocation to spouse (if any) and natural/adopted children (divide Parent A's line 27 by line 28 and enter in applicable box). Do not enter under Parent B if unmarried.					

32. Parent B's allocation to spouse (if any) and natural/adopted children (divide Parent B's line 27 by line 29 and enter in applicable box). Do not enter under Parent A if unmarried.					
33. Enter the lesser of either line 24 or 26.					
34. Parent's total net nonexempt income (add lines 25, 33 and 31 or 32).					
35. Child's total net nonexempt income (add lines 23, 31 and 32); enter on MC 175-4.					

**PART 2**

<b>SECTION 1931(b) MBU DETERMINATION – PROPERTY AND INCOME</b>	
<input type="checkbox"/> Section 1931(b) FPL Income Test	<input type="checkbox"/> Section 1931(b) Property Determination
<p>Instructions:</p> <ol style="list-style-type: none"> <li>1. Include unborn in the mother's MBU and property limit/FPL income level unless mother is married, and only her separate children want Medi-Cal. If the pregnant woman is PA/other PA, include the unborn in the spouse's or father's MBU.</li> <li>2. Do not include an excluded child.</li> <li>3. Do not list MBU members in more than one MBU.</li> <li>4. If any MBU has excess property, check to see if Medi-Cal linkage still exists for other family members.</li> <li>5. Property determinations: enter the allocation for each spouse from MC 324, line 29.</li> <li>6. Enter each person's net nonexempt income from lines 34 or 35.</li> </ol>	

MBU NUMBER _____	
Person name/number	Net Nonexempt <input type="checkbox"/> Property <input type="checkbox"/> Income
1.	
2.	
3.	
4.	
5.	
6.	
<b>TOTAL</b>	
MBUs <input type="checkbox"/> Property Limit <input type="checkbox"/> FPL	
Check one: <input type="checkbox"/> Excess property – FAIL <input type="checkbox"/> Income ineligibility – exceeds FPL – Property eligible – FAIL <input type="checkbox"/> Income eligible – at or below FPL – Property eligible – PASS	

MBU NUMBER _____	
Person name/number	Net Nonexempt <input type="checkbox"/> Property <input type="checkbox"/> Income
1.	
2.	
3.	
4.	
5.	
6.	
<b>TOTAL</b>	
MBUs <input type="checkbox"/> Property Limit <input type="checkbox"/> FPL	
Check one: <input type="checkbox"/> Excess property – FAIL <input type="checkbox"/> Income ineligibility – exceeds FPL – Property eligible – FAIL <input type="checkbox"/> Income eligible – at or below FPL – Property eligible – PASS	

MBU NUMBER _____	
Person name/number	Net Nonexempt <input type="checkbox"/> Property <input type="checkbox"/> Income
1.	
2.	
3.	
4.	
5.	
6.	
TOTAL	
MBUs	<input type="checkbox"/> Property Limit <input type="checkbox"/> FPL
Check one:	
<input type="checkbox"/> Excess property – FAIL	
<input type="checkbox"/> Income ineligibility – exceeds FPL – Property eligible – FAIL	
<input type="checkbox"/> Income eligible – at or below FPL – Property eligible – PASS	

MBU NUMBER _____	
Person name/number	Net Nonexempt <input type="checkbox"/> Property <input type="checkbox"/> Income
1.	
2.	
3.	
4.	
5.	
6.	
TOTAL	
MBUs	<input type="checkbox"/> Property Limit <input type="checkbox"/> FPL
Check one:	
<input type="checkbox"/> Excess property – FAIL	
<input type="checkbox"/> Income ineligibility – exceeds FPL – Property eligible – FAIL	
<input type="checkbox"/> Income eligible – at or below FPL – Property eligible – PASS	

MBU NUMBER _____	
Person name/number	Net Nonexempt <input type="checkbox"/> Property <input type="checkbox"/> Income
1.	
2.	
3.	
4.	
5.	
6.	
TOTAL	
MBUs	<input type="checkbox"/> Property Limit <input type="checkbox"/> FPL
Check one:	
<input type="checkbox"/> Excess property – FAIL	
<input type="checkbox"/> Income ineligibility – exceeds FPL – Property eligible – FAIL	
<input type="checkbox"/> Income eligible – at or below FPL – Property eligible – PASS	

MBU NUMBER _____	
Person name/number	Net Nonexempt <input type="checkbox"/> Property <input type="checkbox"/> Income
1.	
2.	
3.	
4.	
5.	
6.	
TOTAL	
MBUs	<input type="checkbox"/> Property Limit <input type="checkbox"/> FPL
Check one:	
<input type="checkbox"/> Excess property – FAIL	
<input type="checkbox"/> Income ineligibility – exceeds FPL – Property eligible – FAIL	
<input type="checkbox"/> Income eligible – at or below FPL – Property eligible – PASS	

## SECTION 1931(b) SNEEDE V. KIZER NET NONEXEMPT INCOME DETERMINATION AND MINI BUDGET UNIT (MBU) DETERMINATION – RECIPIENT

Case Name	County District	County Use
Case Number	Effective Date Month	Year

Case Type: **RECIPIENT USING MINIMUM BASIC STANDARD OF ADEQUATE CARE (MBSAC)**

### PART 1

**NOTE:** The only deduction applicable to the Section 1931(b) program is the deduction for educational expenses, as provided in Section 50547, Title 22, California Code of Regulations.

ENTER NAME OF EACH MFBU MEMBER (Do not list unborns)	Name	Name	Name	Name	Name
<b>Person Type</b>	<input type="checkbox"/> Parent A or <input type="checkbox"/> Caretaker Relative	<input type="checkbox"/> Parent B or <input type="checkbox"/> Caretaker Relative	<input type="checkbox"/> Child	<input type="checkbox"/> Child	<input type="checkbox"/> Child

A. NONEXEMPT UNEARNED INCOME (EXCLUDING DISABILITY-BASED INCOME)				
1. Source and amount of nonexempt unearned income.*				
2. Net child/spousal support received. ①				
3. In-kind income (IKI). ②				
4. Income available from PA/other PA (see MC 175-6, line A.4).				
5. Total nonexempt unearned income (add lines 1, 2, 3, and 4).				

\* Sources include: net income from property, Social Security nondisability payments, etc.

① Child/Spousal Support Payments Received	Child support is income to the child, not to the parent or caretaker relative.  Divide the \$50 per month child/spousal support deduction by the number of persons for whom the income is intended. Any unused remainder will be prorated among the remaining persons who still have support payments to apply against the deduction.
② Unearned IKI	Prorate the unearned IKI among the persons who receive the income. Example: Medi-Cal family budget unit (MFBU) of four receives free housing. Use IKI for four and each person receives one-fourth of the IKI. Add an unborn's share of IKI to the pregnant woman's share. If the pregnant woman is Public Assistance (PA)/other PA, and not in the MFBU, give the unborn's share to the father of the unborn if he is in the MFBU.
Child/Spousal support and/or IKI computations:	

B. DISABILITY-BASED INCOME				
6. Source and amount of disability-based income. (Continue to line 7, even if no disability income.)				

7. Section 1931(b) \$240 deduction.					
8. Remaining nonexempt disability-based income (subtract line 7 from line 6). Enter 0 if negative.					
9. Unused Section 1931(b) deduction. (If line 6 is 0, enter \$240. Otherwise, subtract line 6 from line 7.) Enter 0 if negative.					

<b>C. NONEXEMPT EARNED INCOME</b>					
10. Source and amount of nonexempt earned income (include TWC, SDI and earned IKI).					
11. Section 1931(b) deduction from line 9.					
12. Remaining nonexempt earned income (subtract line 11 from line 10).					
13. 50% earned income deduction (one-half of line 12).					
14. Child care deduction.					
15. Other deductions.					
16. Total deductions (add lines 13, 14 and 15).					
17. Total net nonexempt earned income (subtract line 16 from line 12).					

<b>D. TOTAL COUNTABLE INCOME</b>					
18. Total countable nonexempt unearned income (line 5).					
19. Total countable disability-based income (line 8).					
20. Total countable nonexempt earned income (line 17).					
21. Income allocated from LTC/B&C person to family members at home (from MC 176W, Part B, or from MC 175-7, line C.2).					
22. Total countable income (add lines 18, 19, 20 and 21).					

<b>E. TOTAL NET COUNTABLE INCOME AFTER OTHER DEDUCTIONS</b>					
23. Court-ordered child support or alimony.					
24. Income used to determine PA eligibility (see MC 175-6, Section B).					
25. Other deductions:					
26. Total deductions (add lines 23, 24 and 25).					
27. Total net countable income (subtract line 26 from line 22). Enter this amount on MC 175-4 if no parent in MFBU. If parent in MFBU, continue.					

<b>F. PARENTAL/SPOUSAL (P/S) ALLOCATION COMPUTATION (Skip if no parent in MFBU)</b>					
28. P/S own needs (subtract \$1 from MBSAC for one person).					
29. Total unearned in-kind income, income from PA, or income allocated from LTC/B&C spouse (add lines 3, 4 and 21).					
30. Parent's total net nonexempt income (subtract line 29 from line 27).					

31. Parent's net nonexempt income less P/S own needs (subtract line 28 from line 30); if negative, enter 0.					
32. Number of persons for whom Parent A is responsible (MC 175-2, Section A). DO NOT COUNT PARENT A.					
33. Number of persons for whom Parent B is responsible (MC 175-2, Section B). DO NOT COUNT PARENT B.					
34. Child's natural/adoptive parent – check if Parent A and/or B (see MC 175-2).			<input type="checkbox"/> A <input type="checkbox"/> B	<input type="checkbox"/> A <input type="checkbox"/> B	<input type="checkbox"/> A <input type="checkbox"/> B
35. Parent A's allocation to spouse (if any) and natural/adopted children (divide Parent A's line 31 by line 32 and enter in applicable box). Do not enter under Parent B if unmarried.					
36. Parent B's allocation to spouse (if any) and natural/adopted children (divide Parent B's line 31 by line 33 and enter in applicable box). Do not enter under Parent A if unmarried.					
37. Enter the lesser of either line 28 or 30.					
38. Parent's total net nonexempt income (add lines 29, 37 and 35 or 36).					
39. Child's total net nonexempt income (add lines 27, 35 and 36); enter on MC 175-4.					

**PART 2**

<b>SECTION 1931(b) MBU DETERMINATION – PROPERTY AND INCOME</b>	
<input type="checkbox"/> Section 1931(b) MBSAC Income Test	<input type="checkbox"/> Section 1931(b) Property Determination
<p>Instructions:</p> <ol style="list-style-type: none"> <li>1. Include unborn in the mother's MBU and property limit/MBSAC income level unless mother is married, and only her separate children want Medi-Cal. If the pregnant woman is PA/other PA, include the unborn in the spouse's or father's MBU.</li> <li>2. Do not include an excluded child.</li> <li>3. Do not list MBU members in more than one MBU.</li> <li>4. If any MBU has excess property, check to see if Medi-Cal linkage still exists for other family members.</li> <li>5. Property determinations: enter the allocation for each spouse from MC 324, line 29.</li> <li>6. Enter each person's net nonexempt income from lines 38 or 39.</li> </ol>	

MBU NUMBER _____	
Person name/number	Net Nonexempt <input type="checkbox"/> Property <input type="checkbox"/> Income
1.	
2.	
3.	
4.	
5.	
6.	
<b>TOTAL</b>	
MBUs <input type="checkbox"/> Property Limit <input type="checkbox"/> MBSAC	
Check one: <input type="checkbox"/> Excess property – FAIL <input type="checkbox"/> Income ineligibility - at/exceeds MBSAC – Property eligible – FAIL <input type="checkbox"/> Income eligible – below MBSAC – Property eligible – PASS	

MBU NUMBER _____	
Person name/number	Net Nonexempt <input type="checkbox"/> Property <input type="checkbox"/> Income
1.	
2.	
3.	
4.	
5.	
6.	
<b>TOTAL</b>	
MBUs <input type="checkbox"/> Property Limit <input type="checkbox"/> MBSAC	
Check one: <input type="checkbox"/> Excess property – FAIL <input type="checkbox"/> Income ineligibility - at/exceeds MBSAC – Property eligible – FAIL <input type="checkbox"/> Income eligible – below MBSAC – Property eligible – PASS	

MBU NUMBER _____	
Person name/number	Net Nonexempt <input type="checkbox"/> Property <input type="checkbox"/> Income
1.	
2.	
3.	
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5.	
6.	
TOTAL	
MBUs <input type="checkbox"/> Property Limit <input type="checkbox"/> MBSAC	
Check one: <input type="checkbox"/> Excess property – FAIL <input type="checkbox"/> Income ineligibility - at/exceeds MBSAC – Property eligible – FAIL <input type="checkbox"/> Income eligible – below MBSAC – Property eligible – PASS	

MBU NUMBER _____	
Person name/number	Net Nonexempt <input type="checkbox"/> Property <input type="checkbox"/> Income
1.	
2.	
3.	
4.	
5.	
6.	
TOTAL	
MBUs <input type="checkbox"/> Property Limit <input type="checkbox"/> MBSAC	
Check one: <input type="checkbox"/> Excess property – FAIL <input type="checkbox"/> Income ineligibility - at/exceeds MBSAC – Property eligible – FAIL <input type="checkbox"/> Income eligible – below MBSAC – Property eligible – PASS	

MBU NUMBER _____	
Person name/number	Net Nonexempt <input type="checkbox"/> Property <input type="checkbox"/> Income
1.	
2.	
3.	
4.	
5.	
6.	
TOTAL	
MBUs <input type="checkbox"/> Property Limit <input type="checkbox"/> MBSAC	
Check one: <input type="checkbox"/> Excess property – FAIL <input type="checkbox"/> Income ineligibility - at/exceeds MBSAC – Property eligible – FAIL <input type="checkbox"/> Income eligible – below MBSAC – Property eligible – PASS	

MBU NUMBER _____	
Person name/number	Net Nonexempt <input type="checkbox"/> Property <input type="checkbox"/> Income
1.	
2.	
3.	
4.	
5.	
6.	
TOTAL	
MBUs <input type="checkbox"/> Property Limit <input type="checkbox"/> MBSAC	
Check one: <input type="checkbox"/> Excess property – FAIL <input type="checkbox"/> Income ineligibility - at/exceeds MBSAC – Property eligible – FAIL <input type="checkbox"/> Income eligible – below MBSAC – Property eligible – PASS	