

KANSAS DEPARTMENT FOR CHILDREN AND FAMILIES

INCOME ALLOWANCE DETERMINATION FORM

Applicant/Recipient Name _____

Name of Spouse _____

Case Number _____

This form is to be used to determine the total amount of income received by a married couple and the amount of the community spouse and/or family member income allowance.

List all of the couple's countable income below. (Attach additional sheet if necessary.)

SECTION I – INCOME

A. EARNED INCOME – List all earned income including self-employment income.

Source	Wage Earner	Monthly Gross (or Adjusted Gross for Self-employment)
1.	_____	_____
2.	_____	_____

B. UNEARNED INCOME – List all unearned income. Examples: alimony, unemployment insurance, royalties, dividends, rent, mortgage, sales contract income, military or VA benefit, retirement pension, worker's compensation, etc. If income received jointly, list both spouses' names.

Source	Spouse(s) Receiving Income	Monthly Gross
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____
7.	_____	_____
8.	_____	_____

B. UNEARNED INCOME (CONTINUED)

- 9. _____
- 10. _____

C. INCOME TOTALS – Total all earned and unearned income from page 1 and list below.

- 1. Income Received by Wife \$ _____
- 2. Income Received by Husband \$ + _____
- 3. Income Received Jointly \$ + _____
- 4. Total Income of Couple \$ = _____

If total income is less than or equal to \$1,967 go to Section III. If total income is greater than \$1,967 complete Section II first.

SECTION II – SHELTER EXPENSES

List monthly shelter expenses below for the community spouse and compute the excess shelter amount.

- 1. Rental Cost \$ _____
- 2. Mortgage Payment \$ _____
- 3. Property Taxes (if not included in item 2 above) \$ _____
- 4. Home Insurance (if not included in item 2 above) \$ _____
- 5. Other (Condominium/Cooperative charges) \$ _____
- Add items 1 through 5 \$ _____
- Subtract \$ - 219 _____
- 6. Total Excess Shelter \$ = _____

SECTION III – COMMUNITY SPOUSE INCOME ALLOWANCE

The community spouse may retain up to \$1,967 per month of the couple’s total income. The community spouse’s share can be increased by the amount of excess shelter expense calculated above. In any event, the maximum community spouse income allowance is \$2,981 per month.

Calculate the total amount of income which can be allocated to the community spouse.

1.	\$1,967 minimum allowance	\$	_____
2.	Total excess shelter (Line II-6)	\$	+ _____
3.	Total allowable community spouse allowance	\$	= _____
4.	Community spouse’s gross income	\$	- _____
5.	Net community spouse income allowance which can be provided	\$	= _____

SECTION IV – FAMILY INCOME ALLOWANCE

Each family member who lives with the community spouse can receive \$656 per month of the income of the spouse in long term care as long as that member’s gross monthly income does not exceed \$1,967. If the income is in excess of \$1,967 no income allowance can be provided to that member. A family member is defined as a minor or dependent child, dependent parent, or dependent brother or sister of either spouse.

List the dependent family members, type of dependency (minor child, disabled, etc.), and amount of gross income for each below.

<u>Name</u>	<u>Dependency</u>	<u>Amount of Gross Income</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
 Total Qualifying Members	_____	

Calculate the total amount of income which can be allocated to each family member.

- | | | | |
|----|--|----|------------------------------|
| 1. | Monthly income allowance per family member | \$ | <u> = 656 </u> |
| 2. | Number of qualifying family members | \$ | <u> x </u> |
| 3. | Total family allowance which can be provided | \$ | <u> + </u> |

SECTION V – SHARE OF INCOME FOR SPOUSE IN LONG-TERM CARE

Calculate the institutionalized spouse's share of the total non-exempt income.

- | | | | |
|----|--|----|---------------------------------|
| 1. | Total income of the institutionalized spouse | \$ | <u> </u> |
| 2. | Income to be allocated to the community spouse | \$ | <u> - </u> |
| 3. | Income to be allocated to other family members | \$ | <u> - </u> |
| 4. | Institutionalized spouse's share of total income | \$ | <u> = </u> |

SECTION VI – TOTAL ALLOCATION

Based on the total allowance amount(s) which can be provided as indicated above, the couple's income will be allocated as follows:

- | | | | |
|----|--|----|---------------------------------|
| 1. | Community spouse's share of total income | \$ | <u> </u> |
| 2. | Spouse in long-term care share of total income | \$ | <u> + </u> |
| 3. | Family member(s) share of total income | \$ | <u> + </u> |
| 4. | Total income of couple | \$ | <u> = </u> |
| | (Should be same as Section I, Line C-4 above) | | |

Person Completing Form _____

Signature _____

Date Form Completed _____