E-300 TYPES OF EARNED AND UNEARNED INCOME (not all inclusive)

If income is not identified as excluded, it should be counted.

| INC | OME TYPE | DESCRIPTION | | |
|-----|-------------------------------|---|--|--|
| AC | TION PROGRAMS | Payments to volunteers under Chapter 66 of Title 42 of the U.S. Code Domestic Volunteer Services, | | |
| 1. | Earned/Unearned | including: | | |
| 2. | Excluded in Financial | University Year for Action (UYA)Special and Demonstration Volunteer | | |
| 3. | Excluded in Patient Liability | Program * Senior Companion Program | | |
| 4. | Non-Taxable | Verification: (not all inclusive) | | |
| | | Copy of checkDocuments from the agency paying benefits | | |
| AD | OPTION SUBSIDIES | Payments made to adoptive families to assist in the support of the adoption. | | |
| 1. | Unearned | Verification: | | |
| 2. | Excluded in Financial | - Copy of check | | |
| 3. | Excluded in Patient Liability | - Documents from agency paying benefits | | |
| 4. | Non-taxable | | | |
| AD | VANCES | Advanced income from the employer. | | |
| 1. | Earned | Verification: (not all inclusive) | | |
| 2. | Counted in Financial | Form 2074 "Earnings Verification"Copy of paycheck stub | | |
| 3. | Counted in Patient Liability | - Signed and dated statement from employer | | |
| 4. | Taxable | | | |

| INC | OME TYPE | DESCRIPTION |
|-----|-------------------------------|--|
| | ENT ORANGE ITLEMENTS | Payments pursuant to Public Law 101-201. |
| 1. | Unearned | Verification: (not all inclusive) - Copy of check |
| 2. | Excluded in Financial | - Documents from the agency paying benefits |
| 3. | Excluded in Patient Liability | |
| 4. | Non-Taxable | |
| | ASKA NATIVE RPORATION | Pursuant to Public Law 100-241, none of the following received from a Native Corporation is counted as income to an Alaska Native or a |
| 1. | Earned/Unearned | descendant of an Alaska Native: Cash (including cash dividends on stock) to the extent it does not |
| 2. | Excluded in Financial | exceed \$2,000 per individual per year. |
| 3. | Excluded in Patient Liability | Verification: (not all inclusive) |
| 4. | Non-Taxable | Copy of checkDocuments from the agency paying benefits |
| ALI | MONY | Payments from an ex-spouse. |
| 1. | Unearned | Verification: (not all inclusive) |
| 2. | Counted in Financial | Court Ordered DecreeCopy of check or money order |
| 3. | Counted in Patient Liability | copy of check of money order |
| 4. | Taxable | |
| ANI | NUAL LEAVE | Income from the employer for annual leave time. |
| 1. | Earned | Verification: (not all inclusive) |
| 2. | Counted in Financial | Form 2074 "Earnings Verification"Paycheck stubs |
| 3. | Counted in Patient Liability | Signed and dated statement from employer |
| 4. | Taxable | |

| INC | OME TYPE | DESCRIPTION |
|----------------|--|---|
| ANI | NUITIES | Income from annuities which were purchased with an employee's funds are earned income. |
| 1. 2. 3. | Earned or Unearned Counted in Financial Counted in Patient Liability | Other annuities purchased through a bank or insurance company are unearned income. These payments may continue for a fixed period of time or for as long as the individual lives. |
| 4. | Taxable | Verification: (not all inclusive) - Copy of check - Documents from the agency paying benefits |
| ASS | SISTANCE BASED ON NEED | Any assistance from government agencies which |
| 1. | Unearned | is intended to supplement needs, and is NOT federally funded. Including, but not limited to: Family Preservation Program. |
| 2. | Excluded in Financial | • |
| 3. | Counted in Patient Liability | Verification: (not all inclusive) |
| 4. | Non-Taxable | Copy of checkDocuments from the agency paying benefits |
| | TRIAN SOCIAL JRANCE PAYMENTS | Austrian Social Insurance payments based, in whole or in part, on wage credits granted under Paragraphs 500-506 of the Austrian General |
| 1. | Unearned | Social Insurance Act. |
| 2. | Excluded in Financial | Interest earned on these payments is counted as income. |
| 3. | Excluded in Patient Liability | Verification: (not all inclusive) |
| 4. | Taxable | Copy of checkDocuments from the agency paying benefits |

| INC | COME TYPE | DESCRIPTION | | |
|------------|-------------------------------|--|--|--|
| | | | | |
| AW. | ARDS | An award is usually something received as the result of a decision by a court, board of arbitration, | | |
| 1. | Unearned | or the like. | | |
| 2. | Excluded in Financial | Subtract essential expenses incurred in obtaining the payment, such as legal and medical expenses. | | |
| 3. | Excluded in Patient Liability | Deduct from the first and any subsequent amounts of related income until all expenses have been | | |
| 4. Taxable | | eliminated. Deduct even those verified expenses which the recipient has previously paid, as long as the expenses are essential. If an expense has been incurred but not paid, assume the individual will pay the expense unless you have reason to question the situation. | | |
| | | Verification: (not all inclusive) | | |
| | | -Copy of bills or receipts | | |
| RΛ | NK ACCOUNTS | Money denosited to a hank account is considered | | |

BANK ACCOUNTS

Checking, Savings, Time Certificates, Money Markets Certificates of Deposit (CD)

- 1. Earned/Unearned
- 2. Counted/excluded in Financial or Patient Liability-Varies by income type
- 3. Taxable

Refer to Individual Development Account (IDA) section for consideration of funds deposited and interest earned on funds in an IDA savings account. Money deposited to a bank account is considered income in the month it is deposited. (Then considered a resource beginning with the month following the month it is deposited.)

Exception: In determining patient liability for spousal impoverishment cases only, income the payor designates as the client's is budgeted. Income of the other joint holder(s) (i.e., the spouse or anyone else) deposited into the account is not considered the client's income.

A. Sole Ownership

The client is designated as owner of the account, ALL the deposits are the client's income.

Deposits made for another individual for the intent purpose of disbursing those funds on behalf of the individual are not considered income.

The client must provide proof deposits are made and used on behalf of another individual.

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BANK ACCOUNTS (Cont'd)

Shared Ownership (joint account) B.

Account holders are:

- married couples
- parent and minor child

When deeming applies in determining eligibility for the coverage group (e.g., Public Laws, institutional less than 30 days, etc.), rebutting ownership is NOT REQUIRED because deeming income takes precedence.

Account holders are not:

- married couples
- parent and minor child

All deposits to the account will be presumed available to the client unless the client can successfully prove all or part of the funds are not his/hers. Exception: when the client is acting as an agent for the other account holder(s).

If a bank account is owned jointly by more than one applicant/recipient, TANF/SSI/Medicaid income deposited into the account is considered income to the person who is named payee by the source of payment. If more than one person is named payee, divide the amount equally among those named by the payment source.

Inform the individual: (using Form-2614)

- 1. The deposits in the account belong to the applicant/recipient.
- 2. The implications are: All deposits are countable income when determining Medicaid eligibility.
- 3. Of his/her right to provide evidence re-butting the ownership if he/she disagrees.

If an account holder is a minor or incompetent, at least one account holder and a third party who has knowledge of the circumstances surrounding the establishment of the joint account must complete the form.

| MEDICAL MEDICAL MI | EDICAL MEDICAL MEDICAL MEDICAL | | |
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| | | | |
| INCOME TYPE | DESCRIPTION | | |
| | | | |
| BANK ACCOUNTS (Cont'd) | If the client does not complete and return Form 2614 by the specified date, deny or terminate the case for failure to cooperate. | | |
| | C. Court Order Designating Income | | |
| | A copy of the order must be sent with a request to the Chief of Eligibility and Payments for a | | |

request to nts for a determination of availability.

When deeming does not apply (e.g., home based waivers, institutionalized at least 30 days, etc.), verify who owns the funds deposited in the account. Once the ownership of funds is known, only the income verified to be the client's is used in determining financial eligibility and patient liability.

D. **Court Order/Written Agreement**

If a written agreement or court order designates ownership of the joint account to either spouse, the account will be considered the resource of that spouse. Deposits made or interest posted will be considered income to that spouse. Disproving ownership does not apply.

E. **Equal Division of Income**

If an equal division of TOTAL community income has been applied, consider only the one-half portion as income to the client in determining financial eligibility. Disproving ownership does not apply.

F. Client Chooses Not **Disprove** to Ownership (Form 2614 completed and in Case Record)

- All deposits are countable income when determining eligibility and patient liabilityer

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BANK ACCOUNTS (Cont'd)

G. Disproving Ownership

If an individual wishes to disprove ownership, obtain his or her statement on Form 2615:

- who owns the funds:
- why there is a joint account;
- who has made deposits to and withdrawals from the account; and
- how withdrawals have been spent.

A copy of a financial institution record such as a passbook, or bank statements which show the deposits, withdrawals, and interest for the period of time they are rebutting ownership. Proof of deposits, source of deposits, withdrawals, and how withdrawals were spent is required.

Any unidentified deposits, deposits identified as the client's income and all withdrawals made by the client in excess of his/her own income, will be considered the client's income in that month.

Vendor payments made on behalf of the client by the other account holder and loans made by the account holder to the client are not considered the client's income.

The client has successfully disproved ownership when proof from the financial institution shows:

1) the client's name has been removed from the joint account; OR 2) access to the account has been restricted and the funds are not available to the client; OR 3) the account has been changed so only the client's money is in the account.

If the client can show they are in the process of removing their name from the account, but the action cannot be completed for a time due to a specified reason, the client has successfully disproved ownership. The case should be future actioned to verify the account was closed/name removed.

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| | | | | |
| INC | OME TYPE | DESCRIPTION | | |
| BANK ACCOUNTS (Cont'd) | | Example: Client applies June 30 and wishes to disprove ownership of a joint checking account. On July 10, the statements made by the account holders report in June and July \$800 of the money in the account was the client's funds. Verification of deposits substantiate their statement and there is proof the joint account is closed. When looking at the withdrawals from this account, however, the client actually used \$1,000 in the month of JuneBecause the client has shown a portion of the funds were not his in June and has closed the account, he has successfully disproved ownership. However, in the month of June the evidence shows he used \$200 more than his portion of the fund. Therefore, in June, \$200 will be counted as income to the client when determining eligibility and patient liability. | | |
| | | In cases where the client did not successfully disprove ownership, notify the client in writing that ownership was not disproved and explain how income and resources are being evaluated. | | |
| | | H. Client Does Not Disprove Ownership | | |
| | | All deposits are countable income when determining eligibility and patient liability. | | |
| BLOOD DONATIONS | | Income received from donating blood. | | |
| 1. | Unearned | Depending on the circumstance and/or amount of income received, the individual may not be | | |
| 2. | Excluded in Financial (Conditional) | required to claim the income on their taxes. If the individual reports this type of income on their | | |

Taxable

3.

4.

MAGI budgeting. Verification (not all inclusive)

- Documents from the source of payment

application, then the income is counted in the

Counted in Patient Liability

| INC | OME TYPE | DESCRIPTION |
|-----|-------------------------------|---|
| BOI | NUS | Bonuses paid by the employer. |
| 1. | Earned | Verification: (not all inclusive) |
| 2. | Counted in Financial | - Copy of check |
| 3. | Counted in Patient Liability | - Statement from employer |
| 4. | Taxable | |
| CAI | PITAL GAINS | The profit that results from the sale of an asset |
| 1. | Unearned | when the amount realized from the sale exceeds the purchase price. The gain is the difference |
| 2. | Counted in Financial | between the higher selling price and the lower |
| 3. | Counted in Patient Liability | purchase price. |
| 4. | Taxable | |
| CAS | SH CONTRIBUTIONS | Money received which is NOT determined to be a |
| 1. | Unearned | cash gift for holidays. If the amount is \$20 or less, see INFREQUENT AND IRREGULAR INCOME |
| 2. | Counted in Financial | for possible exclusions. |
| 3. | Counted in Patient Liability | Verification: (not all inclusive) |
| 4. | Taxable | - Statement from the source of payment |
| CEN | NSUS INCOME | Income received from working for the decennial |
| 1. | Earned | census is exempt from the eligibility and post- eligibility process for all applicants applying for medical assistance. |
| 2. | Excluded in Financial | Varification: (not all inclusive) |
| 3. | Excluded in Patient Liability | Verification: (not all inclusive) |
| 4. | Taxable | - Documents from the source of payment |
| CHI | LD SUPPORT | MAABD Budgeting: Child support paid to or on |
| 1. | Unearned | behalf of a child by an absent parent or stepparent shall be considered income to the child for which it is paid. However, <u>one-third</u> (1/3) of the support will |
| 2. | Excluded in Financial (1/3) | be excluded in financial eligibility only. The full |
| 3. | Counted in Patient Liability | payment will be counted when determining patient liability. |
| 4. | Non-Taxable | |

| INCOME TYPE | DESCRIPTION |
|--|--|
| CHILD SUPPORT (Cont'd) | Child support arrears paid to the parent after the child turns 18 shall be considered income to the parent. Verification: (not all inclusive) - Copy of court order or check - Client's statement |
| CIVIL SERVICE ANNUITIES (CSA) | If the client has been a federal government employee or is the widow/widower or dependent child (under 18) of a deceased federal employee, |
| 1. Unearned | Civil Service retirement or disability may be available. Cost-of-living increases usually occur |
| 2. Counted in Financial | effective March, reflected on April checks. |
| 3. Counted in Patient Lial | oility Verification: (not all inclusive) |
| 4. Taxable | Copy of award letterCopy of disallowance letter |
| OLEDOVINGOME | Official and for marked for market |
| CLERGY INCOME Unearned Counted in Financial Counted in Patient Liab | Offerings and fees received for marriages, baptisms, funerals, masses, etc. in addition to salary, is counted as income. Offerings made directly to the religious institution are non-taxable to the client and not counted as income. Members of a religious organization that give their outside earnings to the organization must still include the earnings in their income. |
| 4. Taxable | Verification: (not all inclusive) - Copy of paycheck stubs - Copy of ledger sheets receipts and/or income tax records (if self-employed) - Schedule SE (Form 1040 if self-employed) |
| | Ministerial Business Expenses as an Employee: The employee must itemize deductions on Schedule A (Form 1040) to claim allowable deductions for ministerial trade or business expenses incurred while working as an employee. Employees must also file Form 2106, Employee Business Expenses (or Form 2106-EZ, Unreimbursed Employee Business Expenses). |

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CLERGY HOUSING

- 1. Earned (if self-employed)
- 2. Counted in Financial
- 3. Counted in Patient Liability
- 4. Taxable (if self-employed)

Include the rental value of the home or the housing allowance as earnings from self-employment on Schedule SE (Form 1040), Self-Employment Tax, if the individual is subject to self-employment tax.

Verification:

- Copy of ledger sheets receipts and/or income tax records
- Schedule SE (form 1040)

Note: The rental value of a home (including utilities) or a designated housing allowance is not counted as income if the individual is not self-employed. The exclusion cannot be more than reasonable pay for services and the home or allowance must be provided as compensation for services as an ordained, licensed, or commissioned minister.

COMMUNITY SPOUSE MONTHLY INCOME ALLOWANCE

- 1. Unearned
- Counted in Financial
- 3. Non-Taxable

Income allocated to the community spouse for maintenance as required by the spousal impoverishment provisions. The case manager must advise the community spouse how this additional income allowance will affect other public assistance benefits such as SSI, QMB or SNAP.

Verification: (not all inclusive)

- Patient liability deduction amount from institutionalized spouse's case

COMPENSATION FOR INJURY OR SICKNESS

- 1. Unearned
- Counted in Financial
- 3. Non-Taxable (Conditional)

Any assignment of a liability to make periodic payments as damages or as compensation on account of personal injury or sickness.

If the employee paid the entire cost of the accident or health plan, do not include any amounts received from the plan for personal injury as income.

MAGI – Payments received for damages as Qualified assignments are non-taxable. Any portion of the payment that is not for damages, including punitive damages, is taxable.

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COST OF LIVING ADJUSTMENT "COLA" (RSDI ONLY)

- 1. Unearned
- 2. Excluded in Financial
- 3. Counted in Patient Liability
- 4. Taxable

For QMB/SLMB/QDWI coverage, the annual costof-living increase for RSDI benefits must be disregarded from January through March each calendar year. Effective April, the RSDI COLA is then compared to the new poverty income limit. The same disregard is applied to a spouse's RSDI for comparison to the couple limit.

Verification: (not all inclusive)

- SSA Benefit letter or SOLQ

CROWDFUNDING ACCOUNTS

- 1. Earned
- 2. Included in Financial (Conditional)
- 3. Counted in Patient Liability (Conditional)
- 4. Taxable (Conditional)

Crowdfunding websites such as GoFundMe, Kickstarter, and Indiegogo are online platforms that allow individual donors to fund specific campaigns such as charity, individuals in need, research projects, and business ventures.

How these funds are treated for MAGI purposes depends on the reason the funds are being donated/provided. Some examples include:

- 1. Funds being raised to help an individual pay for personal/medical expenses.
 - Donors to this campaign intend for their contributions to be used as a gift or donation and are not expecting any return. Funds are not countable in MAGI budgeting.
- Funds being raised by an individual to support a website or other business with no advertisers.
 The contributions are solicited to allow the individual to continue working.
 - Donors to this campaign are expecting something in return. Funds contributed are countable in MAGI budgeting.
- 3. Funds being raised to support research into a new invention or product development in exchange for a percentage of revenue from that invention or product upon completion.

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CROWDFUNDING ACCOUNTS (Cont'd)

 Donors to this campaign would be considered investors contributing to capital. Contributions to capital are not taxable and considered equity interest for investment. Not Countable in MAGI budgeting.

Verification: (not all inclusive)

- Documents from the source of payment

DEATH BENEFITS

- 1. Unearned
- Counted/Excluded in Financial or Patient Liability Varies by Income Type
- 3. Non-taxable with exception

A Death Benefit is money a client receives as the result of another's death. These benefits include the following:

- Proceeds of life insurance policies received due to the death of the insured;
- Lump Sum Death Benefits from Social Security;
- Railroad burial benefits;
- VA burial benefits:
- Cash inheritances:
- Cash gifts from relatives, friends, or a community group to "help out" with expenses related to the death.

NOTE: Recurring survivor benefits such as those received from Social Security, private pension programs, etc., are not death benefits.

Death benefits received by the client are income to the client in the month received, except for any portion the client verifies was used for the expenses of the deceased person's last illness and/or burial.

Last illness and burial expenses include but are not limited to: related hospital and medical expenses, funeral, burial plot, and interment expenses, and other related expenses. Other related expenses include but are not limited to: new clothing to wear to the funeral, food for visiting relatives, taxi fare to and from the hospital and funeral home, etc.

Any portion of the Death Benefits which is left after deducting these expenses is counted as income in the month of receipt.

| INCOME TYPE | | DESCRIPTION |
|--------------------------------|------------------------------|---|
| INCOME ITTE | | |
| DEATH BENEFITS (Cont'd) | | MAGI Exception: Interest earned on payments received via installment (i.e. Annually, Quarterly, Monthly, etc.) are taxable and countable in MAGI budgeting. (see income type INTEREST/DIVIDENDS. |
| | | Verification: (not all inclusive) |
| | | Copy of life insurance Award letter from SSA, RR, VA Copy of Will Statements from individuals giving money to the client Bills and/or receipts Contact with provider |
| DIS | ABILITY | Benefits for disability received from a business, |
| 1. | Unearned | agency or organization. |
| 2. | Counted in Financial | Verification: (not all inclusive) |
| 3. | Counted in Patient Liability | Statement from agency or business establishment. Form 2339 |
| 4. | Taxable | |
| DIS | MISSAL PAY | Final pay from an employer. |
| 1. | Earned | Verification: (not all inclusive) |
| 2. | Counted in Financial | - Copy of check |
| 3. | Counted in Patient Liability | - Statement from the employer, Form 2074 |
| 4. Taxable | | |
| EARNINGS | | Income received through employment and/or tips. |
| 1. | Earned | Verification: (not all inclusive) |
| 2. | Counted in Financial | - Copy of check |
| 3. | Counted in Patient Liability | Tip recordsStatement from employer, Form 2074 |
| 4. | Taxable | |

| EARNINGS (workshop) | | DESCRIPTION |
|------------------------|---|---|
| | | Wages from workshops or work activity centers such as WARC, ALPHA Industries, FAST |
| 1. | Earned | Opportunity Village and NAAH. |
| 2. | Counted in Financial | Verification: (not all inclusive) |
| 3. | Counted in Patient Liability | Copy of checkStatement from employer, Form 2074 |
| 4. | Taxable | |
| EDU | ICATIONAL ASSISTANCE | Educational assistance is provided in many forms |
| 1. | Earned/Unearned | i.e., Scholarships, Fellowships, Need-Based Education Grants (Pell Grant and Qualified Tuition |
| 2. | Excluded in Financial (Conditional) | Reductions). Student Loans are not included in educational assistance. (See income type "LOANS"). |
| 3. | Excluded in Patient Liability (Conditional) | For Medicaid budgeting, treatment will vary |
| 4. | Non-Taxable (Conditional) | depending on the source and use of the assistance. |
| | | Educational assistance from the following sources are exempt for all medical programs: Bureau of Indian Affairs, Title IV Assistance (Work-study Pell grant), AmeriCorps State and National AmeriCorps NCCC, and Nevada's Millennium Scholarship. |
| | | VA Educational benefits are non-taxable and exempt in MAGI budgeting. |
| | | Other non-exempt educational assistance used for educational expenses are excluded from income. Educational expenses include tuition, books, lab fees, student fees, supplies and equipment. |
| | | Any non-exempt assistance remaining after deducting the allowable educational expenses or which is used only for daily living expenses can be counted as income. |
| | | NOTE: Deduct allowable educational expenses from the total of all remaining non-exemple educational assistance received by the individual. |
| | | Expenses that DO NOT qualify include: room and |

board, travel, research, clerical help or equipment not required for enrollment or class attendance.

| INCOME TYPE | DESCRIPTION |
|--|--|
| EDUCATIONAL ASSISTANCE | Verification: (not all inclusive) |
| (Cont'd) | Copy of documents from source of payment.Form 2020Receipt of educational expenses. |
| EMERGENCY ENERGY CONSERVATION SERVICE AND ENERGY CRISIS | Energy assistance payments to needy persons. |
| ASSISTANCE PROGRAM | Verification: (not all inclusive) |
| 1. Unearned | - Statement from the source of payment |
| 2. Excluded in Financial | |
| 3. Counted in Patient Liability | |
| 4. Non-Taxable EMPLOYERS INSURANCE COMPANY OF NEVADA (EICON) | Nevada disability program benefits to employees |
| (LICON) | Verification: (not all inclusive) |
| 1. Unearned | , |
| 2. Counted in Financial | Copy of checkCopy of award or denial letter |
| 3. Counted in Patient Liability | |
| 4. Taxable | |
| FAMILY PRESERVATION PROGRAM | See income type "Assistance Based on Need" |
| FEDERAL EMERGENCY MANAGEMENT ADMIN. | Funds for disaster relief, or comparable assistance provided by states, local governments (FEMA) or |
| 1. Unearned | private disaster assistance organizations pursuant to Section 312 of the Stafford Act. |
| 2. Excluded in Financial | Verification: (not all inclusive) |
| 3. Counted in Patient Liability | - Client statement |
| 4. Non-Taxable | Cheft statement |

| INCOME TYPE | | DESCRIPTION | | |
|-------------|---------------------------------------|--|--|--|
| FE | DERAL TAX REFUNDS | Funds received December 31, 2009 or later, either | | |
| 1. | Excluded in Financial | as an advance or as a refund regardless of the tax year involved are excluded for a period of 12 | | |
| 2. | Excluded in Patient Liability | months. | | |
| 3. | Non-Taxable | Verification: (not all inclusive) | | |
| | | Copy of checkCopy of client's tax forms | | |
| FOS | STER CARE PAYMENTS | See income type "Assistance Based on Need" | | |
| | MBLING WINNINGS | Income received from gambling winnings. | | |
| 1. | Unearned | Depending on the circumstance and/or amount of income received, the individual may not be | | |
| 2. | Excluded in Financial (Conditional) | required to claim the income on their taxes. If the individual reports this type of income on their | | |
| 3. | Counted in Patient Liability | application, then the income is counted in the MAGI budgeting. | | |
| 4. | Taxable | NON-MAGI: Evaluate gambling winnings under irregular and infrequent income rules. If not irregular or infrequent count in financial. | | |
| | | MAGI: Gambling winnings are taxable income. | | |
| | | Verification: | | |
| | | Client statementStatement from casino paying proceeds | | |
| GE | NERAL ASSISTANCE | See income type "Assistance Based on Need" | | |
| _ | TS GIVEN AWAY BY THE USEHOLD (GIFTOR) | Any gift of money or property given away by the giftor to an individual, either directly or indirectly, | | |
| 1. | Taxable/Non-Taxable | where an equal exchange (in Money or Fair Market Value) is not received in return. This may include | | |
| 2. | \$14,000 Annual allowance per Giftee | money given for special occasions (e.g., Christmas, birthdays, anniversary, etc.) | | |
| | | Gifts are evaluated per recipient. Each individual gift made is compared to the annual allowance. Gifts made that are \$14,000 or less is non-taxable. A gift that exceeds the annual allowance of \$14,000 is taxable and countable in the annualized income of the giftor. | | |

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GIFTS GIVEN AWAY BY THE HOUSEHOLD (GIFTOR) (Cont'd)

Fair Market Value: The fair market value is the price at which the property would change hands between a willing buyer and a willing seller.

MAGI Exception: Gifts given away by a giftor are taxable unless a valid arrangement has been made with the Giftee to pay the taxes on the gift.

Verification: (not all inclusive)

- Statement from the person receiving the gift
- Copy of appraisal
- Form 2506

GIFTS RECEIVED BY THE HOUSEHOLD (GIFTEE)

- Unearned
- 2. Excluded in Financial
- 3. Counted in Patient Liability
- 4. Non-Taxable with exception

Any gift of money or property received by the giftee, either directly or indirectly, where an equal exchange (in Money or Fair Market Value) is not received in return. This may include money received for special occasions (e.g., Christmas, birthdays, anniversary, etc.).

Fair Market Value: The fair market value is the price at which the property would change hands between a willing buyer and a willing seller.

MAGI Exceptions: Gifts received by an individual are taxable only if the individual has a valid arrangement with the giftor to pay the taxes on the gift.

Verification: (not all inclusive)

- Statement from the person giving the gift
- Copy of appraisal
- Form 2506

HOLIDAY PAY

Employer paid holiday pay.

- 1. Earned
- 2. Counted in Financial
- 3. Counted in Patient Liability
- Taxable

- Verification: (not all inclusive)
 - Copy of pay check
 - Statement from Employer, Form 2074

| INC | COME TYPE | DESCRIPTION |
|-------------------------------------|------------------------------|--|
| HOUSING and URBAN DEVELOPMENT (HUD) | | Subsidized housing assistance. Provided by HUD. |
| 1. | Unearned | Verification: (not all inclusive) |
| 2. | Excluded in Financial | Copy of checkStatement from HUD |
| 3. | Counted in Patient Liability | Claterion Hom Hob |
| 4. | Non-Taxable | |
| | DIAN GENERAL | Federal payments to needy American Indians. |
| AS | SISTANCE (IGA) | Verification: (not all inclusive) |
| 1. | Unearned | - Copy of check or award letter |
| 2. | Counted in Financial | |
| 3. | Counted in Patient Liability | |
| 4. | Non-Taxable | |
| INE | DIAN MONIES | Judgment funds received by members of an Indian |
| 1. | Unearned | tribe and per capita payments made under Public Law. |
| 2. | Excluded in Financial | Per capita payment made under Public Law 108- 270 "Western Shoshone Claims Distribution Act" is |
| 3. | Counted in Patient Liability | exempt in Patient Liability. |
| 4. | Non-Taxable | Verification: (not all inclusive) |
| •• | TOTT TUNGSTO | - Copy of check or award letter |

| | MEDIOAL MEDIOAL MEDIO | AL MILDIOAL MILDIOAL MILDIOAL | |
|--------------------------------------|------------------------------|--|--|
| | | | |
| INC | OME TYPE | DESCRIPTION | |
| | | | |
| INDIAN TRUSTS OR RESTRICTED LANDS | | This income (often called individual Indian trust or lease income) generally comes from interests in lands that were allotted to individual Indians many | |
| 1. | Unearned | years ago. | |
| 2. | Excluded in Financial | Effective January 1, 1994, up to \$2,000 per year in payments derived from individual interests in | |
| 3. | Counted in Patient Liability | Indian trust or restricted lands is excluded from income. | |
| 4. | Non-Taxable | MAGI – exclude all income received from interest in Indian lands. | |
| | | Verification: (not all inclusive) | |
| | | - Statement from the source of payment | |
| IND | IVIDUAL DEVELOPMENT | Intended to improve the economic independence | |
| ACCOUNT (IDA) | | and stability of individuals and families and to | |
| 1. | Earned/Unearned | promote and support the transition to economic self-sufficiency. An IDA participant can only deposit earned income into an IDA. Federal funds | |
| 2. | Excluded in Financial | match the amount of earnings low-income working | |

- 3. **Excluded in Patient Liability**
- 3. Non-Taxable

individuals and families deposit into an IDA. IDA savings are to be used for a first home purchase, post-secondary educational expenses, business capitalization.

The Social Security Act provides for State Family Assistance Grant funds (i.e., TANF, WtW) to be used to establish IDA. The Assets for Independence Act (AFIA) provides for IDAs to be established under Head Start, Low Income Home Energy Assistance (LIHEA), and Community Services.

Income in an IDA includes:

- Participant contribution (earned income);
- Interest earned on participant earned income contributions:
- Matching funds; and
- Interest accrued on matching funds.

Note: Count the participant's gross earned income MINUS the participant's contribution An individual, whose participation in the IDA program has terminated, voluntarily or otherwise, is no longer covered by the income exclusion.

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| | OMF | IVDE |
| | | |

INFREQUENT AND IRREGULAR INCOME

- 1. Earned/Unearned
- 2. Excluded in Financial
- 3. Counted in Patient Liability
- 4. If infrequent or irregular, exclude **first** \$30 per calendar quarter of earned income; and **first** \$60 per calendar quarter of unearned income.
- 5. \$10 per month of earned income; and \$20 per month of unearned income.
- Non-Taxable

Income excluded which is received either infrequently or irregularly.

Irregular income is considered received if an individual cannot reasonably expect to receive it.

Beginning September 8, 2006, income is considered infrequent if received only once during a calendar quarter from a single source *and* the individual did not receive it in the month immediately preceding that month or in the month immediately subsequent to that month, regardless of whether or not these payments occur in different calendar quarter.

Verification: (not all inclusive)

- Type, amount, frequency, or predictability of income.
- Copy of check
- Document from source of payment

IN-KIND WAGES

- Earned
- Counted in Financial
- 3. Counted in Patient Liability
- 4. Non-Taxable

The value of goods or services given to the client for work performed instead of cash payment.

Verification: (not all inclusive)

- Statement from employer

| INCOME TYPE | | DESCRIPTION | |
|---------------------------|--|--|--|
| | | | |
| INT | EREST/DIVIDENDS | Accrued interest and dividend payments are | |
| 1. | Unearned | excluded in financial eligibility when posted quarterly, semi-annually or annually from a single | |
| 2. | Counted in Financial (Conditional) | source. For example: Insurance is one source; banking is one source; burial is one source; bonds are one source; Reparation payments are one | |
| 3. | Counted in Patient Liability (Conditional) | source. Interest is counted as income for patient liability when the amount posted is \$5 or more in | |
| 4. | Taxable | any month. | |
| | | Interest and dividends paid monthly are counted in financial eligibility and patient liability. | |
| | | MAGI : Include any tax exempt interest received in assistance unit income. | |
| | | Verification: (not all inclusive) | |
| | | Current bank statementComputer printout from bankWritten statement from the bank | |
| IRA WITHDRAW/DISTRIBUTION | | Individuals can receive one time or scheduled | |
| 1. | Unearned | distributions from their IRA account. If an early withdrawal is taken, reduce the gross amount by any penalty paid. | |
| 2. | Counted in Financial | | |
| 3. | Counted in Patient Liability | MAABD – Evaluate the IRA account as an available resource prior to the income | |
| 4. | Taxable (Conditional) | determination. | |
| | | Distributions from a regular IRA account are taxable. | |
| | | Distributions from a ROTH IRA are non-taxable income. | |
| JOB CORP | | Paid from the Economic Opportunity Act. | |
| 1. | Earned | Verification: (not all inclusive) | |
| 2. | Counted in Financial | - Copy of check or award letter | |
| 3. | Counted in Patient Liability | | |
| 4. | Taxable | | |

| INCOME TYPE | | DESCRIPTION | |
|-------------|-------------------------------------|---|--|
| JUDGMENTS | | Any money paid to an employee from a judgment | |
| 1. | Unearned | resulting from legal action for wages. | |
| 2. | Counted in Financial | Verification: (not all inclusive) | |
| 3. | Counted in Patient Liability | - Copy of Judgment | |
| 4. | Taxable | | |
| JUF | RY DUTY COMPENSATION | Income earned from serving jury duty. | |
| 1. | Unearned | Depending on the circumstance and/or amount of | |
| 2. | Excluded in Financial (Conditional) | income received, the individual may not be required to claim the income on their taxes. If the individual reports this type of income on their application, then the income is counted in the | |
| 3. | Counted in Patient Liability | MAGI budgeting. | |
| 4. | Taxable | Verification: (not all inclusive) | |
| | | - Documents from the source of payment | |
| | ASE/RENTAL INCOME | Gross lease income less expenses. Lease expenses may include interest on mortgage, | |
| 1. | Unearned | property taxes, maintenance/repair costs, insurance on structure, advertising and utilities | |
| 2. | Counted in Financial | when paid by the landlord. Lease expenses of | |
| 3. | Counted in Patient Liability | | |
| 4. | Taxable | | |
| | | Copy of receipt book Copy of check or money order Tenant's statement of payment Proof of operating expenses | |
| LIFI | E INSURANCE PAYMENTS | Accelerated life insurance payments are proceeds | |
| 1. | Unearned | paid to a policy holder PRIOR to death. These payments are income in the month received and a | |
| 2. | Counted in Financial | resource if retained into the following month. | |
| 3. | Counted in Patient Liability | Verification: (not all inclusive) | |
| 4. | Taxable | Insurance policyForm 2015 from insurance companyWritten statement from insurance company | |

| INCOME TYPE | | DESCRIPTION |
|-------------|--|--|
| LOANS | | Money a person borrows or money received as |
| 1. | Unearned | repayment of the principal of a loan is not counted. |
| 2. | Excluded in Financial | If a loan is NOT bona fide (not legally valid and made in good faith), the proceeds are counted in |
| 3. | Excluded in Patient Liability | the month received. Interest received is also counted the month received. |
| 4. | Non-Taxable | Verification: (not all inclusive) |
| | | Client's statement is acceptableForm 2506 |
| | G TERM CARE JRANCE | Long Term Care policies that pay directly to the facility should be considered a third party payment and not counted in financial eligibility or patient |
| 1. | Unearned | liability. |
| 2. | Counted in Financial (conditional) | Long Term Care policies that pay directly to the recipient without restriction on use of funds are counted as income in financial eligibility and |
| 3. | Counted in Patient Liability (conditional) | patient liability. |
| 4. | Taxable (Conditional) | Long Term Care policies that pay directly to the recipient for reimbursement of care already paid for are considered third party payments and not counted in financial eligibility. These payments are counted in patient liability. |
| | | MAGI : Long Term Care payments received by individuals are excluded from MAGI budgeting only if the premiums for the insurance were paid for with after-tax dollars. If the insurance premiums are paid with pre-tax dollars or the insurance is provided by the employer, any payments received from this insurance becomes countable on MAGI. |
| | | Verification: (not all inclusive) |
| | | Insurance policyForm 2015 from insurance companyWritten statement from insurance company |

| INCOME TYPE | | DESCRIPTION |
|---------------------------------|--|---|
| | | |
| LUN | MP SUM PAYMENTS | Lump sum payments are considered income in the month received. Exception: SSI lump sum |
| 1. | Unearned | payments. |
| 2. | Counted in Financial | For retroactive Social Security Disability benefits which must be paid in installments due to the Drug |
| 3. | Counted in Patient Liability (not to exceed actual cost of care) | Alcohol Addiction (DA&A) law, count the entire lump sum entitlement (sum of all installment payments) amount in the <u>first</u> month an installment payment is made. |
| 4. | Taxable | Verification: (not all inclusive) |
| | | Copy of check or money order Legal documentation Client's sworn and dated statement Documents from public agencies (SSA, SIIS, VA, etc.) |
| | DICAL INSURANCE SH PAYMENTS | REIMBURSEMENT for medical costs paid by the client and medical insurance cash payments the |
| 1. | Unearned | client proves were applied toward medical bills. |
| 2. | Excluded in Financial | Verification: (not all inclusive) |
| 3. | Excluded in Patient Liability | Explanation of Benefits (EOB) from the insurance company |
| 4. | Non-Taxable | - Receipts for medical payments |
| MEDICARE PREMIUM REIMBURSEMENTS | | Medicare reimbursements are exempt ONLY if the client paid the premium. |
| 1. | Unearned | |
| 2. | Excluded in Financial | Verification: (not all inclusive) |
| 3. | Excluded in Patient Liability | - Copy of the check or award letter |
| 4. | Non-Taxable | |

| INCOME TYPE | | DESCRIPTION | |
|-------------------------------|------------------------------|--|--|
| MILITARY DEPENDENT ALLOTMENTS | | | |
| 1. | Unearned | Enlisted service individuals may make an allowance for dependents. | |
| 2. | Counted in Financial | Verification: (not all inclusive) | |
| 3. | Counted in Patient Liability | SSA Benefit Record Written statement from Military Allotment Branch | |
| 4. | Taxable | | |
| MIL | ITARY HOSTILE FIRE PAY | Hostile fire pay is a special type of pay to a service | |
| 1. | Unearned | member who is: | |
| 2. | Excluded in Financial | subject to hostile fire or explosion of hostile mines; or | |
| 3. | Counted in Patient Liability | - on duty in an area in which he/she is in | |
| 4. | Taxable | imminent danger of being exposed to host fire or explosion of hostile mines, AND | |
| | | while on duty in that area, other service members in the same area are subject to hostile fire or explosion of hostile mines; or | |
| | | killed, injured, or wounded by hostile fire, explosion of a hostile mine, or any other hostile action. | |
| | | Verification: (not all inclusive) - Copy of check - Documents from the source of payment | |
| OLI | DER AMERICANS ACT | The Federal Government through the | |
| 1. | Earned | Administration on Aging is involved in a variety of programs for older Americans. The programs may | |
| 2. | Counted in Financial | be operated by State or local governments or community organizations. Some program types | |
| 3. | Counted in Patient Liability | include health and nutrition services, legal | |
| 4. | Taxable | assistance and community service employment. | |

earned income.

A wage or salary paid under Chapter 35 of Title 42 of the U.S. Code, the Older Americans Act is

| INCOME TYPE | | DESCRIPTION | |
|------------------------------|------------------------------|--|--|
| OLDER AMERICANS ACT (Cont'd) | | Exception: Anything other than a wage or salary is excluded in financial eligibility and patient liability and non-taxable. | |
| | | Verification: (not all inclusive) | |
| | | Copy of checkDocuments from the source of payment | |
| PA | NHANDLING | Income received from panhandling. | |
| 1. | Unearned | Depending on the circumstance and/or amount of | |
| 2. | Excluded in Financial | income received, the individual may not be required to claim the income on their taxes. If the | |
| 3. | Counted in Patient Liability | individual reports this type of income on the application, then the income is counted in the | |
| 4. | Taxable | MAGI budgeting. | |
| | | Verifications: (not all inclusive) - Documents from the source of payment | |
| P.A | A.S.S. | Income necessary to fulfill a Plan for Achieving | |
| 1. | Unearned | Self-Support for BLIND and DISABLED individuals. The plan must be an individual plan in | |
| 2. | Excluded in Financial | writing and approved by Social Security. | |
| 3. | Counted in Patient Liability | Verification: (not all inclusive) | |
| 4. | Taxable | - Award letter from Social Security | |
| PE | NSIONS | Benefits paid to a pensioner following retiremen | |
| 1. | Unearned | from employment. Any portion of a pension paid directly to the spouse per a divorce settlement is | |
| 2. | Counted in Financial | not countable toward the client for financial eligibility or patient liability. (Divorce settlement | |
| 3. | Counted in Patient Liability | must have occurred prior to Medicaid application. | |
| 4. | Taxable | Verification: (not all inclusive) | |
| | | Copy of check or award letterForm 2339 | |

| INCOME TYPE | DESCRIPTION |
|--|---|
| PROFIT SHARING PLAN | Profit gained from shares owned in the business of |
| 1. Earned | employer. |
| 2. Counted in Financial | Verification: (not all inclusive) |
| 3. Counted in Patient Liability | Copy of financial statement or check |
| 4. Taxable | |
| PROMISSORY NOTES, FORMAL WRITTEN AGREEMENTS AND PROPERTY AGREEMENTS | If the note or agreement is determined to be a resource, that portion of any payment received representing payment on the principal is also a resource. The portion of any payment which represents interest on the principal is unearned |
| 1. Unearned | income. If the note or agreement is determined |
| 2. Counted in Financial | NOT to be a resource, total payments received, whether principal and/or interest, are unearned |
| 3. Counted in Patient Liability | income. |
| 4. Taxable | Verification: (not all inclusive) |
| | - Copy of the Note or Agreement |
| PUBLIC EMPLOYEES RETIREMENT (PERS) 1. Unearned | If the client has been a public employee or is the widow/widower or dependent child (under 18) of a deceased public employee, retirement, survivors, or disability benefits may be available. |
| 2. Counted in Financial | • |
| 3. Counted in Patient Liability | Verification: (not all inclusive) - Copy of Award letter or Form 2339 - SSA Benefit Record |
| 4. Taxable | |
| PUBLIC LAW 92-336 (1972 RSDI DISREGARD) | Disregard the amount of the October 1972 twenty percent (20%) RSDI increase. |
| 1. Unearned | Varification: (not all inclusive) |
| 2. Excluded in Financial | Verification: (not all inclusive) |
| 3. Counted in Patient Liability | Copy of Check or Award LetterStatement from SSA |

| INCOME TYPE | | DESCRIPTION |
|---------------------------------|-------------------------------|---|
| RADIATION EXPOSURE PAYMENTS | | Payments made under the Radiation Exposure Compensation Act. |
| 1. | Unearned | Varification: (not all inclusive) |
| 2. | Excluded in Financial | Verification: (not all inclusive) |
| 3. | Excluded in Patient Liability | - Documents from the source payment |
| 4. | Non-taxable | |
| RAILROAD RETIREMENT BENEFITS | | Persons who may be eligible must apply to the Railroad Retirement Board District Office. Cost-of-living increases usually occur effective December, |
| 1. | Unearned | reflected on January checks. |
| 2. | Counted in Financial | Verification: (not all inclusive) |
| 3. | Counted in Patient Liability | Copy of Award LetterSSA Benefit Record |
| 4. | Taxable | - Form 2339 |
| REC | YCLING | Income received from collecting recyclable goods. |
| 1. | Unearned | Depending on the circumstance and/or amount of income received, the individual may not be |
| 2. | Counted in Financial | required to claim the income on their taxes. If the |
| 3. | Counted in Patient Liability | individual reports this type of income on their application, then the income is counted in the MAGI budgeting. |
| 4. | Taxable | Verification: (not all inclusive) |
| | | - Documents from the source payment |

| INCOME TYPE | | DESCRIPTION |
|--|-------------------------------|---|
| | | |
| REFUGEE CASH ASSISTANCE (RCA) PAYMENTS | | Refuge Cash Assistance (RCA) is a state funded, employment based cash assistance program. RCA is for clients who are not eligible for |
| 1. | Unearned | assistance under the Temporary Assistance for Needy Families (TANF) program. Assistance is |
| 2. | Excluded in Financial | available for the first eight months after arrival in the United States. |
| 3. | Counted in Patient Liability | See "Assistance Based on Need" |
| 4. | Non-Taxable | 200 1 10000111100 200011 011 110001 |
| | | Verification: (not all inclusive) |
| | | - Documents from the source of payment |
| REF | JND ON TAXES | Taxes refunded to the client from the federal or state government. |
| 1. | Unearned | 3 |
| 2. | Excluded in Financial | Verification: (not all inclusive) |
| 3. | Counted in Patient Liability | - Documents from the source of payment |
| 4. | Non-Taxable | |
| | IBURSEMENTS; | Reimbursements, deposits and overcharges |
| | JNDS FOR DEPOSITS | refunded to the client from any source. |
| AND | OVERCHARGES | Varification: (not all inclusiva) |
| 1. | Unearned | Verification: (not all inclusive) |
| 2. | Excluded in Financial | - Documents from the source of payment |
| 3. | Excluded in Patient Liability | |
| 4. | Non-Taxable | |

| INCOME TYPE | | DESCRIPTION |
|-------------|--------------------------------------|---|
| RE | LOCATION ASSISTANCE | Assistance provided under TITLE II of the |
| 1. | Unearned | UNIFORM RELOCATION ASSISTANCE and REAL PROPERTY ACQUISITIONS POLICIES ACT of 1970 from a federal or federally-assisted |
| 2. | Excluded in Financial | project. |
| 3. | Counted in Patient Liability | RELOCATION AS provided by a state or local government or through a state-assisted or locally- |
| 4. | Non-Taxable | assisted project is excluded effective May 1, 1991. |
| | | Verification: (not all inclusive) |
| | | - Copy of check or award letter |
| 1. 2. | Unearned Counted in Financial | Applicants must own or be purchasing the property to consider "roomer/boarder income." When all household members are renting a single dwelling, it is considered shared expenses, not roomer/boarder income. |
| 3. 4. | Counted in Patient Liability Taxable | When a recipient receives contributions for shared expenses that exceed the household's total expenses, the excess is considered unearned income to the recipient. |
| | | Roomer/Boarder income is determined by using gross room/board amount less actual rental expenses. Expenses may include interest on mortgage, property taxes, maintenance/repair costs, insurance on structure, advertising and utilities when paid by the landlord. |

| INCO | OME TYPE | DESCRIPTION |
|---|---|---|
| ROOMER/BOARDER INCOME (Cont'd) | | Expenses are prorated in roomer/boarder situations. Prorate expenses based on the number of rooms designated for rent compared to the number of rooms in the house (do not count bathrooms, basements and attics). Verification: (not all inclusive) - Copy of receipt book, check (money order), tenants' statement of payment or proof of operating expenses. |
| REPARATION PAYMENTS 1. Unearned 2. Excluded in Financial 3. Excluded in Patient Liability 4. Non-Taxable | | REPARATION PAYMENTS from the FEDERAL REPUBLIC OF GERMANY received on or after 11/1/84. WAR REPARATIONS paid under the AUSTRIAN government pension system. However, any interest earned on these payments is countable income. REPARATION PAYMENTS issued to JAPANESE INTERNEES (EXCEPT INTEREST) and ALEUTS pursuant to Public Law 100-383. However, any interest earned on these payments is countable income. Verification: (not all inclusive) - Award letter or copy of check |
| DES | LACEMENT/REPAIR TROYED OR DAMAGED PERTY Unearned Excluded in Financial Excluded in Patient Liability Non-Taxable | The amount of money received for replacement or repair of lost, destroyed, damaged or stolen resources is considered a change in type of resource and is not counted as income. Verification: (not all inclusive) - Copy of check - Documents from source of payment - Receipts for expenses |

| INCOME TYPE | | DESCRIPTION | |
|--|-------------------------------|--|--|
| | TRED SENIOR | Stipends received for services rendered. | |
| VOL | LUNTEER (RSVP) | | |
| 1. | Unearned | Verification: (not all inclusive) | |
| 2. | Excluded in Financial | - Copy of check | |
| 3. | Excluded in Patient Liability | - Documents from source of payment | |
| 4. | Non-Taxable | | |
| RET | TREMENT PAY | Benefits paid to a retiree by the company they | |
| 1. | Unearned | worked for: | |
| 2. | Counted in Financial | Verification: (not all inclusive) | |
| 3. | Counted in Patient Liability | Copy of checkDocuments from source of payment | |
| 4. | Taxable | | |
| RETIREMENT, SURVIVORS, DISABILITY INSURANCE (RSDI) | | Persons who may be eligible must apply at the local Social Security office. Budget the gross amount. Cost-of-living increases usually occur | |
| 1. | Unearned | effective December, reflected on January checks. | |
| 2. | Counted in Financial | MAGI: A Child or Tax Dependent's RSDI income is excluded from MAGI budgeting unless their | |
| 3. | Counted in Patient Liability | income meets certain qualifications or if they are | |
| 4. | Taxable (Conditional) | the Primary Tax Filer. To determine if the Child or Tax dependent's RSDI is countable proceed with the following test as listed on IRS Publication 915 Worksheet A (see appendix H). | |
| | | Only the income of the individual child/tax dependent is used for this test. | |
| | | MAGI RSDI Taxability Test: 1- Annualize the individual child or tax dependent's gross RSDI income (pro-rate if received less than a full year). 2- Divide your annualized RSDI by 50% to determine the adjusted total. 3- Annualize any gross earnings, wages, etc. for the child/tax dependent and add to your adjusted total to get your adjusted income. | |

adjusted total to get your adjusted income.

| | _ | | | | |
|-------|--------|------|---|-----|---|
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| | | IN/I | _ | | |
| 11.4 | CO | IVI | | | _ |

- 4- Annualize any taxable interest or dividends received by the child/tax dependent and add to your adjusted income to get a grand total.
- 5- Compare the grand total income to the IRS baseline of \$25,000/single, or \$32,000/married.

If the grand total is equal to or less than the baseline, none of the RSDI income for the child/tax dependent is countable for MAGI.

If the adjusted income is greater than the baseline, a second test must be completed using IRS Worksheet 1 (see appendix H).

Verification: (not all inclusive)

- Copy of award letter
- Copy of disallowance letter
- SSA Benefit Record
- SOLQ
- IRS Publication 915 Worksheet A
- IRS Worksheet 1

REVERSE MORTGAGES

- 1. Unearned
- 2. Excluded in Financial
- 3. Excluded in Patient Liability
- 4. Non-Taxable

A reverse mortgage is a type of home equity loan, which allows a person to convert some of the equity in their home into cash while retaining home ownership.

Funds obtained from a reverse mortgage may be used for any purpose, including meeting housing expenses such as taxes, insurance, fuel, and maintenance costs.

The funds may be received in a lump sum, in monthly advances, through a line-of-credit or in a combination of distribution methods.

Depending on the agreement with the lender, the loan becomes due with interest when the individual moves, sells the home, dies, or reaches the end of the pre-selected loan term.

Verification: (not all inclusive)

- A copy of the reverse mortgage agreement with the lender
- Documentation of the payments and source

| INCOME TYPE | | DESCRIPTION | |
|--------------------------|--|---|--|
| ROYALTIES | | Income from copyrights on literary, musical, or | |
| 1. | Unearned | artistic works, and similar property, or from patents on inventions, paid for the right to use the work | |
| 2. | Counted in Financial | over a specified period of time. Usually based on the number of units sold, such as the number of books, tickets, or machines sold. | |
| 3. | Counted in Patient Liability | | |
| 4. | Taxable | Income from oil, gas, and mineral properties received when natural resources are extracted from an individual's leased property. Based on units, such as barrels, tons, etc., and paid by the leasee. | |
| | | Verification: (not all inclusive) | |
| | | Copy of checkDocuments from source of payment | |
| - Wa | F-EMPLOYMENT WAGES ages usiness income | Gross income from self-employment less expenses is self-employment wages. | |
| | | Gross business income less all business operating | |
| 1. | Earned | costs is gross wages from self-employment. | |
| 2. | Counted in Financial | The client is responsible for keeping all necessary records. | |
| 3. | Counted in Patient Liability | Verification: (not all inclusive) | |
| 4. | Taxable | Copy of ledger sheets receipts and/or income tax records | |
| SENIOR COMPANION PROGRAM | | Stipends received for services rendered. (See also Action Programs) | |
| 1. | Unearned | Verification (not all inclusive) | |
| 2. | Excluded in Financial | - Copy of check | |
| 3. | Excluded in Patient Liability | - Documents from source of payment | |
| 4. | Non-Taxable | | |

| INCOME TYPE | | DESCRIPTION |
|-------------------------|------------------------------|--|
| | | |
| SEV | ERANCE PAY | Final payment to employees laid off or terminated. |
| 1. | Earned | Verification: (not all inclusive) |
| 2. | Counted in Financial | - Copy of check stubs |
| 3. | Counted in Patient Liability | - Statement from employer, Form 2074 |
| 4. | Taxable | |
| SICK | (PAY | Employer paid sick leave. |
| 1. | Earned | Verification: (not all inclusive) |
| 2. | Counted in Financial | - Statement from employer, Form 2074 |
| 3. | Counted in Patient Liability | - Copy of paystub |
| 4. | Taxable | |
| SPINA BIFIDA ALLOWANCES | | Children of Vietnam veterans who are born with |
| 1. | Unearned | Spina Bifida are eligible to receive a monthly allowance ranging from \$200 to \$1,200 per month, |
| 2. | Excluded in Financial | effective October 1, 1997. |
| 3. | Counted in Patient Liability | These payments are excluded from income and resources. |
| 4. | Non-Taxable | Verification: (not all inclusive) |
| | | Documents from source of payment Documents from the Veterans Administration or Department of Veterans Affairs |
| SPO | NSOR INCOME | The income of a non-citizen's sponsor is not |
| 1. | Unearned | deemed in the Medicaid and NCU eligibility determination. |
| 2. | Excluded in Financial | If the sponsor is providing a cash contribution to |
| 3. Liabi | Excluded in Patient lity | the household evaluate this amount under cash contribution. |
| 4. | Non-Taxable | |

| INCOME TYPE | | DESCRIPTION |
|------------------------------------|-------------------------------------|---|
| STUDENT/CHILD EARNED INCOME | | MAABD Exclusion: If a child is under 22, not the head of a household, regularly attending school, and has never been married, exclude \$1,730 per |
| 1. | Earned | month not to exceed \$6,960 per calendar year. |
| 2. | Conditional Exclusion in Financial | MAGI Exclusion: Child/tax dependent income is not counted in the tax payers assistance unit |
| 3. | Counted in Patient Liability | unless the child/tax dependent is required to file a tax return. |
| 4. | Taxable- MAGI conditional exclusion | Earnings of a child/tax dependent are included in their own assistance unit when the child/tax dependent is not included in the same assistance unit as the parent/tax filer claiming them. |
| | | Verification: (not all inclusive) |
| | | Copy of check, Form 2074School statement |
| STRIKE BENEFITS | | Income received from a union as strike or lockout benefits. |
| 1. | Unearned | |
| 2. | Counted in Financial | Verification: |
| 3. | Counted in Patient Liability | Copy of checkStatement from agency paying benefit |
| 4. | Taxable | |
| SUPPLEMENTAL SECURITY INCOME (SSI) | | Benefits based on need for aged, blind and disabled individuals. |
| 1. | Unearned | Verification: (not all inclusive) |
| 2. | Excluded in Financial | SOLQSSA Benefit Record |
| 3. | Excluded in Patient Liability | SDXCopy of award or denial letter |
| 4. | Non-Taxable | See "Cost of Living Adjustments" (COLAs) for evaluating increases to SSI. |

| INC | OME TYPE | DESCRIPTION |
|------------|---|--|
| | PPORTED LIVING RANGEMENT (SLA) | Supported Living Arrangement (SLA) payments are funds authorized by state legislation to assist individuals with disabilities or mentally disabled |
| 1. | Unearned | SSI applicants/recipients so they can live in the community. |
| 2. | Counted in Financial | · |
| 3. | Counted in Patient Liability | exempt payments to or received on behalf of an SSI recipient, and exempt payments for medical needs that are |
| 4. | Non-Taxable | not paid by Medicaid. |
| how TAN | sidered income. MH/MR may a rever, this is the same as Suppo NF/TRIBAL TANF | Any cash and/or in-kind assistance provided by a governmental medical or social services program |
| 1 | Unearned | is not counted as income. |
| 2. | Excluded in Financial | |
| 3. | Excluded in Patient Liability | |
| 4. | Non-Taxable | |
| TRI | BAL GAMING INCOME | Funds paid in a lump sum to an eligible tribal individual from tribal casino revenues. |
| 1. | Count as unearned income Conditional exclusion | In month received, credited to individual's account, or set aside for the individual's use. |
| 2. | Count in financial | Beginning September 8, 2006, income is considered infrequent if received only once during |
| 3. | Count in Patient Liability | a calendar quarter from a single source and the individual did not receive it in the month |
| 4. | Taxable | immediately preceding that month or in the month immediately subsequent to that month, regardless |
| 5. | Exclude first \$60 per calendar quarter | of whether or not these payments occur in different calendar quarter. |
| 6. | Exclude if does <i>not</i> exceed \$20 per month | Between July 1, 2004 and September 7, 2006, infrequent income defined as income received no more than once in a calendar quarter from a single source. |

| INCOME TYPE | DESCRIPTION |
|----------------------|---|
| TRIBAL GAMING INCOME | Prior to July 1, 2004, infrequent or irregular income |
| (Cont'd) | is excluded provided the total does not exceed. |
| | Verification: (not all inclusive) |
| | Type, amount, frequency, or predictability of income Copy of check |
| | - Document from source of payment |

INCOME TYPE

DESCRIPTION

TRUST FUNDS

- Unearned
- Counted in Financial
- Counted in Patient Liability
- Taxable

For the MAABD program, all trusts (other than minor blocked trusts) are referred to the Chief of Eligibility and Payments (E&P) for a legal evaluation. The case manager must obtain the trust document with all attachments to send with the request, using Form 6009.

For clients applying for or receiving Medicaid in a MAGI category, do not send trusts for evaluation. Verify if the client is receiving income from the trust, and count the income per the instructions in this section. This includes institutionalized individuals receiving Medicaid as a Childless Adult (CA).

Always refer trusts to the Chief of E&P when an individual receiving Medicaid in a MAGI category is to be converted to MAABD under the Institutional or Home-Based Waiver programs.

Trusts established prior to August 11, 1993 by an individual or the individual's spouse, under which the individual is the recipient of all or part of any payments from the trust, are called Medicaid Qualifying Trusts (MQTs). MQT assets (income/resources) are "deemed" available to the client

The following are types of payments from a trust fund:

- Interest income as it becomes available, if the client has a right to the interest on the principal, whether or not the client is currently receiving it.
- 2. Payments from the trust which are being made to:
 - The client; or
 - The representative/legal guardian of the client; or
 - A vendor on behalf of the client.

| | | | | | _ |
|-----|----|-------|-----|-----|---|
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TRUST FUNDS (Cont'd)

3. Payments which are being or <u>could be made</u> to the client from a Medicaid Qualifying Trust. The maximum payment which could be made to the client will be counted whether it is being paid or not.

Verification: (not all inclusive)

- Copy of trust document with all attachments
- Copy of trust account ledgers
- Statement from guardian
- Memorandum from Chief of E&P

UBER/LYFT DRIVER WAGES

- Wages
- Business Income
- Earned
- 2. Counted in Financial
- 3. Counted in Patient Liability
- 4. Taxable

Uber/Lyft Drivers are required to keep detailed records of any mileage or expenses related to their business. Drivers are able to claim their actual costs, a percentage of their actual costs, or use a standard rate per business mile.

Actual costs include car/lease payments, vehicular improvements, vehicle registration, etc. as it relates to the business usage of the Uber/Lyft vehicle. Verification must be provided.

Drivers who use their vehicle for both business and personal transportation, may claim only a percentage of the actual costs as a deduction. This percentage is calculated as (business mileage/total mileage) used on the vehicle. Multiply this percentage to all verified actual costs to determine the allowable deduction.

(Ex. Client provides proof they drove 1000 miles for Uber out of a total 2000 miles on their car. This calculates to 50% (1000/2000), allowing only 50% of the actual costs as a deduction).

Non-car related expenses such as parking fees, tolls, meals, lodging, water, snacks, etc. that are attributable as business usage are an allowable deduction for Uber/Lyft drivers regardless of which expense option they claim.

| INCOME TYPE | | DESCRIPTION |
|---------------------------------|------------------------------|--|
| UBER/LYFT DRIVER WAGES (Cont'd) | | Verification: (not all inclusive) |
| (00 | , | Copy of ledger sheets, receipts and /or income tax records |
| | | - Uber/Lyft printouts on mileage usage |
| UNIF | FORM GIFTS TO MINORS | Uniform Gifts to Minors Act permits gifts to minors |
| 1. | Real/Personal Property | which are free of tax burdens. |
| | , , | An individual (donor) makes an irrevocable gift of |
| 2. | Conditional Exclusions | money or other property to a minor (the donee). The gift, plus any earnings it generates, is under the control of a custodian until the donee reaches the age of majority by state law (18 years for Nevada). The custodian has discretion to provide to the minor or spend for the minor's support, maintenance, benefit or education, as much of the assets as he/she deems equitable. The donee automatically receives control of the assets upon reaching the age of majority. |
| | | The gift, including any additions or earnings, is not income to the donee. The custodian's disbursements to the donee are income to the minor. All property becomes available to the donee and subject to income rules in the month the donee reaches the age of majority. The month following the month of majority, the property is subject to resource evaluation. |
| | | Verification: (not all inclusive) |
| | | Copy of the document of ownership, e.g., deed, CD, savings passbook, etc. |
| UNEMPLOYMENT BENEFITS | | Any unemployment benefits being received from Nevada or any other state. |
| 1. | Unearned | · |
| 2. | Counted in Financial | Verification: (not all inclusive) |
| 3. | Counted in Patient Liability | ESD printoutCopy of check stub |
| | | - Form 2339 |

| INCOME TYPE | | DESCRIPTION |
|--------------|--|--|
| VACATION PAY | | Income from employer for vacation time off. |
| 1. | Earned | Verification: (not all inclusive) |
| 2. | Counted in Financial | - Copy of check |
| 3. | Counted in Patient Liability | - Statement from employer, Form 2074 |
| 4. | Taxable | |
| VEN | DOR PAYMENTS | Payments made to business/organization on |
| 1. | Unearned | behalf of the client. |
| 2. | Excluded in Financial | Verification: (not all inclusive) |
| 3. | Excluded in Patient Liability | - Statement from person making payment |
| 4. | Non-Taxable | |
| VET | ERAN'S BENEFITS | Veteran's benefits include the following types: (Benefit increases usually occur effective |
| 1. | Unearned | December, reflected on January checks.) |
| | a. Counted in Financial & Patient Liability | VA Compensation for Service Connected Disability, DIC or VA Survivor benefits |
| | b. Non-Taxable | |
| | a. Exclude UME first then count in Financial & Patient Liability | VA Pension – Pension to wartime veterans, a non- service-connected disability benefit, or a benefit to survivors of wartime veterans. Evaluate for UME |
| | b. Taxable-excluding UME allowance | using Form 2039 and the VA award letter which indicates medical expenses were used to determine benefit amounts. |
| | a. Exclude in Financial & Patient Liability | Aid and Attendance or Housebound benefits are paid to certain veterans and/or widows(ers) of |
| | b. Non-Taxable | veterans when these persons are unable to fully care for themselves physically. The \$90 reduced pension is considered Aid and Attendance benefits. |
| | | A reimbursement of Unusual Medical Expenses (UME) is paid to veterans and/or widow(ers) of veterans when they show their medical expenses exceeded 5% of the maximum annual VA payment rate. This payment could be made as a lump sum payment or be prorated over the next year and be a part of the regular monthly VA check. |

| VETERAN'S BENEFITS (Cont'd) a. Exclude in Financial & Patient Liability b. Non-Taxable Exception: Veterans residing in a State Vet Home do not have their pension reduced to However, their Veteran's benefits are exception financial eligibility. Exception: Veteran's benefits are exception is used for patient liability, incany portions designated as UME or Aid Attendance. VICTIMS OF CRIME 1. Unearned Verification: (not all inclusive) - Copy of award letter or amended award control of copy of disallowance letter - SSA Benefit Record - Written statement from Veteran's Admin tion Regional Office - Form 2339 or 2038 "Benefit" Certification - Form 2339 "VA UME Budget" Exception: Veterans residing in a State Vet Home do not have their pension reduced to However, their Veteran's benefits are exception in the complex of the copy of award letter or amended award copy of disallowance letter - SSA Benefit Record - Written statement from Veteran's Admin tion Regional Office - Form 2339 or 2038 "Benefit" Certification - Form 2339 "VA UME Budget" Exception: Veterans residing in a State Vet Home do not have their pension reduced to However, their Veteran's benefits are exception in the copy of the copy of award letter or amended award copy of the copy of disallowance letter - SSA Benefit Record - Written statement from Veteran's Admin toon Regional Office - Form 2339 or 2038 "Benefit" Certification - Form 2339 "VA UME Budget" Exception: Veterans residing in a State Vet Home do not have their pension reduced to However, their Veteran's benefits are exception and the copy of the copy o | nistra- on" eran's o \$90. cluded |
|--|---|
| However, their Veteran's benefits are except from financial eligibility. Their pension is used for patient liability, incomo any portions designated as UME or Aid Attendance. VICTIMS OF CRIME Payments received from a fund established state to aid victims of crime. 1. Unearned Verification: (not all inclusive) | cluded |
| state to aid victims of crime. 1. Unearned Verification: (not all inclusive) | _ |
| Verification: (not all inclusive) | d by a |
| 2 Evoluded in Financial | |
| - Copy of check or award letter | |
| 3. Counted in Patient Liability - Statement from the agency making page | yment |
| 4. Non-Taxable | |
| VOLUNTEERS IN SERVICE TO A federal domestic volunteer agency s AMERICA (VISTA) program: | ervice |
| 1. Unearned Verification: (not all inclusive) | |
| 2. Excluded in Financial - Copy of check- Statement from VISTA | |
| Excluded in Patient Liability MAGI: Only meal and lodging allowances pa Taxable (Conditional) | |

| INCOME TYPE | | DESCRIPTION |
|------------------------|----------------------------------|--|
| WAGES | | Salary and/or tips from employment. |
| 1. | Earned | Verification: (not all inclusive) |
| 2. | Counted in Financial | Copy of checkStatement from employer, Form 2074 |
| 3. | Counted in Patient Liability | otatement from employer, i omi 2014 |
| 4. | Taxable | |
| | NESS PROTECTION GRAM PAYMENTS | Payments received by informants while living under a witness protection program. Also known as Informant or Whistleblower Awards. Payments are |
| 1. | Unearned | subject to all current federal tax reporting and withholding requirements. |
| 2. | Counted in Financial | Verification: (not all inclusive) |
| 3. | Counted in Patient Liability | - Copy of check |
| 4. | Taxable | - Copy of Form 1099 |
| WOF | RK STUDY PROGRAMS | Income from Work Study Programs. |
| 1. | Earned | Verification: (not all inclusive) |
| 2. | Counted in Financial | - Copy of check |
| 3. | Counted in Patient Liability | - Statement from employer, Form 2074 |
| 4. | Taxable | |
| WORK TRAINING PROGRAMS | | Income from a Work Training Program. |
| 1. | Earned | Verification: (not all inclusive) |
| 2. | Counted in Financial | - Copy of check |
| 3. | Counted in Patient Liability | - Statement from source of payment |
| 4. | Taxable | |

INCOME TYPE

DESCRIPTION

WORKERS COMPENSATION

Income

received by employee unable to perform from employer

- 1. Unearned
- Counted in Financial
- 3. Counted in Patient Liability
- Non-Taxable

Income received by employee temporarily unable to perform work duties, due to injury or disability.

Verification:

- Copy of check
- Statement from employer

WORKFORCE INNOVATION AND OPPORTUNITY ACT (WIOA) PAYMENTS

- 1. Earned / Unearned
- 2. Counted in Financial
- 3. Counted in Patient Liability
- 4. Taxable

Income received by employee unable to perform from employer

WIOA supersedes the Workforce Investment Act (WIA) of 1998 and amends the Adult Education and Family Literacy Act, the Wagner-Peyser Act, and the Rehabilitation Act of 1973. WIOA went into effect on July 1, 2015.

Consider the gross amount of stipends received from WIOA-funded programs as either earned or unearned income as described below. Stipends may be received in lieu of or in addition to wages from the participating employer.

WIOA income for children under the age of 18 is exempt except for minor parent caretakers on their own case. This includes income that is funded by both WIOA and an employer. Payments received for the Summer Youth Employment and Training Program (SYETP) or any comparable AmeriCorps program for summer youth employment is also excluded.

INCOME TYPE

DESCRIPTION

WIOA payments received by adults are countable unless specifically identified by the provider or employer as:

- a needs-based payment
- payment for supportive/post-program services
- payment for participation in:
 - 1. Summer Youth Program; or
 - 2. Work Experience Program; or
 - 3. Limited Work Experience Program (work study for college, vocational courses, enrolled in WNCC Single Parent Program); or
- reimbursement for training-related expense such as transportation, meals away from home, and similar expenses.

Earned income:

- 1. Any Title I program for Adults, Dislocated Workers and Youth.
- 2. Any Title III program administered by an **Employment Service Office (Wagner-Peyser** or other one-stop-centers);
- 3. Any Title IV program such as Vocational Rehabilitation:
- 4. Any other Occupational or On-the-job Training (OJT), or Workforce Development Program such as Limited Work Experience (LWE) or Job Corps participation.

Unearned income:

- 1. Incentive payment from a WIOA-funded program as a reward for completing specific activity (even if based hourly participation);
- 2. Title II payment from Adult Education and Family Literacy Act (AEFLA), Adult Basic Education (ABE), or Literacy and English Language (ESL) acquisition.

Verification: (not all inclusive)

- Statement from provider
- Copy of check or award letter

WORKFORCE INNOVATION AND OPPORTUNITY ACT (WIOA) PAYMENTS (cont'd)