TUBERCULOSIS (TB) PROGRAM INCOME ELIGIBILITY WORK SHEET

(Individual or Applicant With an Ineligible Spouse)

NAME CASE NU					R
APPLICANT'S NAME					
PART I. INELIGIBLE SPOUSE'S UNEARNED INCOME					
Ineligible spouse's total unearned income—do not in public assistance (PA) income:	_	-	-		\$
2. Allocation for ineligible children (if no children, enter			•		¢.
Do not include PA- or TB-eligible children or children	child #1	CHILD #2	CHILD #3	CHILD #4	
	CHILD #1	CHILD #2	CHILD #3	CHILD #4	
a. Standard SSI allocation (couple Federal Benefit Rate [FBR] minus individual FBR):					
b. Subtract child's income (evaluate for student deduction):	_	_	_ _	_	
c. Total allocation:		+	_++		=\$
3. Remaining unearned income (subtract line I.2.c. from					
PART II. INELIGIBLE SPOUSE'S EARNED INCOME					
Ineligible spouse's gross earned income:					\$
					\$
Unused portion of allocation for ineligible child(ren):					
or remaining our roa moonie (east act mill monimin).					·
PART IV. COMBINED INCOMES (Eligible individual and/or ineligible Unearned Income:	•	_	·		
1. Applicant's gross unearned income:					\$ +
2. Ineligible spouse's unearned income (line I.3.):					\$
Combined unearned income (add lines IV.1. and IV.2.): A. Subtract general income exclusion:					\$ <u>-20</u>
B. Subtract other unearned deductions:					\$ -
Combined countable unearned income:					\$
Earned Income:					Total Unearned
6. Earned income of applicant and spouse (use amoun	t from line II.3	for ineligible s	pouse): \$		_
Subtract balance of general exclusion not offset by u					_
8. Remaining earned income:			\$	-65	_
9. A. Subtract work expense exclusion:				-65	_
B. Subtract other earned deductions:					_
10. Remaining earned income:11. Subtract 1/2 remaining earned income:					_
12. Countable earned income:					- \$
13. Total countable income (add lines IV.5 and IV.12.): .					\$ Total Earned
PART V. TB ELIGIBILITY CALCULATION					
Current TB income standard for an individual:					\$
2. Enter total countable income (line IV.13):					\$
If line V.2. is less than or equal to V.1, the					
ELIGIBILITY WORKER SIGNATURE	WORKER NUMBE		MPUTATION DATE	COUNTY USE	ONLY
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INSTRUCTIONS INCOME ELIGIBILITY WORK SHEET MC 281 TB (Individual or Applicant With an Ineligible Spouse)

PART I. 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.
- 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 (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

- **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 I.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.
- 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

- **Line IV.1.** Enter the applicant's or potentially eligible couple's unearned income.
- Line 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 IV.4. A. Enter the \$20 any income exclusion.
- **Line IV.4.** B. Subtract any other unearned income deductions.
- Line IV.5. Subtract line IV.4. from line IV.3. and enter the difference. (If line IV.3. is less than \$20, enter zero in line IV.5.)
- **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.
- Line IV.7. Enter unused portion of the \$20 any income exclusion not offset by unearned income.
- Line IV.8. Subtract line IV.7. from line IV.6. and enter the difference.
- Line IV.9. A. \$65 work expense exclusion.
- **Line IV.9.** B. Subtract any other earned income deductions.
- **Line IV.10.** Subtract line IV.9. from line 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 line 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 an individual.
- **Line V.2.** Enter total countable income from line IV.13.

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.