

DEPARTMENT OF HEALTH SERVICES

714/744 P STREET
SACRAMENTO, CA 95814
(916) 445-1912



September 2, 1988

TO: All County Welfare Directors
All County Administrative Officers

Letter No.: 88-67

SUBJECT: LYNCH V. RANK FORM -- "PICKLE NEEDS TEST" (DHS 7075)

This is to inform you, if you are not already aware, that a Lynch v. Rank "Pickle Needs Test" form (DHS 7075) was designed and available to order from the Department of Health Services (DHS) warehouse as of November 1987 (copy attached). We want to apologize for the delay in informing counties of this new form.

The DHS 7075 was developed as a possible short cut in determining an applicant's/beneficiary's financial eligibility under the "Pickle" amendment. This form is to be used when both members of a couple pass the screening test and when there is a single individual who passes the screening test. If only one member of a couple passes the screening test, counties are to by-pass the DHS 7075 and go onto the DHS 7021 (Financial Eligibility Worksheet). If a person(s) is determined eligible after completing the "Pickle Needs Test", there is no need to complete the DHS 7021.

Please note the recent revisions indicated on the attached copy of the DHS 7075. These changes will not be implemented for several months, therefore, when using existing stock please incorporate the changes.

If you have any questions, please contact RaNae M. Dunne at (916) 324-4955/ATSS 454-4955.

Sincerely,

Original signed by

Frank S. Martucci, Chief
Medi-Cal Eligibility Branch

Attachment

cc: Medi-Cal Liaisons
Medi-Cal Consultants

Expiration Date: September 2, 1988

PICKLE NEEDS TEST

Case Name _____

Case No. _____

Applicant's Name _____

PICKLE APPLICANT'S TOTAL COUNTABLE INCOME

	a. ABD—MN	b. ABD—MN Spouse Who Passes Screening
A. NONEXEMPT UNEARNED INCOME		
1. RSDI		
2. Net income from property		
3. Other — Itemize		
4.		
5. Total (add 1 through 4)		
6. Combined unearned income		
7. Any income deduction	—20	
8. Countable unearned income (6 minus 7)		

B. NONEXEMPT EARNED INCOME

9. Gross earned income	a.	b.
10. Combined earned income		
11. \$65 earned income deduction plus \$ _____ unused \$20		
12. Remainder (10 minus 11)		
13. Countable earned income (divide 12 by 2)		
14. Total countable income (add 8 and 13)		

NOTE: When both members of a couple pass the screening test, combine their incomes and disregard amounts when computing the needs test.

~~If only one member of the couple passes the screening, use only his/her income and disregard for the needs test.~~ ✓

If both members of the couple pass the screening but are ineligible after completing the needs test, recompute the needs test for each individual using only his/her income and disregard.

C. NEEDS TEST/COUNTABLE INCOME

15. Total Income (line 14, above)	\$
16. Title II COLA Disregard amount	\$
17. Total Countable Income (subtract line 16 from line 15)	\$
*18. SSI/SSP Payment Level	\$

*IF LINE 17 EXCEEDS LINE 18, THIS PERSON IS NOT PICKLE ELIGIBLE.

Eligibility Worker Signature _____

Worker Number _____

Date _____