DEPARTMENT OF HEALTH SERVICES

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(916) 657-2941

February 10, 1995

Letter No.: 95-12

TO: All County Welfare Directors

All County Administrative Officers

All County Medi-Cal Program Specialists/Liaisons

All TB Coordinators

TUBERCULOSIS (TB) PROGRAM

In the course of implementing the TB program several questions have arisen. The purpose of this letter is to provide answers and clarification on these issues, and to provide the 1995 TB. Standards, except for income, i.e., the Parental Allocation, Property limits, and Parental Deduction. We are also providing worksheet examples on treatment of income and property. Enclosure 1 contains the Questions and Answers, Enclosure 2, pen and ink changes to the MC 280 and 281, Enclosure 3, budget examples.

The 1995 TB income standard is not yet available from the Health Care Financing Administration (HCFA).

In the interim, please continue to use the 1994 income standards until HFCA has given final confirmation on the 1995 income standards.

NOTE: If a client is denied because of income, please hold this case pending the implementation of the 1995 income standards. This individual may be found eligible under the 1995 income standards.

1994 TB INCOME STANDARDS:

Individual \$748.50 Couple \$971.50

1995 SUPPLEMENTAL SECURITY INCOME STANDARD ALLOCATION:

\$ 229

1995 PROPERTY LIMITS:

Individual \$ 2000 Couple \$ 3000 All County Welfare Directors
All County Administrative Officers
All County Medi-Cal Program Specialists/Liaisons
All TB Coordinators
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1995 PARENTAL DEDUCTION:

Individual \$458 Couple----\$687

If you have questions, please contact Sharon Garcia at (916) 657-5327 or Mary Maestas-Sandoval at (916) 657-1248.

Sincerely,

ORIGINAL SIGNED BY,

Frank S. Martucci, Chief Medi-Cal Eligibility Branch

Enclosures

ENCLOSURE 1

QUESTION 1:

What are the eligibility requirements for the Tuberculosis (TB) Medi-Cal program?

ANSWER 1:

Section 5N of the Medi-Cal Eligibility Procedures Manual describes the following in detail. To be eligible for the TB Program, a person must:

- Be infected with TB. This factor links a person to Medi-Cal.
- Not be a Medi-Cal beneficiary whose coverage is mandated by federal laws.
- Be a United States citizen or a person who has satisfactory immigration status.
- Have income and resources which do not exceed the maximum amount for a disabled individual
 under the Supplemental Security Income (SSI) program. Income cannot exceed an amount
 referred to as the TB income standard. (See details under income in Part E of the Procedures).
- Meet all other Medi-Cal requirements. This factor addresses nonlinking Medi-Cal requirements such as cooperation, verification, status reporting etc.

QUESTION 2:

Do deductions in Section 50549.1 through 50551.6 (Guardian and Conservatorship Fees, Student Deduction etc.) apply to the TB program? At this time there is no place for these deductions on the Eligibility worksheets (MC 280 TB 9/94) or (MC 281 TB 9/94). If allowed, how shall these be recorded?

ANSWER 2:

Yes. These deductions would apply. (See Procedures Part E, 4B (2.) Determination of Net Nonexempt Income.)

To accommodate these deductions, we suggest pen and ink changes to the MC 280 (TB Program Financial Eligibility Worksheet-Eligible Child) and the MC 281 (TB Program Income Eligibility Worksheet-Individual or Couple, Applicant with an Ineligible Spouse) and their related instructions. Enclosure 2 contains examples of these changes.

Forms will be corrected to reflect these deductions after the initial supply of the forms has been exhausted.

Example 7 contains an example of how the student deduction is listed on the MC 281.

QUESTION 3:

A child is defined as an unmarried person under the age of 18. Does this mean a person living with their parents?

ANSWER 3:

Yes, this means an unmarried person under the age of 18 living with his or her parents.

QUESTION 4:

Are TB applicants between the ages of 18 and 21 and who are full-time students considered a child under the TB program?

ANSWER 4:

No. These TB applicants would be considered adults for purposes of determining TB program eligibility.

QUESTION 5:

Does the ineligible child mean an ineligible child living with his or her parents?

ANSWER 5:

Yes.

QUESTION 6:

Do we deem stepparent's income or resources?

ANSWER 6:

No. We do not deem from a stepparent's income or resources. As in <u>Sneede</u> procedures, we use only the parent's income which is in his/her own name and his/her share of community property and separate property.

QUESTION 7:

When a TB application is received by the county welfare department and the worker identifies potential eligibility for full-scope Medi-Cal, is the worker required to inform the TB applicant of such potential eligibility? If yes, must the county obtain a SAWS 1 and complete the face-to-face interview?

ANSWER 7:

Yes. The county must inform the TB applicant of such potential eligibility. If the applicant wishes to pursue that determination, he/she must complete a SAWS 1 and a face-to-face interview. If the person is actively infected, a family member may go into the county to apply for this individual if he desires full-scope benefits. If the actual TB-infected person has no family member, the county may complete the SAWS 1 on his/her behalf to preserve that application date. The county should continue processing the TB application but delay the face-to-face interview until the person can come to the interview. After that interview, the county can resume the eligibility determination for full-scope Medi-Cal.

QUESTION 8:

Is the worker required to redetermine ongoing TB eligibility (complete the TB income/property worksheets) with each Quarterly Status Report processed?

ANSWER 8:

Yes. This is a general Medi-Cal requirement and it is not waived under the TB program.

QUESTION 9:

Is the annual redetermination handled the same as the initial application? That is, is the face-to-face interview waived? Would the client be referred to the clinic/provider to complete the MC 274 PART C to establish that the clinic is again the client's authorized representative, and other forms such as the MC 210?

ANSWER 9:

Annual redeterminations are handled similar to the initial application. The face-to-face may be completed by the TB provider. Part A of the MC 274 contains client information and is not needed for the annual redetermination. A new certification (MC 274 Part B) is required documenting TB infection and the need for additional TB-related services. MC 274 Part C establishes the clinic as the client's authorized representative. It is valid until a determination has been made or the hearing process is over. It is also required at the annual redetermination. Providers can line out Part A and forward completed Part B and Part C to the county.

QUESTION 10:

Will there be training for counties on using the TB forms and determining eligibility?

ANSWER 10:

No. However, counties may submit their questions to Sharon Garcia at (916) 657-5327 or Mary Maestas-Sandoval at (916) 657-1248.

QUESTION 11:

If a TB applicant must be otherwise eligible for Medi-Cal (linkage), does this include individuals who have been determined presumptively disabled and therefore eligible for Medi-Cal pending a State Disability Evaluation.

ANSWER 11:

"Otherwise eligible" refers to general nonlinking requirements not specifically listed as a TB program requirement, such as cooperation requirements, the California residency requirement, etc. A person who is TB infected is linked to Medi-Cal by being TB infected. A person who is eligible for full-scope Medi-Cal without a share of cost (SOC) does not need to be covered under the TB program regardless of how he/she is linked to Medi-Cal. However, if a TB infected person is eligible for full-scope Medi-Cal with a SOC, that person should be evaluated for the TB program, regardless of how he/she is linked to the other Medi-Cal program since that person could be eligible for the TB program and not have a SOC for outpatient TB services.

QUESTION 12:

In Example 5 in the procedures (Part L. Examples-Treatment of income and property), how do you get \$669 parental deduction for a couple in 1994 (couple Federal Benefit Rate (FBR))?

ANSWER 12:

This amount is based on the FBR for a couple (currently \$669 for a couple in 1994.) The FBR is provided by the Social Security Administration. The FBR is also used in certain income determinations in the Qualified Medicare Beneficiary (QMB), and Pickle programs.

QUESTION 13:

If the TB clinic/provider is to act on behalf of the applicant/beneficiary, would the TB granting/denial Notice of Action (NOA) be sent to the TB clinic or provider?

ANSWER 13:

The choice is the client's. It may be sent to the clinic or to any address the applicant/beneficiary, chooses. See procedures, Part M. Medi-Cal TB Questions and Answers, Question 10.

QUESTION 14:

When working with homeless applicants via a TB clinic or provider, are counties required to meet the promptness requirements in Medi-Cal Eligibility Manual 50177 for determining eligibility for the TB program?

ANSWER 14:

Yes.

QUESTION 15:

How many MC 210's are required for a family applying for the TB program?

ANSWER 15:

We are requiring only one MC 210, even if one family member is age 18-21 and is an adult for purposes of the TB program. However, the 18-21 year old has the right to complete a separate MC 210 if he/she chooses. If the 18-21 year old were the only applicant, he/she would complete the MC 210.

QUESTION 16:

If the TB applicant has other family members who want RESTRICTED Medi-Cal benefits, will the clinic/provider refer the family to the county welfare office to apply for Medi-Cal?

ANSWER 16:

Yes. This referral is made anytime family members want Medi-Cal other than the Medi-Cal TB program, unless the family member who will go to the county has active TB.

QUESTION 17:

Do we check the restricted box for TB on the MC 13?

ANSWER 17:

No. You need to check the box labeled "other" and write in "TB" in the space next to that box. If the client is requesting full-scope benefits, check the box that indicates "Full Medi-Cal benefits".

QUESTION 18:

In determining income eligibility, is actual income used or is weekly/biweekly converted to a monthly amount according to Section 50517, Title 22, CCR: i.e., the 2.167 or 4.133 factor?

ANSWER 18:

Actual income is used.

QUESTION 19:

Is a couple considered married if they are "holding out" as a married couple? Holding out means the couple has not been validly married, but has presented themselves to the community as a married couple.

ANSWER 19:

No, they are not treated as a married couple under the TB program.

QUESTION 20:

Is the value of property determined as of 12:01 A.M. of the first day of the month or at the lowest point during the month.

ANSWER 20:

Property is determined according to 20 Code of Federal Regulations Section 416.1207. Property determinations are made as of the first moment of the month.

QUESTION 21:

How many status reports are required when a person is dually eligible or has continuing eligibility under another program?

ANSWER 21:

Section 50191 requires status reports for all Medi-Cal Family Budget Units with at least one Aid to Families with Dependent Children-Medically Needy (AFDC-MN) or Medically Indigent (MI) person. However, one status report is acceptable under the Medi-Cal program, regardless of how many "programs" or aid codes the person or family is in.

Question 22:

If the clinic conducts the face-to-face interview, who should sign the MC 219 on behalf of the EW (Rights and Responsibilities).

ANSWER 22:

The clinic staff person or provider who initially goes over the form with the client should sign the MC 219.

QUESTION 23

Can the county hold a TB application for at least a month while verification of actual income is pending?

ANSWER 23

Applications are not "held", but there must be verification before eligibility can be approved. Counties must verify in the same manner that is used for any other Medi-Cal case according to a promptness requirement in Section 50177, Title 22.

QUESTION 24

Will there be separate MC 219 forms (Rights and Responsibilities) for the TB program?

ANSWER 24

No. The regular MC 219 (Rights and Responsibilities will be used under the TB Program.

QUESTION 25

In Procedures E-2, it states that Medi-Cal beneficiaries whose coverage is mandated by federal law are not eligible for the TB program. It also states that a beneficiary eligible for full-scope, zero SOC Medi-Cal does not need coverage under the TB program. If a beneficiary had a SOC and was covered by the TB program, must the county discontinue TB program coverage if the changes to a zero-SOC full-scope aid code? For example, an individual is in another aid code such as Aid Code 87, (MI-Confirmed Pregnancy with a SOC) and is also receiving TB benefits under 7H. If in the next month this person receives no SOC Medically Indigent-Confirmed Pregnancy under Aid Code 86, may this person still remain in Aid Code 7H?

ANSWER 25

Yes. This person may remain in aid code 7H. Counties do not have to discontinue TB program coverage if a person moves to a zero-SOC full-scope aid code unless the aid code is one of the following. In that case, the Medi-Cal Eligibility Data System would generate an Alert Message indicating these aid codes were incompatible. Aid codes that are INCOMPATIBLE WITH THE TB PROGRAM ARE AS FOLLOWS:

- 03 Adoption Assistance Program (federal)
- 3A CAAP AFDC (FG)
- 3C CAAP AFDC (U)
- 7A Child 100 Percent Program
- 10 Aged (SSI/SSP)
- 20 Blind (SSI/SSP)
- 30 AFDC-FG (cash)

- 35 AFDC-U (cash)
- 39 Transitional Medi-Cal
- 4C Voluntary AFDC-FC
- 42 AFDC-Foster Care/Federal
- 44 Income Disregard Program (Pregnancy related/Postpartum)
- 47 Income Disregard Program (Infant-full scope)
- 48 Income Disregard Program (OBRA Pregnancy-related postpartum)
- 49 Income Disregard Program (IRCA Pregnancy related/Postpartum)
- 54 Four Month Continuation
- 59 Additional Transitional Medi-Cal
- 60 Disabled (SSI/SSP)
- 69 Income Disregard Program (OBRA Infant Emergency Services)
- 7C 100 Percent Program (OBRA) Emergency and Pregnancy Related Services
- 72 133 Percent Program
- 74 133 Percent Program (OBRA)

QUESTION 26

Under the TB program, what is the definition of family member?

ANSWER 26

Family member means the following persons living in the home:

- (1) A child or sibling children.
- (2) The parents married or unmarried of the sibling children.
- (3) The stepparents of the sibling children.
- (4) The separate children of family member means a single person of a married couple.

QUESTION 27

Can a TB case be transferred to another county?

ANSWER 27

This case would be transferred the same as any other Medi-Cal case.

ENCLOSURE 2:

Pen and ink changes to the MC 280, MC 281 and their instructions.

ENLIOSULE 2

TUBERCULOSIS (TB) PROGRAM FINANCIAL ELIGIBILITY WORK SHEET—ELIGIBLE CHILD WITH INELIGIBLE PARENT OR PARENT(S)

CASE NAME			,	CASE	NUMBER	
APPLICANT'S NAME						
PART I. INELIGIBLE PARENT'S UNEARNED INCOME		,	· 			
 Parent's unearned income—do not include public at Do not include parent's income if spouse is PA, other 			or TB parent's in	come.	s	
2. Allocation for ineligible children (if no children, enter	zero in Pa	art (.2.c.). Do no	t include TB app	licant or		
TB-eligible children.	CHILD I	11 CHILD #	2 CHILD #3	CHR.5 #4		
 a. Standard SSI allocation (Federal Benefit Rate [FBR] for a couple minus FBR for an individual): 						
b. Minus child's income:	<u></u>					
c. Total allocation:		+	_ +	_ +	_ = \$	
3. Remaining unearned income (subtract line l.2.c. fro	m line I.1.)	:			\$	
PART II. INELIGIBLE PARENT'S EARNED INCOME						
Parent's gross earned income:			••••		\$	
2. Unused portion of allocation for ineligible child(ren):	,		#8444444444	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	S	
3. Remaining earned income (subtract II.2. from II.1.):					<u> </u>	
IF THERE IS NO INCOME REMAINING AND IF THERE IS I		.3. ARE BOTH . PROCEED WITH		DEEM, GO TO	O PART IV.	
PART III. COMBINED INCOMES—Ineligible Parents		PART IV. TE	ELIGIBILITY O	ALCULATION	1	
Unearned Income		1. Deemed inco	me from Part III.15.			
Remaining unearmed income (after allocation) or zero (from I.3.)		2. Eligible child':	s own OASDI income	•		
Subtract general income exclusion	20	3. Other unearn	ed income			
3. Countable unearned income (to III.11.) SUBTRICT OFFICE OFFICE			val Income exclusion			-20
Earned Income		5. Countable un	samed income (IV.1	. + IV.2. + IV.3 1	con-Other	
Remaining earned income (from II.3.)		6. Child's count	able earned income	(subtract \$65 > 1/2	ASH.	-
5. Subtract balance of general income exclusion		7. Total countait	de income			
5. Remainder		3. Current TB in	come standaro			
7. Subtract work expense exclusion	-65	If line IV-7 is le	ss than or equal to	ine IV.8., this p	erson is income	eligible.
B. Romainder then subtract other deductions						
9. Subtract 1/2 remainder		•				
10. Countable samed income (to III.12.)						
Deamed income						
11. Countable unearned income (from III.3.)						
12. Add countable samed income (from III.10.)]				
13. Total countable income (from III.11. + III.12.)]				
14. Subtract parent deduction*	-	7	•			
15. Deemed income. Enter on Line IV.1.]				

* Individual FBR if one ineligible parent three with child; couple FBR if both ineligible parents live with child.

⁻C 280 TB (9/94)

FINANCIAL ELIGIBILITY WORK SHEET FOR MC 280 TB (TB CHILD)

There is no deeming from any parent if one or both parents is public assistance (PA), other PA, or eligible for the TB program.

PART I. INELIGIBLE PARENT'S UNEARNED INCOME

- Line I.1. Enter the ineligible parent's unearned income.
- Line I.2. (If no ineligible siblings, enter zero in I.2.c.) Enter the first name of any ineligible child(ren) in the box provided. On line 2.a., enter the allocations for any ineligible child(ren) not on PA or not applying for or eligible for the TB program. On line 2.b., enter any income for each of the children, excluding up to \$400 per month but no more than \$1,620 per year if student income. Subtract line 2.b. from 2.a., enter the remainder for each child and total the allocations for all siblings on line 2.c.
- Line I.3. Subtract line I.2.c. from line I.1. (unearned income) and enter the difference. This is the remaining unearned income amount unless the allocation amount (line I.2.c.) exceeds line I.1. (unearned income). In the latter case, the negative figure on line I.3. is carried over to line II.2. (unused portion of allocation).

PART II. INELIGIBLE PARENT'S EARNED INCOME

- Line II.1. Enter the parent's earned income.
- Line II.2. Enter the amount of any allocation for ineligible children that is not offset by unearned income (line I.2.c. minus line I.1.). If line I.1, is greater than line I.2.c., enter zero in line II.2.
- Line II.3. Subtract the allocation amount on line II.2. from line II.1. (gross earned income) and enter the difference.

NOTE: If, at this point (after the allocation for ineligible children), there is no income remaining either earned or unearned, there is no income available for deeming to the eligible child(ren). In this case, enter zero on line III.15, and proceed to Part IV. If there is earned and/or unearned income remaining, complete both Parts III and IV.

PART III. COMBINED INCOMES

Enter any remaining unearned income from line 1.3. on line III.1. and any remaining earned income from line II.3. on line III.4. Follow the instructions on each line.

The entry on the last line of Part III (i.e., the "Deemed Income" line) is carried over to the first line (also titled "Deemed Income") on Part IV, "TB Eligibility Calculation."

PART IV. TB ELIGIBILITY CALCULATION

- Line IV.1. Enter the deemed income from the last line in Part III. The deemed income is treated as unearned income.
- Line IV.2. Enter the applicant's OASDI income.
- Line IV.3. Enter any other unearned income of applicant.
- Line IV.4. Enter the \$20 any income exclusion.
- Line IV.5. Add together the amounts in lines IV.1., IV.2., and IV.3., and then subtract the \$20 any income exclusion (line IV.4.) to obtain the total countable unearned income amount. Subtract any other unearned income amount.
- Line IV.6. Enter the applicant's countable earned income (i.e., earned income after exclusions including the \$65 expense exclusion and 1/2 the remainder.
- Line IV.7.. Add the amounts in lines IV.5. and IV.6. to obtain the total countable income.
- Line IV.8. Enter the current TB income standard.
- If line IV.7, is less than or equal to line IV.8., the child applicant is income eligible.

I UBEHCULOSIS (TB) PROGRAM INCOME ELIGIBILITY WORK SHEET

(Individual or Couple, Applicant With an Ineligible Spouse)

CASE NAME				CASE NUMBER
APPLICANT'S NAME				
PART I. INELIGIBLE SPOUSE'S UNEARNED INCOME				
Ineligible spouse's total unearned income—do not in public assistance (PA) income:				s
 Allocation for ineligible children (if no children, enter Do not include PA- or TB-eligible children or children 			m.	s
Do not include 177 of Ta-engible children of children	CHILD #1	CHILD #2	Снир #3	CHILD #4
	Name	Name		Ame
Ohr had OBLall washing to the last			<u> </u>	
 a. Standard SSI allocation (couple Federal Benefit Rate [FBR] minus individual FBR): 			·	
 b. Subtract child's income (evaluate for student deduction): 		<u> </u>		
c. Total allocation:		+	_ + +	=\$
3. Remaining unearned income (subtract line I.2.c. from	n line l.1.):			
PART II. INELIGIBLE SPOUSE'S EARNED INCOME	· · · · · · · · · · · · · · · · · · ·			
				•
Ineligible spouse's gross earned income:				
2. Unused portion of allocation for ineligible child(ren):				
3. Remaining earned income (subtract II.2, from II.1.):				
PART IV. COMBINED INCOMES (Eligible individual or couple and/ Unearned Income:	• -			
Applicant's gross unearned income:				
 Ineligible spouse's unearned income (line I.3.); Combined unearned income (add lines IV.1. and IV. 				
4. Subtract general income exclusion: Subtract Other Deduction 5 5. Combined countable unearned income:				\$
Earned Income:				Total Unearner
Earned income of applicant and spouse (use amount		-		
7. Subtract balance of general exclusion not offset by				
8. Remaining earned income:				 65
9. Subtract work expense exclusion: Subtract Other Deductions 10. Remaining earned income:				
11. Subtract 1/2 remaining earned income:				
12. Countable earned income:				
				Total Earned
13. Total countable income (add lines IV.5 and IV.12.):				\$ Compined Total
PART V. TB ELIGIBILITY CALCULATION				
1. Current TB income standard for an individual or a c				
2. Enter total countable income (line IV.13):		_		\$
If line V.2. is less than or equal to V.1,	tne applicant	is TB-income	e eligible.	
ELIGIBILITY WORKER SIGNATURE	WORKER NUME	BER C	OMPUTATION DATE	COUNTY USE ONLY
	ŗ	1		1

INCOME ELIGIBILITY WORK SHEET MC 281 TB (Individual or Couple, Applicant With an Ineligible Spouse)

INELIGIBLE SPOUSE'S UNEARNED INCOME

Do not include ineligible spouse's income if he/she receives any public assistance (PA).

- Line I.1. Enter the ineligible spouse's unearned income,
- Line 1.2. (If there are no children, enter zero on line 2.c.) Enter each ineligible child's first name in boxes provided on line 2.a., enter the standard SSI allocation for any ineligible child(ren) not on PA or applying for or eligible for the TB program. On line 2.b., enter any income for each of the children excluding \$400 per month, up to \$1.620 per year of student income. On line 2.c. enter the remainder for each child and total the allocation for each child.
- 1 ine 1.3. Subtract line 1.2.c from line 1.1 (unearned income) and enter the difference. This is the remaining unearned income amount unless the allocation amount (line I.2.c.) exceeds line I.1 (countable unearned income). In the latter case, the negative figure on line I.3. is carried over to line II.2. (unused portion of allocation).

INELIGIBLE SPOUSE'S EARNED INCOME PART II.

- Line II.1. Enter the ineligible spouse's gross earned income.
- Line II.2. Enter the amount of any allocation for ineligible children that is not offset by countable unearned income (line 1.2.c. minus line I.3.). If line I.1. is equal to or greater than line I.2.c, enter zero in line II.2.
- II.3. Subtract the allocation amount on line II.2. from line II.1. (gross earned income) and enter the difference. Line

PART III. INELIGIBLE SPOUSE'S TOTAL INCOME AFTER ALLOCATIONS

Add the amounts in lines I.3. and II.3. to determine the total income after allocations.

NOTE: If, at this point (after the allocation for ineligible children), the total earned and unearned income amount is less than the standard SSI allocation (the difference between the Federal Benefits Rate (FBR) for a couple and the FBR for an individual), there is no income available for deeming to the applicant. In this case, use only the applicant's income in Part IV and the current TB income standard for an individual in Part V. If there is combined earned and/or unearned income remaining in excess of the standard SSI allocation, use the amounts from lines I.3. and II.3. in Part IV and the current TB income standard for a couple in Part V.

PART IV. COMBINED INCOME

- IV.1. Enter the applicant's or potentially eligible couple's unearned income.
- Enter the ineligible spouse's unearned income from line I.3, unless there is no deeming according to Part III. Line
- IV.3. Enter combined unearned income of applicant(s) (line IV.1.) and/or ineligible spouse (line IV.2.). Line
- Line IV.4.
- Enter the \$20 any income exclusion.

 Subtract: eny other unearned income deductions .
 Subtract line IV.4. from IV.3. and enter the difference. (If line IV.3. is less than \$20, enter zero in line IV.5.) IV.5. Line
- IV.6. Line Enter combined earned income of the ineligible spouse (unless there is no deeming from the ineligible spouse according to Part IV.) and the applicant(s). Use line II.3 for ineligible spouse's income. If there is no deeming, enter only the applicant's earned income.
- Line IV.7. Enter unused portion of the \$20 any income exclusion not offset by unearned income.
- Line IV.A. Subtract line IV.7, from IV.6, and enter the difference,
- \$65 work expense exclusion. Subtract any other earned in come deductions. Subtract line IV.9. from IV.8. and enter the difference. l ine IV.9.
- Line IV.10.
- Line IV.11. Enter half of the amount of line IV.10.
- Line IV.12. Subtract line IV.11, from line IV.10, and enter the difference.
- Line IV,13. Add line IV.5, and IV.12 and enter total. This is the amount of income to be considered in determining TB eligibility. Enter on line V.2.

PART V. TB ELIGIBILITY CALCULATION

- V.1. Enter the current, applicable TB level. If income is deemed from the ineligible spouse, use the TB income standard for a couple. Otherwise use the TB income standard for an individual.
- V.2. Enter total countable income from line IV.13. Line

If line V.2. (total countable income) is less than or equal to the current TB payment level, the applicant(s) is/are income eligible for the TB program.

In a situation where there is a potentially eligible child and parent with an ineligible spouse, first determine the eligible parent's TB income eligibility using this work sheet. If the parent is eligible, determine the child's financial eligibility using only the eligible child's countable income.

ENCLOSURE 3

These examples illustrate how the TB income forms are completed. Examples 1-6 follow the examples found in the Procedures Section and narrative is not repeated. Example 7 is new and includes a narrative.

EXAMPLE !

17.251 TB (9/94)

INCOME ELIGIBILITY WORK SHEET USING 1994 STANDARDS (Individual or Couple, Applicant With an Ineligible Spouse)

J-SE NAM	Ε				CASE NUMBER	
I'm	South					
FEL CANT	TS NAME					
<u> 777 R</u>	Saith					
PART I.	INELIGIBLE SPOUSE'S UNEARNED INCOME					
	Ineligible spouse's total unearned income—do not it public assistance (PA) income:					\$
	2. Allocation for ineligible children (if no children, enter	r zero in Part	120)			
	Do not include PA- or TB-eligible children or childre	n applying for	the TB Progra	ं।m; ,		S
		CHILD #1	CHILD #5	CHILD #3	CHILD #4	
		Name	Nuzne	Name Na	AD4	
	 a. Standard SSI allocation (couple Federal Benefit Rate (FBR) minus individual FBR); 					
	b. Subtract child's income (evaluate for student deduction)	ı: _	_	_		
	c. Total allocation:		4	++		_ c
	Remaining unearned income (subtract line I.2.c. from	m line I + 1:				=\$
	5. Hemaning uncarried income (Subtract time 1.2.C. If Of					3
PART II.	INELIGIBLE SPOUSE'S EARNED INCOME					
	Ineligible spouse's gross earned income:					s
	2. Unused portion of allocation for ineligible child(ren):					s
	3. Remaining earned income (subtract II.2, from II.1.):					\$
PART IV.	COMBINED INCOMES (Eligible individual or couple and Unearned Income: 1. Applicant's gross unearned income:		********			\$ <u>202</u>
	2. Ineligible spouse's unearned income (line I.3.):3. Combined unearned income (add lines IV.); and IV.					5 202
Subtra	4. Subtract general income exclusion: 1. CTX P. D. Huchick 5. Combined countable unearned income:					\$ -20
	Earned Income:			************		Total Uncorned
	6. Earned income of applicant and spouse (use amou	unt from line li	.3 for ineligible	spouse): \$		_
	7. Subtract balance of general exclusion not offset by	runeamed inc	ome (line iV.4)):\$]		-
	8. Remaining earned income:			-		-
SA	9. Subtract work expense exclusion: 4.0 Other Deductives 10. Remaining earned income:			s: 7 s:	-65	<u>-</u> -
	11. Subtract 1/2 remaining earned income:					
	12. Countable earned income:					S Total Cornea
	13. Total countable income (add lines IV.5 and IV.12.)					S 187 00 Combined Fotal
PART V.	TB ELIGIBILITY CALCULATION					5 748 SO Eliquible
	1, Current TB income standard for an individual or a					\$ 748 -
	2. Enter total countable income (line IV.13):		-			\$ 80.00
	If line V.2. is less than or equal to V.1,					
_G.BiLIT	Y WORKER SIGNATURE	WORKER NU	MBER (COMPUTATION DATE	COUNTY USE	ONLY
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INSTRUCTIONS INCOME ELIGIBILITY WORK SHEET MC 281 TB (Individual or Couple, Applicant With an Ineligible Spouse)

INELIGIBLE SPOUSE'S UNEARNED INCOME CARTI.

Do not include ineligible spouse's income if he/she receives any public assistance (PA).

- 1.1. Enter the ineligible spouse's unearned income. Line
- Line 1.2. (If there are no children, enter zero on line 2.c.) Enter each ineligible child's first name in boxes provided on line 2.a., enter the standard SSI allocation for any ineligible child(ren) not on PA or applying for or eligible for the TB program. On line 2.b., enter any income for each of the children excluding \$400 per month, up to \$1,620 per year of student income. On line 2.c. enter the remainder for each child and total the allocation for each child.
- 1.3. Subtract line 1.2.c from line 1.1 (unearned income) and enter the difference. This is the remaining unearned income Line amount unless the allocation amount (line i.2.c.) exceeds line i.1 (countable unearned income). In the latter case, the negative figure on line I.3, is carried over to line II.2, (unused portion of allocation).

PART II. INELIGIBLE SPOUSE'S EARNED INCOME

- II.1. Enter the ineligible spouse's gross earned income. Line
- 11.2. Enter the amount of any allocation for ineligible children that is not offset by countable unearned income (line 1.2.c. Line minus line 1.3.). If line 1.1, is equal to or greater than line 1.2.c, enter zero in line 11.2.
- Line II.3. Subtract the allocation amount on line II.2, from line II.1, (gross earned income) and enter the difference.

PART III. INELIGIBLE SPOUSE'S TOTAL INCOME AFTER ALLOCATIONS

Add the amounts in lines I.3, and II.3, to determine the total income after allocations.

NOTE. If, at this point (after the allocation for ineligible children), the total earned and unearned income amount is less than the standard SSI allocation (the difference between the Federal Benefits Rate (FBR) for a couple and the FBR for an individual), there is no income available for deeming to the applicant. In this case, use only the applicant's income in Part IV and the current TB income standard for an individual in Part V. If there is combined earned and/or unearned income remaining in excess of the standard SSI allocation, use the amounts from lines I.3. and II.3. in Part IV and the current TB income standard for a couple in Part V.

PART IV. COMBINED INCOME

- IV.1. Enter the applicant's or potentially eligible couple's unearned income.
- IV.2. Enter the ineligible spouse's unearned income from line I.3, unless there is no deeming according to Part III. line
- IV.3. Enter combined unearned income of applicant(s) (line IV.1.) and/or ineligible spouse (line IV.2.). Line
- Enter the \$20 any income exclusion. Line IV.4.
- Subtract Cry 6Ther unerned more aductions.
 Subtract line W.4. from IV.3. and enter the difference. (If line IV.3, is less than \$20, enter zero in line IV.5.) Line IV.5.
- IV.6. Enter combined earned income of the ineligible spouse (unless there is no deeming from the ineligible spouse Line according to Part IV.) and the applicant(s). Use line II.3 for ineligible spouse's income. If there is no deeming, enter only the applicant's earned income.
- Line IV.7. Enter unused portion of the \$20 any income exclusion not offset by unearned income.
- IV.B. Subtract line IV.7. from IV.6, and enter the difference. Line
- ſV,9. Line
- \$65 work expense exclusion.
 Subtruct any other paped intolly deductions.
 Subtract line 1V.9. from IV.8. and enter the difference. IV.10. Line
- IV.11. Enter half of the amount of line IV.10.
- Line IV.12. Subtract line IV.11, from line IV.10, and enter the difference.
- Line IV.13. Add line IV.5, and IV.12 and enter total. This is the amount of income to be considered in determining TB eligibility. Enter on line V.2.

PART V. TB ELIGIBILITY CALCULATION

- V.1. Enter the current, applicable TB level. If income is deemed from the ineligible spouse, use the TB income standard Line for a couple. Otherwise use the TB income standard for an individual.
- V.2. Enter total countable income from line IV.13. Line

If line V.2, (total countable income) is less than or equal to the current TB payment level, the applicant(s) is/are income eligible for the TB program.

In a situation where there is a potentially eligible child and parent with an ineligible spouse, first determine the eligible parent's TB income eligibility using this work sheet. If the parent is eligible, determine the child's financial eligibility using only the eligible child's countable income.

TUBERCULOSIS (TB) PROGRAM INCOME ELIGIBILITY WORK SHEET

Using 1994 STANDARDS

(Individual or Couple, Applicant With an Ineligible Spouse)

Example.	. «					
CASE NAME					CASE NUMBER	3
JE JONE	NAME					
Mr Tone						
	ELIGIBLE SPOUSE'S UNEARNED INCOME		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
1.	Ineligible spouse's total unearned income—do not in					
	public assistance (PA) income:					s
2.	Allocation for ineligible children (if no children, enter					_
	Do not include PA- or TB-eligible children or children					s
		CHILD #1	CHILD #2		CHILD #4	
	Standard SSI allocation (couple Federal Benefit Rate [FBR] minus individual FBR);					
	b. Subtract child's income (evaluate for student deduction):	: <u> </u>	_			
	c. Total allocation:		_ +	++		=\$
3.	Remaining unearned income (subtract line I.2.c. from	n line l.1.):				s
PART II IN	IELIGIBLE SPOUSE'S EARNED INCOME					
	. Ineligible spouse's gross earned income:					\$
	. Unused portion of allocation for ineligible child(ren):					\$
	. Remaining earned income (subtract II.2, from II.1.):					*
٦.	. Hemaning earned income (Subtract II.2. from fi.1.).					·——
Ų.	OMBINED INCOMES (Eligible individual or couple and nearned Income:	_		_		
1	. Applicant's gross unearned income:					\$
	 Ineligible spouse's unearned income (line I.3.): 					\$ +
	 Combined unearned income (add fines IV.1, and IV.) 					\$
Subtract 5	I. Subtract general income exclusion:		• • • • • • • • • • •			\$ <u>-20</u>
	arned Income:				.•	Total Uncorned
6	Earned income of applicant and spouse (use amout)	nt from line i	I.3 for ineligib	le spouse): \$	2405 °	_
7	7. Subtract balance of general exclusion not offset by	uneamed in	come (line IV.	4):\$	20	_
8	B. Remaining earned income:				2385. oc	•
<u>~9</u>	9. Subtract work expense exclusion:		• • <u> • • •</u>	<u></u> \$:	-65	-
>7 Ruda	. Remaining earlied income:				2320	-
	I. Subtract 1/2 remaining earned income:				- 1160	••
12	2. Countable earned income:					\$ 1160
13	3. Total countable income (add lines iV.5 and IV.12.):					S 1160 Combined Tetal
PART V. T	B ELIGIBILITY CALCULATION					Income co melia h
	Current TB income standard for an individual or a c Enter total countable income (line IV.13):					\$ 748. 50 wellqib
4	If line V.2. is less than or equal to V.1,					· · · · · · · · · · · · · · · · ·
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INSTRUCTIONS INCOME ELIGIBILITY WORK SHEET MC 281 TB (Individual or Couple, Applicant With an Ineligible Spouse)

INELIGIBLE SPOUSE'S UNEARNED INCOME PART I.

Do not include ineligible spouse's income if he/she receives any public assistance (PA).

- Line 1.1. Enter the ineligible spouse's unearned income.
- Line 1.2. (If there are no children, enter zero on line 2.c.) Enter each ineligible child's first name in boxes provided on line 2.a., enter the standard SSI allocation for any ineligible child(ren) not on PA or applying for or eligible for the TB program. On line 2.b., enter any income for each of the children excluding \$400 per month, up to \$1,620 per year of student income. On line 2.c. enter the remainder for each child and total the allocation for each child.
- 1.3. Subtract line 1.2.c from line 1.1 (unearned income) and enter the difference. This is the remaining unearned income Line amount unless the allocation amount (line I.2.c.) exceeds line I.1 (countable unearned income). In the latter case, the negative figure on line I.3. is carried over to line II.2. (unused portion of allocation).

INELIGIBLE SPOUSE'S EARNED INCOME PART II.

- II.1. Enter the ineligible spouse's gross earned income. Line
- Line II.2. Enter the amount of any allocation for ineligible children that is not offset by countable unearned income (line 1.2.c. minus line 1.3.). If line 1.1, is equal to or greater than line 1.2.c, enter zero in line 11.2.
- Line II.3. Subtract the allocation amount on line II.2, from line II.1, (gross earned income) and enter the difference.

PART III. INELIGIBLE SPOUSE'S TOTAL INCOME AFTER ALLOCATIONS

And the amounts in lines I.3, and II.3, to determine the total income after allocations.

NOTE. If, at this point (after the allocation for ineligible children), the total earned and unearned income amount is less than the standard SSI allocation (the difference between the Federal Benefits Rate (FBR) for a couple and the FBR for an individual), there is no income available for deeming to the applicant. In this case, use only the applicant's income in Part IV and the current TB income standard for an individual in Pair V. If there is combined earned and/or unearned income remaining in excess of the standard SSI allocation, use the amounts from lines I.3, and II.3, in Part IV and the current TB income standard for a couple in Part V.

PART IV. COMBINED INCOME

- Line IV.1. Enter the applicant's or potentially eligible couple's uncarned income.
- Enter the ineligible spouse's unearned income from line I.3, unless there is no deeming according to Part III. Line
- IV.3, Enter combined unearned income of applicant(s) (fine IV.1.) and/or ineligible spouse (line IV.2.). Line
- Line IV.4. Enter the \$20 any income exclusion.
- Autificat any office Umatived income cheductions.
 Subtract line IV.4. from IV.3. and enter the difference. (If line IV.3. is less than \$20, enter zero in line IV.5.) IV.5. Line
- Line Enter combined earned income of the ineligible spouse (unless there is no deeming from the ineligible spouse according to Part IV.) and the applicant(s). Use line II.3 for ineligible spouse's income. If there is no deeming, enter only the applicant's earned income.
- IV.7. Enter unused portion of the \$20 any income exclusion not offset by unearned income. Line
- Line IV.8. Subtract line IV.7. from IV.6. and enter the difference.
- \$65 work expense exclusion. Une
- Subtract line IV.9. from IV.8, and enter the difference. IV.10.
- Line IV.11. Enter half of the amount of line IV.10.
- Line IV.12. Subtract line IV.11. from line IV.10, and enter the difference.
- Line IV.13. Add line IV.5, and IV.12 and enter total. This is the amount of income to be considered in determining TB eligibility. Enter on line V.2.

PART V. TB ELIGIBILITY CALCULATION

- V.1. Enter the current, applicable TB level. If income is deemed from the ineligible spouse, use the TB income standard Line for a couple. Otherwise use the TB income standard for an individual.
- V.2. Enter total countable income from line IV.13. Line

If line V.2. (total countable income) is less than or equal to the current TB payment level, the applicant(s) is/are income eligible for the TB program.

In a situation where there is a potentially eligible child and parent with an ineligible spouse, first determine the eligible parent's TB income eligibility using this work sheet. If the parent is eligible, determine the child's financial eligibility using only the eligible child's countable income.

TUBERCULOSIS (TB) PROGRAM USING 1994 STANDARDS (Individual or Couple, Applicant With an Ineligible Spouse)

ASE NAME			· · · · · · · · · · · · · · · · · · ·		CASE NUMBER	}
Tr But	747					
	NAME					
7/8 + The	2 Brown				 	
ART I. IN	ELIGIBLE SPOUSE'S UNEARNED INCOME					
1	. Ineligible spouse's total unearned income—do not in	nclude it inel	igible spouse i	s receiving		
	public assistance (PA) income:					\$
2	. Altocation for ineligible children (if no children, enter	zero in Part	1.2.6.)			
_	Do not include PA- or TB-eligible children or children		· ·	am:		\$
		CHILD #1	CHLD #2	сип.р #3	CHALD #4	
		Name	Name	Name	Name	
	Standard SSI allocation (couple Federal Benefit Rate (FBR) minus individual FBR):					
	b. Subtract child's income (evaluate for student deduction):	:[<u></u>	
	c. Total allocation:		+	+·	·	= \$
3	. Remaining unearned income (subtract line I.2.c. from	n line l.1.):				\$
ART II. II	NELIGIBLE SPOUSE'S EARNED INCOME					
1	neligible spouse's gross earned income:					s
. 2	2. Unused portion of allocation for ineligible child(ren):					\$
	3. Remaining earned income (subtract II.2, from II.1.):					s
						
	COMBINED INCOMES (Eligible individual or couple and	/or ineligible	spouse after in	eligible child allocat	ions)	
-	Applicant's gross unearned income:					s
	2. Ineligible spouse's unearned income (line I.3.):					s +
	3. Combined unearned income (add lines IV.1, and IV					\$
9	4. Subtract general income exclusion:	<u></u>				s -20
ubtract	4. Subtract general income exclusion:					\$
E	arned income:					Total Uncarried
	Earned income of applicant and spouse (use amount	int from line	II.3 for ineligibl		1655	-
	Subtract balance of general exclusion not offset by		•		<u> 20 </u>	-
	8. Remaining earned income:				16.35	_
Subtra	9. Subtract work expense exclusion:		**********		<u>-65</u> 1520	-
1	1. Subtract 1/2 remaining earned income:				<u>- 785</u>	- no
1	2. Countable earned income:					s <u>785. – </u>
1	3. Total countable income (add lines IV.5 and IV.12.):					s <u>785 00</u>
PARTY 7	TB ELIGIBILITY CALCULATION					Computed (Otal
						\$ 99/ 50 TAKO
	Current TB income standard for an individual or a c Enter total countable income (line IV.13):					\$ 785.00
	If line V.2. is less than or equal to V.1,			•		- <u></u>
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INSTRUCTIONS **INCOME ELIGIBILITY WORK SHEET MC 281 TB** (Individual or Couple, Applicant With an Ineligible Spouse)

PART I. INCLIGIBLE SPOUSE'S UNEARNED INCOME

Do not include ineligible spouse's income if he/she receives any public assistance (PA).

- 1.1. Enter the ineligible spouse's unearned income. Line
- Line 1.2. (If there are no children, enter zero on line 2.c.) Enter each ineligible child's first name in boxes provided on line 2.a., enter the standard SSI allocation for any ineligible child(ren) not on PA or applying for or eligible for the TB program. On line 2.b., enter any income for each of the children excluding \$400 per month, up to \$1,620 per year of student income. On line 2.c. enter the remainder for each child and total the allocation for each child.
- 1.3. Subtract line I.2.c from line I.1 (unearned income) and enter the difference. This is the remaining unearned income Line amount unless the allocation amount (line I.2.c.) exceeds line I.1 (countable unearned income). In the latter case, the negative figure on line I.3. is carried over to line II.2. (unused portion of allocation).

INELIGIBLE SPOUSE'S EARNED INCOME

- II.1. Enter the ineligible spouse's gross earned income. Line
- II.2. Enter the amount of any allocation for ineligible children that is not offset by countable unearned income (line I.2.c. Line minus line I.3.). If line I.1. is equal to or greater than line I.2.c, enter zero in line II.2.
- Line It.3. Subtract the allocation amount on line II.2, from line II.1, (gross earned income) and enter the difference,

PART III. INELIGIBLE SPOUSE'S TOTAL INCOME AFTER ALLOCATIONS

And the amounts in lines I.3, and II.3, to determine the total income after allocations.

NOTE. If, at this point (after the allocation for ineligible children), the total earned and unearned income amount is less than the standard SSI allocation (the difference between the Federal Benefits Rate (FBR) for a couple and the FBR for an individual), there is no income available for deerring to the applicant. In this case, use only the applicant's income in Part IV and the current TB income standard for an individual in Fair V If there is combined earned and/or unearned income remaining in excess of the standard SSI allocation, use the amounts from ones t.3, and tl.3, in Part IV and the current TB income standard for a couple in Part V.

PART IV. COMBINED INCOME

- Line IV.1. Enter the applicant's or potentially eligible couple's unearned income.
- IV.2. Enter the ineligible spouse's unearned income from line I.3, unless there is no deeming according to Part III. Line
- IV.3. Enter combined unearned income of applicant(s) (line IV.1.) and/or ineligible spouse (line IV.2.). Line
- Enter the \$20 any income exclusion. IV.4. Line
- Subtract any office unarmed record default onts
 Subtract line IV.4. from IV.3. and enter the difference. (If line IV.3. is less than \$20, enter zero in line IV.5.) IV.5. Line
- Line Enter combined earned income of the ineligible spouse (unless there is no deeming from the ineligible spouse according to Part IV.) and the applicant(s). Use line (I.3 for ineligible spouse's income. If there is no deeming, enter only the applicant's earned income.
- Line IV.7. Enter unused portion of the \$20 any income exclusion not offset by uneamed income.
- IV.8. Subtract line IV.7. from IV.8, and enter the difference. Line
- IV.9. \$65 work expense exclusion.
- Line IV.10. Subtract line IV.9. from IV.8. and enter the difference.
- Line IV.11. Enter half of the amount of line IV.10.
- Line IV.12. Subtract line IV.11, from line IV.10, and enter the difference.
- Line IV.13. Add line IV.5. and IV.12 and enter total. This is the amount of income to be considered in determining TB eligibility. Enter on line V.2.

PART V. TB ELIGIBILITY CALCULATION

- Line V.1. Enter the current, applicable TB level. If income is deemed from the ineligible spouse, use the TB income standard for a couple. Otherwise use the TB income standard for an individual.
- V.2. Enter total countable income from line IV.13. Line

If line V.2. (total countable income) is less than or equal to the current TB payment level, the applicant(s) is/are income eligible for the T8 program.

In a situation where there is a potentially eligible child and parent with an ineligible spouse, first determine the eligible parent's TB income eligibility using this work sheet. If the parent is eligible, determine the child's financial eligibility using only the eligible child's countable income.

TUBERCULOSIS (TB) PROGRAM PROPERTY WORKSHEET ADULT (18 Years of Age and Older or Married)

74	ME	CASE NUMBER	МОИТН	
	EP I termine net nonexempt property in accordance with Article 9. (1) CAR @	Kempt "	1 <u> </u>	
ST	EP II			
Α.	Only consider the net nonexempt property of the TB applicant (and spoudo not consider the property of any other family members in the home.	3e);		
Θ.	Net nonexempt property of TB applicant (and spouse):		\$ <u>0500 th</u>	
С	Property limit for one person (or two persons if there is a spouse):		s <u>3000</u>	- Hoperto Cliqible
D.	is line II.B. less than or equal to line II.C.?			eliqible
	☐ Yes, TB property requirement met.			
	No, ineligible due to excess property.			
<u>></u>				
	Eligibility Worker Signature		Worker Number	

FINANCIAL ELIGIBILITY WORK SHEET—ELIGIBLE CHILD USING 1994 STANDARD WITH INELIGIBLE PARENT OR PARENT(S)

Example 5						
CASE NAME				CASE N	UMBER	
PPUICANTS NAME			···			
John De						
PART 1. INELIGIBLE PARENT'S UNEARNED INCOME						
' Operation upgarmed income the net implied a subline	anietanas (84) Albar 84 a. 3	FØ			
 Parent's unearned income—do not include public a Do not include parent's income if spouse is PA, oth 	,	•	o parem s inc	ome.	s	<u>5</u>
2. Allocation for ineligible children (if no children, ente	r zero in Pa	art I.2.c.). Do not in	clude TB appi	icant or		
TB-eligible children.	CHILD		I CHILD #3	CHILD #4		
	Name	Name	Name	Name	İ	
 a. Standard SSI allocation (Federal Benefit Rate (FBR) for a couple minus FBR for an individual); 	233	<i>ಇ</i> ೩೩				
b. Minus child's income;	- 100	, _ 100				
c. Total altocation:	<u> 123</u>	+ 123	+	- + <u> </u>	= \$ <u>24</u> 0	e
3. Remaining unearned income (subtract line I.2.c. fro	om line (.1.)	:			s 340	·
	·				- <u></u>	
PART II. INELIGIBLE PARENT'S EARNED INCOME						
					سر در	1
Parent's gross earned income:	· · · · · · · · · · · · · · · · · · ·	************			\$ <u>//</u> c5	
Unused portion of allocation for ineligible child(ren)		*********************		************	\$ <u>.</u> ફ્રેય	16
3. Remaining earned income (subtract II.2, from II.1.)					\$ 1409	_
IF THERE IS NO INCOME REMAINING AND IF THERE IS		.3. ARE BOTH ZE PROCEED WITH P		DEEM, GO TO	PART IV.	
PART III. COMBINED INCOMES—Ineligible Parents		PART IV. TB E	LIGIBILITY C	ALCULATION		
Unearned Income		1. Deemed income	from Part III.15.			CB
5 Pernaming unearned income (after afocation) or zero (from I.3.)		2. Eligible child's or	ım OASDI income			0
1 Cubtract general income exclusion	-20	3. Other unearned	ncome			0
3. Countable unearned income (to HI.11.) States of the deductions		4. Subtract general	income exclusion	i		-20
Earned Income		5. Countable unes	ned income (IV.1.	+ IV.2. + IV.3 \$2	Offer data des	m 0
4 Remaining earned income (from II.3.)	1405	6. Child's countable	earned income (subtract \$65 + 1/2 (e	mainder)	- O
5. Subtract balance of general income exchargon	20	7. Total countable				0
5 Remainder	1385	8. Current TB incor	ne standard			748.50
7. Subtract work expense exclusion	-65	If line IV-7 is less	then or equal to	line IV.B., this per		
8. Remainder then subtract other deductions.	1320				In	come.
3 Subtract 1/2 remainder	660	1			Eliq	, be
10. Countable earned income (to til.12.)	660					
Deemed Income						
11. Countable unearned income (from III.3.)	T	1				
12. Add countable earned income (from Ht.10.)	660	1				
-13. Total countable income (from III.11, + III.12.)	660	1				
14 Suptract parent deduction*	-1069	1				
15. Deemed income. Enter on time IV.1.	Ø		•			

FINANCIAL ELIGIBILITY WORK SHEET FOR MC 280 TB (TB CHILD)

There is no deeming from any parent if one or both parents is public assistance (PA), other PA, or eligible for the TB program.

PART I. INELIGIBLE PARENT'S UNEARNED INCOME

- Line 1.1. Enter the ineligible parent's unearned income.
- Line I.2. (If no ineligible siblings, enter zero in I.2.c.) Enter the first name of any ineligible child(ren) in the box provided. On line 2.a., enter the allocations for any ineligible child(ren) not on PA or not applying for or eligible for the TB program. On line 2.b., enter any income for each of the children, excluding up to \$400 per month but no more than \$1,520 per year if student income. Subtract line 2.b. from 2.a., enter the remainder for each child and total the allocations for all siblings on line 2.c.
- Line 1.3. Subtract line 1.2.c. from line 1.1. (unearned income) and enter the difference. This is the remaining unearned income amount unless the allocation amount (line 1.2.c.) exceeds line 1.1. (unearned income). In the latter case, the negative figure on line 1.3. is carried over to line II.2. (unused portion of allocation).

PART II. INELIGIBLE PARENT'S EARNED INCOME

- Line II.1. Enter the parent's earned income.
- Line II.2. Enter the amount of any allocation for ineligible children that is not offset by unearned income (line I.2.c. minus line I.1.). If line I.1. is greater than line I.2.c., enter zero in line II.2.
- Line II.3. Subtract the allocation amount on line II.2, from line II.1, (gross earned income) and enter the difference.

NOTE: If, at this point (after the allocation for ineligible children), there is no income remaining either earned or unearned, there is no income available for deeming to the eligible child(ren). In this case, enter zero on line III.15, and proceed to Part IV. If there is earned and/or unearned income remaining, complete both Parts III and IV.

PART III. COMBINED INCOMES

Enter any remaining unearned income from line 1.3. on line III.1. and any remaining earned income from line III.3. on line III.4. Follow the instructions on each line.

The entry on the last line of Part III (i.e., the "Deemed Income" line) is carried over to the first line (also titled "Deemed Income") on Part IV, "TB Eligibility Calculation."

PART IV. TB ELIGIBILITY CALCULATION

- Line IV.1. Enter the deemed income from the last line in Part III. The deemed income is treated as unearned income.
- Line IV.2. Enter the applicant's OASDI income.
- Line IV.3. Enter any other unearned income of applicant.
- Line IV.4. Enter the \$20 any income exclusion.
- Line IV.5. Add together the amounts in lines IV.1., IV.2., and IV.3., and then subtract the \$20 any income exclusion (line IV.4.) to obtain the total countable unearned income amount.
- Line IV.6. Enter the applicant's countable earned income (i.e., earned income after exclusions including the \$65 expense exclusion and 1/2 the remainder.
- Line IV.7.. Add the amounts in lines IV.5. and IV.6. to obtain the total countable income.
- Line IV.8. Enter the current TB income standard.
- If line IV.7. is less than or equal to line IV.8., the child applicant is income eligible.

TUBERCULOSIS (TB) PROGRAM PROPERTY WORKSHEET CHILD

د د د سد	_		CASE NUMBER	НТИОМ
	abi			1
_ _	-16	ere is no allocation of property from an ineligible parent(s) if one or be program.	oth parents is public ass e	stance (PA), other PA, or eligible for the
Ē	Dei	termine net nonexempt property in accordance with Article 9.(1) CAR	exempt	
STE	EP II	ligible Parental Allocation		
	Onl	y consider the net nonexempt property of the parent(s) in the home; or operty of any other family members.	do not consider	
	-	Parent(s)' net nonexempt property:		s <u>2.500.00</u>
	3.	Property limit for one person (if two parents, enter property limit for t	wo persons)	5 3000 aa
	ت .	Subtract line A.2, from line A.1, (enter 0 if negative). Total Allocation	n:	s
	÷	Divide line A.3, by the number of TB children in the home. TB Child's Sh	are:	s0
	TB	Child's and Parent(s)' Resources		
	:	Child's own net nonexempt property (as determined under Article 9)		s
	2.	Enter child's share of property from parent(s) (line A.4.):	• • • • • • • • • • • • • • • • • • • •	s <u>O</u>
	3.	Add fine 8.1. and 8.2.:		s <u>O</u>
	4,	Enter the TB property limit for one person:		s_2000
	=	's line B.3, less than or equal to line B.4.?		Property eligible
		Yes. TB property requirement met.		lligi ble
		No, ineligible due to excess property. If more than one TB child proceed to Section C.	in the home,	
C.	Мо	ore Than One TB Child in the Home		-
	1.	Follow these steps if the child in Section B above is ineligible for a because the parental allocation when combined with the TB child's one person.		
	2.	Take the amount of property deemed from the parent(s) (line A.3.) the home (line A.4.).	and re- divide it among	the remaining number of T8 children in
	3.	Repeat Section B for each of the remaining TB children in the hoparental net nonexempt property and the child's own net nonexempt fine B.4.).	-	a**

TUBERCULOSIS (TB) PROGRAM USING 1994 STANDARDS INCOME ELIGIBILITY WORK SHEET (Individual or Couple, Applicant With an Ineligible Spouse)

ASE NAME NR SAMUELS POLICANTS NAME						
					CASE NUMBE	R
- LENT U NAME	-					
PART I. INELIGIBLE SP	OUSE'S UNEARNED INCOME					
	ouse's total unearned income—do not i					·
•	. ,					S
	r ineligible children (if no children, entel de PA- or TB-eligible children or childre			œ.		•
DO NOT INCIDE	20 O O ong.D.a Dimoran of Cimare	CHILD #1	CHLD#2	CHLD #3	CHRLD #4	, *
		Name	Name	Name	Name	1
	SSI allocation (couple Federal ate (FBR) minus individual FBR):			-		<u> </u>
b. Subtract of	child's income (evaluate for student deduction)	ı: -	_	\ <u>-</u>	_	
c. Total alloc	ration:	-		_	+	=\$
	nearned income (subtract line I.2.c. fro					
J. Hemaning G	nearred madrie (audulet are file.c. no					
PART II. INELIGIBLE SE	OUSE'S EARNED INCOME					
1. Ineligible sr	oouse's gross earned income:					s
•	ion of allocation for ineligible child(ren):					
	earned income (subtract II.2, from II.1.):					s
PART IV. COMBINED INC Ungarned Inco	COMES (Eligible individual or couple and ome:	%or ineligible :	spouse after ine	ligible child allo	cations)	
1. Applicant's	gross unearned income:					
2. Ineligible sp	ouse's unearned income (line I.3.);			• • • • • • • • • • • • •		s
						\$ <u>+</u>
	inearned income (add lines IV.1, and IN	/.2.):				\$ \$ \$
	nearned income (add lines IV.1. and IV neral income exclusion: על זיביי countable unearned income:	/.2.):				\$ \$ + \$ \$
	neral incomé exclusion: עלקיביי countable unearned incomé:	/.2.):				S Total Uncorned
4. Subtract ge Subtract Citie R 12 (1 5. Combined o Earned Income 6. Earned inco	neral income exclusion: תנלום: countable unearned income: : eme of applicant and spouse (use amou	Junt from line I	1.3 for ineligible	spouse):	\$ <u>/535.05</u>	S Total Uncorned
4. Subtract ge Subtract Citie R 12 (1 5. Combined o Earned Income 6. Earned inco	neral incomé exclusion: LCTICATE DE unearned incomé:	Junt from line I	1.3 for ineligible	spouse):	\$ <u>/535.05</u> \$ <u>90</u>	S Total Uncorned
Subtract ger 5. Combined of Earned Income 6. Earned inco 7. Subtract ba 8. Remaining	neral income exclusion: countable unearned income: countable unearned income: come of applicant and spouse (use amoulance of general exclusion not offset by earned income:	unt from line to	1.3 for ineligible come (line fV.4)	spouse):	\$ <u>/535.05</u> \$ <u>90</u> \$ <u>151</u> 5	S Total Uncorned
Subtract ger 5. Combined of Earned Income 6. Earned inco 7. Subtract ba 8. Remaining 9. Subtract wo	neral income exclusion: production of the content	unt from line to	I.3 for ineligible come (line IV.4)	spouse):	\$ <u>/535.05</u> \$ <u>90</u> \$ <u>/515</u> \$ <u>-65</u> \$ JN50	S Total Uncorrect
Subtract get 5. Combined of 5. Combined of 5. Combined of 6. Earned income 6. Earned income 8. Remaining 9. Subtract wo Subtra	neral income exclusion: countable unearned income: countable unearned income: come of applicant and spouse (use amoulance of general exclusion not offset by earned income:	unt from line t	1.3 for ineligible come (line IV.4)	spouse):	\$ <u>/535.05</u> \$ <u>90</u> \$ <u>1515</u> \$ <u>-65</u>	S Total Uncorrect
5. Combined of Earned Income 6. Earned income 7. Subtract ba 8. Remaining 9. Subtract wo	neral income exclusion: activities unearned income: a: ame of applicant and spouse (use amoutance of general exclusion not offset by earned income: activities ac	unt from line to unearned in	1.3 for ineligible come (line IV.4)	spouse):	\$ _/\$35.00 \$ _@U \$ _/\$/5 \$ _65 \$ _N\$0 \$725.00	S Total Uncorned
5. Combined of Earned Income 6. Earned Income 7. Subtract ba 8. Remaining 9. Subtract wo Subtract wo The Robot Income 11. Subtract 1/2	neral income exclusion: countable unearned income: come of applicant and spouse (use amoutance of general exclusion not offset by earned income: context expense exclusion: defined income: context remaining earned income:	unt from line t	I.3 for ineligible come (line IV.4)	spouse):	\$ /535.00 \$ 20 \$ 1515 \$ -65 \$ 1450 \$ -725.00	S Total Uncorned
5. Combined of Earned Income 6. Earned Income 7. Subtract ba 8. Remaining 9. Subtract wo Subtract wo 10. Remaining 11. Subtract 1/2	neral income exclusion: countable unearned income: me of applicant and spouse (use amoutance of general exclusion not offset by earned income: ork expense exclusion: earned income: remaining earned income: earned income:	unt from line t	I.3 for ineligible come (line IV.4)	spouse):	\$ /535.00 \$ 20 \$ 1515 \$ -65 \$ 1450 \$ -725.00	S Total Uncorned
Subtract get 5. Combined of 5. Combined of Earned Income 6. Earned Income 7. Subtract ba 8. Remaining 9. Subtract wo Subtract wo Subtract wo 10. Remaining 11. Subtract 1/2 12. Countable 6. 13. Total countable PART V. TB ELIGIBILIT 1. Current TB	neral income exclusion: countable unearned income: me of applicant and spouse (use amoutance of general exclusion not offset by earned income: ork expense exclusion: earned income: remaining earned income: earned income: able income (add lines IV.5 and IV.12.) Y CALCULATION income standard for an individual or a	unt from line to unearned income	I.3 for ineligible come (line IV.4)	spouse):	\$ /535.00 \$ 40 \$ /5/5 \$-65 \$ 1450 \$ -725.00	S Total Unicertand
Subtract get 5. Combined of Earned Income 6. Earned Income 6. Earned Income 8. Remaining 9. Subtract wo Subtract World 10. Remaining 11. Subtract 1/2 Countable 6. 13. Total countable 13. Total countable 14. Current TB 2. Enter total 6.	neral income exclusion: countable unearned income: me of applicant and spouse (use amoutance of general exclusion not offset by earned income: ork expense exclusion: earned income: remaining earned income: earned income: able income (add lines IV.5 and IV.12.)	unt from line to unearned income	1.3 for ineligible come (line IV.4)	spouse):	\$ /535.00 \$ 40 \$ /5/5 \$-65 \$ 1450 \$ -725.00	S Total Unicertand
Subtract get 5. Combined of Earned Income 6. Earned Income 6. Earned Income 8. Remaining 9. Subtract wo Subtract World 10. Remaining 11. Subtract 1/2 Countable 6. 13. Total countable 13. Total countable 14. Current TB 2. Enter total 6.	neral income exclusion: activities unearned income: activities unearned income: activities and spouse (use amout ance of general exclusion not offset by earned income: activities are exclusion: activities	unt from line to unearned income	1.3 for ineligible come (line IV.4)	spouse):	\$ 1535.00 \$ 90 \$ 1515 \$-65 \$ 1450 \$ - 725.00	\$ 796.00 \$ 700 Ennes \$ 105.00 \$ 248.50 \$ 225. Theome

INSTRUCTIONS INCOME ELIGIBILITY WORK SHEET MC 281 TB (Individual or Couple, Applicant With an Ineligible Spouse)

INELIGIBLE SPOUSE'S UNEARNED INCOME PARTI

Do not include ineligible spouse's income if he/she receives any public assistance (PA).

- Line 1.1. Enter the ineligible spouse's unearned income.
- Line 1.2. (If there are no children, enter zero on line 2.c.) Enter each ineligible child's first name in boxes provided on line 2.a., enter the standard SSI allocation for any ineligible child(ren) not on PA or applying for or eligible for the TB program. On line 2.b., enter any income for each of the children excluding \$400 per month, up to \$1,620 per year of student income. On line 2.c. enter the remainder for each child and total the allocation for each child.
- 1.3. Subtract line 1.2.c from line 1.1 (unearned income) and enter the difference. This is the remaining unearned income Line amount unless the allocation amount (line I.2.c.) exceeds line I.1 (countable unearned income). In the latter case, the negative figure on line t.3, is carried over to line fl.2. (unused portion of allocation)

PART II. INELIGIBLE SPOUSE'S EARNED INCOME

- Line II.1. Enter the ineligible spouse's gross earned income.
- II.2. Enter the amount of any allocation for ineligible children that is not offset by countable unearned income (line I.2.c. Line minus line I.3.). If line I.1, is equal to or greater than line I.2.c, enter zero in line II.2.
- II.3. Subtract the allocation amount on line II.2, from line II.1, (gross earned income) and enter the difference. Line

PART III. INCLIGIBLE SPOUSE'S TOTAL INCOME AFTER ALLOCATIONS

and the amounts in lines I.3, and II.3, to determine the total income after allocations,

NOTE. If, at this point (after the allocation for ineligible children), the total earned and unearned income amount is less than the standard SSI allocation (the difference between the Federal Benefits Rate (FBR) for a couple and the FBR for an individual), there is no income available for deeming to the applicant. In this case, use only the applicant's income in Part IV and the current TB income standard for an individual in Fail V. If there is combined earned and/or unearned income remaining in excess of the standard SSI allocation, use the amounts from lines I.3. and II.3. in Part IV and the current TB income standard for a couple in Part V.

PART IV. COMBINED INCOME

- Line IV.1. Enter the applicant's or potentially eligible couple's unearned income.
- Enter the ineligible spouse's unearned income from line I.3, unless there is no deeming according to Part III. Line IV.2.
- Line IV.3. Enter combined unearmed income of applicant(s) (line IV.1.) and/or ineligible spouse (line IV.2.).
- Line IV.4. Enter the \$20 any income exclusion.
- Subtract line IV.4. from IV.3. and enter the difference. (If line IV.3. is less than \$20, enter zero in line IV.5.) IV.5. Line
- Line IV.6. Enter combined earned income of the ineligible spouse (unless there is no deeming from the ineligible spouse according to Part IV.) and the applicant(s). Use line II.3 for ineligible spouse's income. If there is no deeming, enter only the applicant's earned income.
- IV.7. Enter unused portion of the \$20 any income exclusion not offset by uneamed income. Line
- Line IV.8. Subtract line IV.7. from IV.6, and enter the difference.
- Line IV.9. \$65 work expense exclusion.
- Line IV.10. Subtract line IV.9. from IV.8. and enter the difference.
- Line IV.11. Enter half of the amount of line IV.10.
- Line IV.12. Subtract line IV.11, from line IV.10, and enter the difference.
- Line IV.13. Add line IV.5, and IV.12 and enter total. This is the amount of income to be considered in determining TB eligibility. Enter on line V.2.

PART V. TB ELIGIBILITY CALCULATION

- Line V.1. Enter the current, applicable TB level. If income is deemed from the ineligible spouse, use the TB income standard for a couple. Otherwise use the TB income standard for an individual.
- V.2. Enter total countable income from line IV.13. Line

If line V.2. (total countable income) is less than or equal to the current TB payment level, the applicant(s) is/are income eligible for the TB program.

In a situation where there is a potentially eligible child and parent with an ineligible spouse, first determine the eligible parent's TB income eligibility using this work sheet. If the parent is eligible, determine the child's financial eligibility using only the eligible child's countable income.

TUBERCULOSIS (TB) PROGRAM PROPERTY WORKSHEET ADULT

(18 Years of Age and Older or Married)

VAI L		CASE NUMBER	MONTH
	PR. SAMUELS		
Эe	termine net nonexempt property in accordance with Article 9.		
	EP II		
Α.	Only consider the net nonexempt property of the TB applicant (and s do not consider the property of any other family members in the home		
8.	Net nonexempt property of TB applicant (and spouse):		s 2800 co
C.	Property limit for one person (or two persons if there is a spouse): .		s 2000 a
ð.	is line II.B. less than or equal to line II.C.?		
	Yes, TB property requirement met.		
	No, ineligible due to excess property.		TROPERTY INEligible
<u>~</u>			
	Eligibility Worker Signature		Worker Number

TUBERCULOSIS (TB) PROGRAM FINANCIAL ELIGIBILITY WORK SHEET—ELIGIBLE CHILD WITH INELIGIBLE PARENT OR PARENT(S)

ASE NAME				CASE NUMBER	
ANTENAME					
IVII Samula					
PART : INELIGIBLE PARENT'S UNEARNED INCO	ME				
		(DA) sets at DA	TD =====#(a '-		
Parent's unearned income—do not include pub Do not include parent's income if spouse is PA,			or is parents in	scome.	
			.: do TO	•	-
 Allocation for ineligible children (if no children, e TB-eligible children. 	CHILD I			CHILD #4	
-	Name	Name	Name	Name	
a. Standard SSI allocation (Federal Benefit Ra	le		- 		
[FBR] for a couple minus FBR for an individu	ual):				
b. Minus child's income:					
: Total allocation:			_ +	+ = \$	
Remaining unparted income (cultivat line 1.2 a					Ø.
Remaining unearned income (subtract line I.2.c	;, irom iin e 1 . i.,	:		2	-/2
PART II. INELIGIBLE PARENT'S EARNED INCOME					
Parent's gross earned income:		*****************		\$	3535
2. Unused portion of allocation for ineligible child(r	ren):	******************	***************************************	\$_	Ø
3. Remaining earned income (subtract II.2, from II	l.1.);			\$ =	3535
IF THERE IS NO INCOME REMAINING A				DEEM, GO TO PART	rv.
		ROCEED WITH			
PART III. COMBINED INCOMES—Ineligible Parents	š	PART IV. TE	ELIGIBILITY (CALCULATION	
Unearned Income	7	1. Deemed inco	me from Part III.15.		1056
===maining uneamed income (after allocation) or zero (from f.3.)		2. Eligible child's	s own OASDI incom	0	I Ø
C Dubtract general income exclusion	-20	3. Other unearn	ed income		100
3 Countable unearned income (to HI.11. Sulptrad Other Relations		<u> </u>	prisi income exclusio		-50
Earned Income	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	5. Countable un	earned income (IV.1	. + IV.2. + IV.3 \$200 Office	
4. Remaining earned income (from II.3.)	3535			(subtract \$65 + 1/2 remainder)	ns 1136
5. Subtract balance of general income exclusion					ns 1136 nd05
	20	7. Total countat	ie income		nd6
F Remainiger	3515	7. Total countait 8. Current TB in	come standard		1136 1748.50
7. Subtract work expense exclusion		8. Current TB in	·	p line IV.8., this person is in	1748.50 1748.50
7. Subtract work expense exclusion	35/5	8. Current TB in	·		1136 1748.50 come eligible.
7. Subtract work expense exclusion	35/5 -65 3450	8. Current TB in	·		1136 1748.50 come eligible.
7. Subtract work expense exclusion 8. Remainder: Their Subtract other cledications.	35/5	8. Current TB in			1136 1748.50 come eligible.
7 Subtract work expense exclusion 8. Remainder: they Subtrect other declaritions 9. Subtract 1/2 remainder	3515 -65 3450 1225	8. Current TB in			1136 1748.50 come eligible.
7. Subtract work expense exclusion 8. Remainder: Then Subtract of their declarations. 9. Subtract 1/2 remainder. 10. Countable earned income (to III.12.)	3515 -65 3450 1225	8. Current TB in			1136 1748.50 come eligible.
7. Subtract work expense exclusion 8. Remainder : then Subtract other Architock 9. Subtract 1/2 remainder 10. Countable earned income (to III.12.) Deemed Income	35/5 -65 3450 1725 1725	8. Current TB in			1136 1748.50 come eligible.
7. Subtract work expense exclusion 8. Remainder: They Subtract other deductions 9. Subtract 1/2 remainder 10. Countable earned income (to III.12.) Deemed Income 11. Countable unearned income (from III.3.)	35/5 -65 3450 1725 1725	8. Current TB in			1136 1748.50 come eligible.
7. Subtract work expense exclusion 8. Remainder : then Subtred other deductions 9. Subtract 1/2 remainder 10. Countable earned income (to III.12.) Deemed Income 11. Countable unearned income (from III.3.) 12. Add countable earned income (from III.10.)	35/5 -65 3450 1725 1725 0	8. Current TB in			1136 1748.50 come eligible.

INSTRUCTIONS FINANCIAL ELIGIBILITY WORK SHEET FOR MC 280 TB (TB CHILD)

Tere is no deeming from any parent if one or both parents is public assistance (PA), other PA, or eligible for the TB program.

PART I. INCLIGIBLE PARENT'S UNEARNED INCOME

- Line 1.1. Enter the ineligible parent's unearned income.
- Line I.2. (If no ineligible siblings, enter zero in I.2.c.) Enter the first name of any ineligible child(ren) in the box provided. On line 2.a., enter the allocations for any ineligible child(ren) not on PA or not applying for or eligible for the TB program. On line 2.b., enter any income for each of the children, excluding up to \$400 per month but no more than \$1,620 per year if student income. Subtract line 2.b. from 2.a., enter the remainder for each child and total the allocations for all siblings on line 2.c.
- Line I.3. Subtract line I.2.c. from line I.1. (unearned income) and enter the difference. This is the remaining unearned income amount unless the allocation amount (line I.2.c.) exceeds line I.1. (unearned income). In the latter case, the negative figure on line I.3. is carried over to line II.2. (unused portion of allocation).

PART II. INCLIGIBLE PARENT'S EARNED INCOME

- Line II.1. Enter the parent's earned income.
- Line II.2. Enter the amount of any allocation for ineligible children that is not offset by unearned income (line I.2.c. minus line I.1.). If line I.1. is greater than line I.2.c., enter zero in line II.2.
- Line II.3. Subtract the allocation amount on line II.2, from line II.1, (gross earned income) and enter the difference.

NOTE: If, at this point (after the allocation for ineligible children), there is no income remaining either earned or unearned, there is no income available for deeming to the eligible child(ren). In this case, enter zero on line III.15, and proceed to Part IV. If there is earned and/or unearned income remaining, complete both Parts III and IV.

PART III. COMBINED INCOMES

Enter any remaining unearned income from line 1.3. on line III.1, and any remaining earned income from line II.3, on line III.4. Follow the instructions on each line.

The entry on the last line of Part III (i.e., the "Deemed Income" line) is carried over to the first line (also titled "Deemed Income") on Part IV, "TB Eligibility Calculation."

PART IV. TB ELIGIBILITY CALCULATION

- Line IV.1. Enter the deemed income from the tast line in Part III. The deemed income is treated as unearned income.
- Line IV.2. Enter the applicant's OASDI income.
- Line IV.3. Enter any other unearned income of applicant.
- Line IV.4. Enter the \$20 any income exclusion.
- Line IV.5. Add together the amounts in lines IV.1., IV.2., and IV.3., and then subtract the \$20 any income exclusion (line IV.4.) to obtain the total countable unearned income amount.
- Line IV.6. Enter the applicant's countable earned income (i.e., earned income after exclusions including the \$65 expense exclusion and 1/2 the remainder.
- Line IV.7.. Add the amounts in lines IV.5. and IV.6. to obtain the total countable income.
- Line IV.8. Enter the current TB income standard.
- If line IV.7, is less than or equal to line IV.8., the child applicant is income eligible.

TUBERCULOSIS (TB) PROGRAM PROPERTY WORKSHEET CHILD

'IAN			ASE NUMBER	MONTH
	w_{i}	// Samuet		
ST	EP I			
Ą		ere is no allocation of property from an ineligible parent(s) if one or bot program.	n parents is public as	sistance (PA), other PA, or eligible for the
9	De	termine net nonexempt property in accordance with Article 9.		
STI	EP II			
Α.	ine	digible Parental Allocation		
		ly consider the net nonexempt property of the parent(s) in the home; do property of any other family members.	not consider	
	1.	Parent(s)' net nonexempt property:		\$ <u>7800</u> .°°
	2.	Property limit for one person (if two parents, enter property limit for two	o persons),	s_ 3 ∞c.∞
	3.	Subtract line A.2. from line A.1. (enter 0 if negative). Total Allocation:		\$ 4500 °C
	4	Divide line A.3. by the number of TB children in the home. TB Child's Share	e:	\$ <u>4800 °</u>
В.	TB	Child's and Parent(s)' Resources		
	1	Child's own net nonexempt property (as determined under Article 9):.		\$
	2.	Enter child's share of property from parent(s) (line A.4.):	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	3.	Add line B.1. and B.2.;		
	4.	Enter the TB property limit for one person:	• • • • • • • • • • • • • • • • • • • •	\$ <u>2000°</u>
	5	Is line B.3. less than or equal to line B.4.?		
		Yes, TB property requirement met.		Thopeny Inaligible
		No, ineligible due to excess property. If more than one TB child in proceed to Section C.	the home,	Inaliqible
C.	Мо	re Than One TB Child in the Home		
	1.	Follow these steps if the child in Section B above is ineligible for any because the parental allocation when combined with the TB child's cone person.		
	2.	Take the amount of property deemed from the parent(s) (line A.3.) a the home (line A.4.).	nd re-divide it among	g the remaining number of TB children in
	3.	Repeat Section B for each of the remaining TB children in the home parental net honexempt property and the child's own net nonexempt (line B.4.).		
<u>~</u>		Supplify Worker Signature	-	Vioriser Number

Example 7

On July 15, 1994, Mr. Appleseed, who is age 21, A student, unmarried with no children was determined TB infected at the county Medi-Cal clinic. The clinic explained about the TB program to him and Mr. Appleseed agrees to apply. The clinic informs him that he cannot work until the TB is no longer active. Mr. Appleseed received two paychecks in July totaling \$955. He has no other income.

Provider Activities

The clinic assists Mr. Appleseed in completing the TB application and MC 210. Mr. Appleseed provides the clinic with his July pay stubs and student registration that he is enrolled in school for eight hours a week. The clinic forwards the forms and a copy of his pay stubs and student registration to the county welfare department (CWD).

CWD Activities

The CWD reviews Mr. Appleseed's TB application and needs additional information about Mr. Appleseed's bank account. The CWD calls Mr. Appleseed at his home and Mr. Appleseed supplies his most recent bank statement. The CWD determines Mr. Appleseeds' eligibility. His property is determined to be less that \$2000, the property limit for one person.

Income is determined as if Mr. Appleseed were disabled. He also is entitled to a \$400 student deduction.

	955
\$955 gross earned income	<u>-20</u>
-20 any income deduction	935
-65 work expense exclusion	<u>-65</u>
-	870
-400 student deduction	<u>-400</u>
=470 Remaining earned income	470
\$235 1/2 remaining earned income	<u>-235</u>
= 235 total countable income	235

The CWD compares Mr. Appleseed's net nonexempt income to \$748.50, the TB standard for one. Mr. Appleseed is eligible for the TB program.

Example 7

TUBERCULOSIS (TB) PROGRAM INCOME ELIGIBILITY WORK SHEET

Using 1994 Standards

(Individual or Couple, Applicant With an Ineligible Spouse)

	SE NAME Mr Appleseed			CASE NUMBER		
APPLICANT'S NAME	·					
mr Appleseed						
PART I. INELIGIBLE SPOUSE'S UNEARNED INCOME						
Ineligible spouse's total unearned income—do not in	nclude if inelia	oible soouse is	receiving			
public assistance (PA) income:		•	-		s	
2. Allocation for ineligible children (if no children, enter	zero in Part	1.2.c.).				
Do not include PA- or TB-eligible children or children					<u> </u>	
	CHILD #1	CHILD #2	CHR.0 #3	Name	-	
	<u></u>					
 a. Standard SSI allocation (couple Federal Benefit Rate [FBA] minus individual FBA): 				 		
 b. Subtract child's income (evaluate for student deduction); 	: <u> -</u>	<u> </u>	<u> </u>	<u> </u>		
c. Total allocation:		_ +	_ +	_ +	_ =\$	
3. Remaining unearned income (subtract line I.2.c. from	m line (, 1.):		,,,,,,,,,,,		s	
PART II. INELIGIBLE SPOUSE'S EARNED INCOME						
1. Ineligible spouse's gross earned income:				,,,,,,,,,,,	s	
Unused portion of allocation for ineligible child(ren);					s	
 Remaining earned income (subtract II.2, from II.1.); 					\$	
for an individual) deeming not applicable. Make no ent PART IV. COMBINED INCOMES (Eligible individual or couple and	ry for ineligib	······································	ome in Part IV		\$	
PART IV. COMBINED INCOMES (Eligible individual or couple and Unearned Income:	ry for ineligible	spouse's inc	ome in Part IV	cations)		
PART IV. COMBINED INCOMES (Eligible individual or couple and Unearned Income: 1. Applicant's gross unearned income:	ry for ineligible	le spouse's inc	ome in Part IV	cations)	. s	
PART IV. COMBINED INCOMES (Eligible individual or couple and Unearned Income:	ry for ineligib Vor ineligible	spouse's inc	ome in Part IV	cations)	. \$. \$ +	
PART IV. COMBINED INCOMES (Eligible individual or couple and Unearned Income: 1. Applicant's gross unearned income: 2. Ineligible spouse's unearned income (line I.3.); 3. Combined unearned income (add lines IV.1. and IV.)	ry for ineligible Var ineligible	spouse's inc	ome in Part IV	cations)	. \$. \$ + . \$	
PART IV. COMBINED INCOMES (Eligible individual or couple and Unearned Income: 1. Applicant's gross unearned income: 2. Ineligible spouse's unearned income (line I.3.); 3. Combined unearned income (add lines IV.1. and IV.4. Subtract general income exclusion: 5. Combined countable unearned income: Earned Income:	ry for ineligible //cr.j:	spouse's inc	ome in Part IV	cations)	. \$. \$ + . \$	
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