

**BUDGET WORKSHEET – MEDICAL ASSISTANCE – SSI-RELATED BUDGETING  
AND MONTHLY DEEMING WORKSHEET (PARENT TO CHILD)**

CASE NAME	CASE ADDRESS	PROGRAM/CATEGORY	CASE NUMBER																								
1. Parent's gross unearned income a. Subtract any court ordered support paid out from unearned income** b. Remaining unearned income			<b>NOTES:</b>																								
2. Subtract total allocation for non-SSI children <table border="1" style="width:100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width:15%;"></td> <td style="width:15%; text-align: center;">1</td> <td style="width:15%; text-align: center;">2</td> <td style="width:15%; text-align: center;">3</td> <td style="width:15%; text-align: center;">4</td> <td style="width:15%; text-align: center;">5</td> </tr> <tr> <td style="text-align: right;">Allocation</td> <td style="text-align: center;">AMOUNT</td> <td style="text-align: center;">AMOUNT</td> <td style="text-align: center;">AMOUNT</td> <td style="text-align: center;">AMOUNT</td> <td style="text-align: center;">AMOUNT</td> </tr> <tr> <td style="text-align: right;">Subtract child's income</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> </tr> <tr> <td style="text-align: right;">a. Total allocation</td> <td style="text-align: center;">+</td> <td style="text-align: center;">+</td> <td style="text-align: center;">+</td> <td style="text-align: center;">+</td> <td style="text-align: center;">=</td> </tr> </table>					1	2	3	4	5	Allocation	AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT	Subtract child's income	-	-	-	-	-	a. Total allocation	+	+	+	+	=
	1	2		3	4	5																					
Allocation	AMOUNT	AMOUNT		AMOUNT	AMOUNT	AMOUNT																					
Subtract child's income	-	-		-	-	-																					
a. Total allocation	+	+		+	+	=																					
b. If 1(b) is more than 2(a), enter remaining unearned income (1(b) minus 2(a))																											
c. If 1(b) is less than 2(a), enter remaining allocation (2(a) minus 1(b))																											
3. Parent's gross earned income a. Subtract court ordered support paid from earned income** b. Remaining earned income c. Subtract unused portion of allocation for non-SSI children 2(c) d. Remaining earned income																											
If no income is remaining, deemed income is \$0 and proceed to DETERMINATIONS. IF REMAINING INCOME IS:																											
<b>UNEARNED INCOME</b>		<b>EARNED INCOME</b>		<b>TOTAL INCOME</b>																							
	<b>Eligibility</b>		<b>Eligibility</b>		<b>Eligibility</b>																						
Remaining Unearned Income from 2(b)		Remaining Earned Income from 3(d)		Countable Unearned Income (from column I)																							
Subtract Income Disregard	-20	Subtract balance of unearned Income disregard	-	Countable earned income (from column II)	+																						
Remainder		Remainder		Total countable income																							
Subtract health insurance**	-	Subtract \$65	-	Subtract parent allocation (FBR)*	-																						
Countable unearned income		Remainder		Deemed income																							
			<b>DETERMINATIONS</b>	<b>Eligibility</b>																							
			Subtract ½ the remainder	-	Deemed Income																						
*1 parent = individual FBR 2 parents = couple FBR			Remaining earned income		Add child's own unearned income	+																					
			Subtract health insurance**	-	Total unearned income																						
** Health insurance and court ordered support are taken from type of income (earned or unearned) paid from. If unable to determine, deduct from income type most beneficial to the child.			Countable earned income		Subtract health insurance paid out of child's unearned income	-																					
			Remainder		Subtract 1/3 child support	-																					
			Remainder		Subtract income disregard (-20.00)	-																					
			Subtract 1/3 child support	-	Total countable unearned income																						
			Remainder		Add child's countable unearned income (per procedure in 5(b) on reverse side)	+																					
DISPOSITION <input type="checkbox"/> <b>ACCEPTED</b> <input type="checkbox"/> <b>WITHDRAWN</b> <input type="checkbox"/> <b>CLOSED</b>  <input type="checkbox"/> <b>DENIED</b> <input type="checkbox"/> <b>OTHER</b> _____			Subtract income disregard (-20.00)	-	Total countable income																						
			Subtract MA level for one	-	Available monthly income		6 Months excess																				
PERIOD OF CERTIFICATION FROM _____ TO _____	DATE	DATE	SUPERVISOR'S SIGNATURE	DATE	DATE																						
WORKER'S SIGNATURE X		SUPERVISOR'S SIGNATURE X																									

**BUDGET WORKSHEET – MEDICAL ASSISTANCE – SSI-RELATED BUDGETING  
AND MONTHLY DEEMING WORKSHEET (SPOUSE TO SPOUSE)**

CASE NAME	CASE ADDRESS	PROGRAM/CATEGORY	CASE NUMBER			
1. Non-SSI spouse's gross unearned income			<b>NOTES:</b>			
a. Subtract court ordered support paid out*				-		
b. Remaining unearned income						
2. Subtract allocation for non-SSI children						
	1	2		3	4	5
	AMOUNT	AMOUNT		AMOUNT	AMOUNT	AMOUNT
Allocation						
Non-SSI child's income	-	-		-	-	-
a. Total allocation	+	+		+	+	=
b. If 1(b) is more than 2(a), enter remaining unearned income (1(b) minus 2(a))						
c. If 1(b) is less than 2(a), enter remaining allocation (2(a) minus 1(b))						
3. Non-SSI spouse's gross earned income						
a. Subtract court ordered support paid out*			-			
b. Remaining earned income						
c. Subtract unused portion of allocation for non-SSI children (2(c))			-			
d. Remaining earned income						
e. Add remaining unearned income from 2(b)			+			
4. Total income after allocation (if less than the difference between the MA level for 1 and the MA level for 2, deeming not applicable)						
Combined income (SSI individual and non-SSI spouse after non-SSI child allocations)						
5. a. unearned income						
1. Subtract income disregard			- 20			
2. Remaining earned income						
3. Subtract health insurance*			-			
4. Countable unearned income						
b. Earned income						
1. Subtract balance of income disregard not offset by unearned income (if 5(a) is less than 20.00)			-			
2. Remaining earned income						
3. Subtract \$65			-			
4. Remaining earned income						
5. Subtract deduction for impairment related work expenses						
6. Remaining earned income						
7. Subtract ½ of remaining earned income			-			
8. Subtract blind work expenses			-			
9. Subtract health insurance*			-			
10. Countable earned income						
11. Add countable unearned income from 5(a)(4)			+			
12. Countable income						
13. Subtract amount from approved plan to achieve self-support			-			
6. Total countable income						
Subtract appropriate MA level			-			
Available monthly income						
			6 Months excess			
DISPOSITION		WORKER'S SIGNATURE	DATE			
<input type="checkbox"/> ACCEPTED <input type="checkbox"/> WITHDRAWN <input type="checkbox"/> CLOSED <input type="checkbox"/> DENIED <input type="checkbox"/> OTHER _____		X				
PERIOD OF CERTIFICATION		SUPERVISOR'S SIGNATURE	DATE			
FROM	TO	X				

\*Health insurance and court ordered support are taken from type of income (earned or un-earned) paid from. If unable to determine, it is deducted from income type most beneficial to the case