



Your destination for affordable, quality health care, including Medi-Cal

April 24, 2015

This Job Aid illustrates the CalHEERS Budget Worksheet page and is intended for Service Center Representatives (SCRs) and County Eligibility Workers (CEWs). The Budget Worksheet displays for the Administrator (SCR/CEW) role only and illustrates how CalHEERS has calculated income and determined eligibility.

Budget Worksheets

Every time eligibility is determined (for example, an application is submitted, renewed, or a reported change is processed) the CalHEERS Business Rules Engine (BRE) generates a corresponding Budget Worksheet that can be viewed by an Administrator role (Admin), which includes:

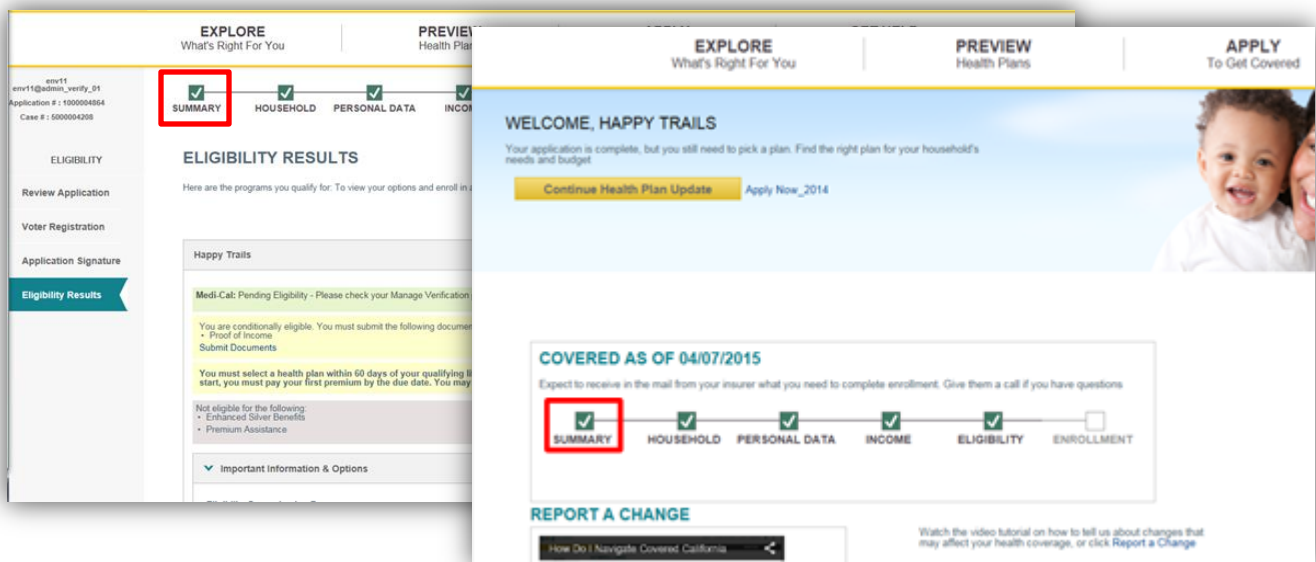
- MAGI Medi-Cal Individual Monthly Income Budget
- displays a monthly Individual budget for each household member
Tax Credit & Cost Sharing Reductions Income Budget
- displays the APTC (Advanced Premium Tax Credit) annual budget for the reported Household

Budget Worksheets are not generated for the following:

- Unsubsidized applications
Manual Eligibility Determinations

Accessing the Budget Worksheet

To access the Budget Worksheet, begin with clicking the account Summary process step either from the Eligibility Results page or the Consumer Home page.



## JOB AID: BUDGET WORKSHEET

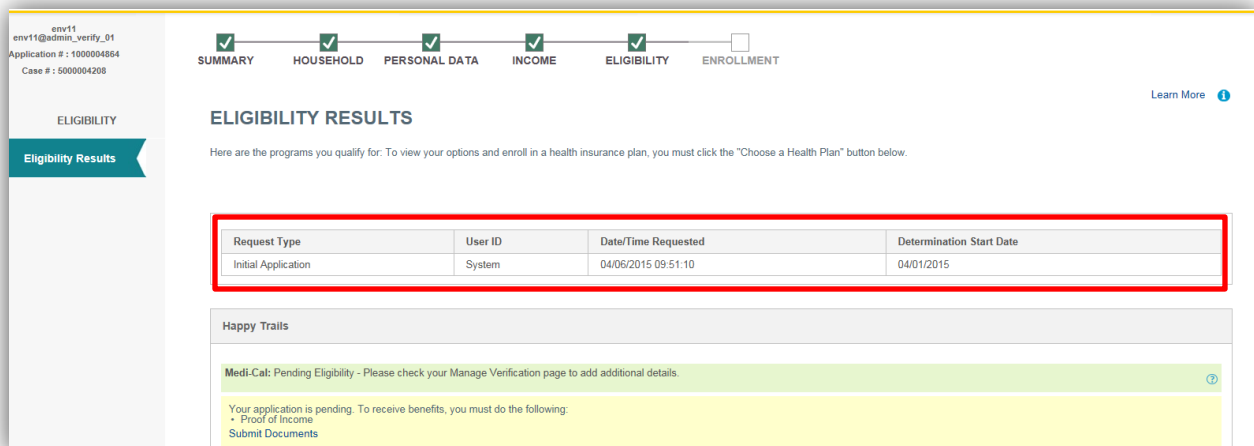
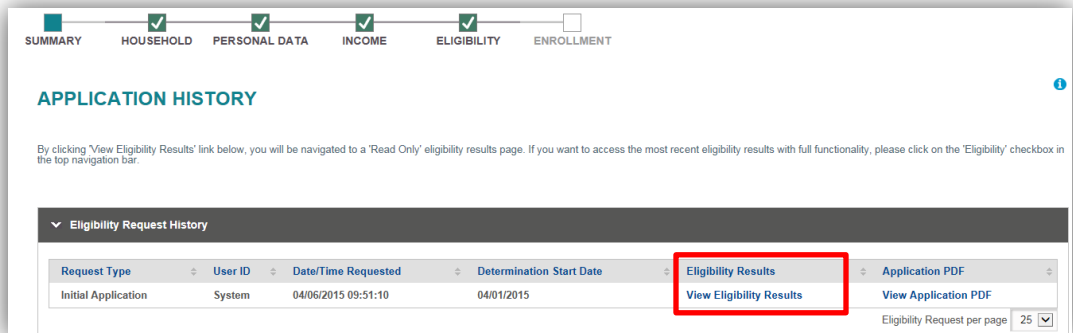
The *Application History* page displays with the Consumer's **Eligibility Request History**. Under the tab, *Eligibility Results* heading, click the link to **View Eligibility Results**. The *Eligibility Results* page displays.

### Eligibility Results Page

The *Eligibility Results* page displays a similar table

to that on the *Application History* page, listing the *Eligibility Results History*.

Note: The *Eligibility Results* page with the *Eligibility Request History* is accessed only through the above outlined pathway (from Summary to *Application History* page to **View Eligibility Results** link.)



- **Request Type** - The type of eligibility request - *Initial Application*, *Renewal*, or *Report a Change* - displays in this column
- **User ID** – The *User ID - Admin User ID*, *Service Center Representative*, or *SC Supervisor* – displays to identify the user who processed the eligibility request. If the transaction is system generated, *System* will display in this column..

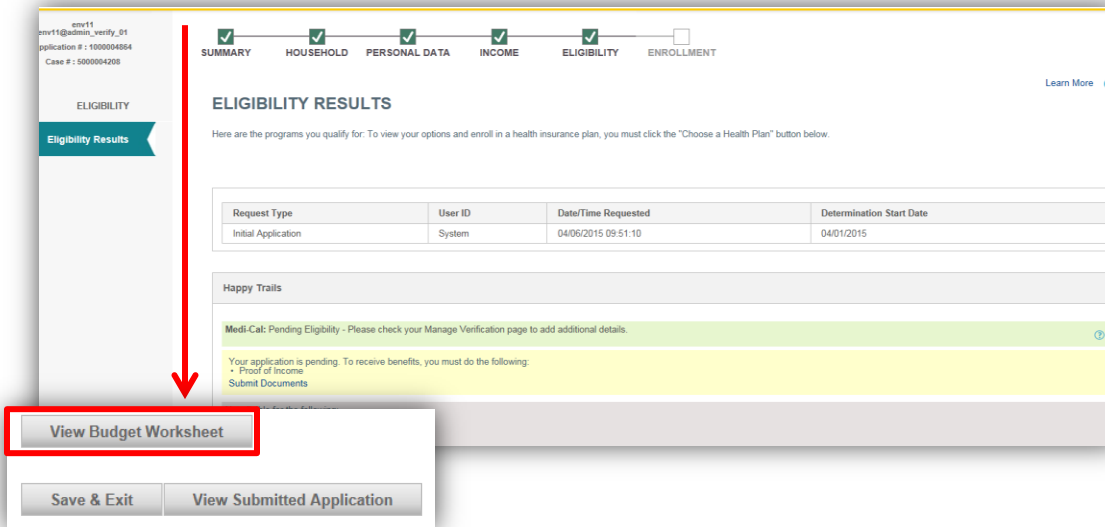
**Note:** If a Consumer submitted an application, Renewal, or Report a Change, their personal User ID displays.

- **Date/Time Requested** – Submission date and time of each eligibility request displays.
- **Determination Start Date** – The earliest determination date for any eligibility request displays.

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**Note:** Only one **Determination Start Date** for each eligibility request displays, regardless of whether it is an initial application, Report a Change, or Renewal.

Scroll to the bottom of the *Eligibility Results* page and click the **View Budget Worksheets** button. The *Budget Worksheet* page displays.

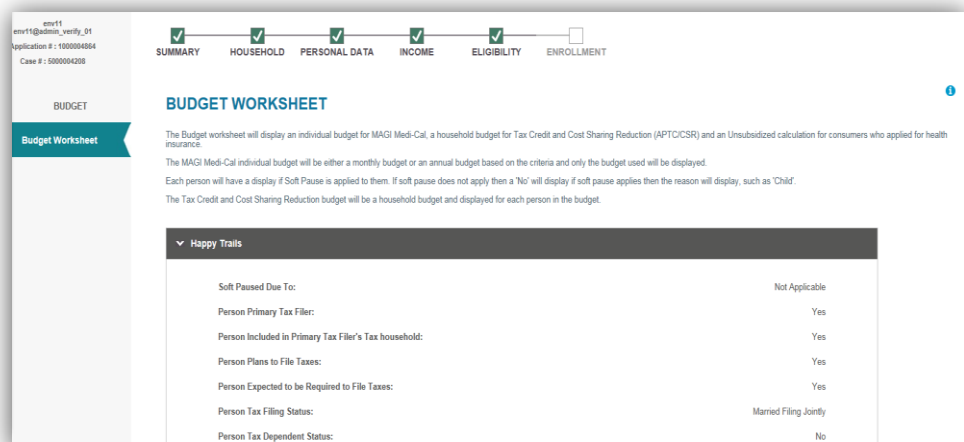


### Budget for an Individual User

The *Budget Worksheet* displays an individual budget for Modified Adjusted Gross Income (MAGI) Medi-Cal and a household budget for Tax Credit and Cost Sharing Reduction (APTC/CSR) with an unsubsidized calculation for each Consumer who applied for health insurance.

- Primary Tax Filer information and tax dependency status is indicated for each household member.
- Filing status will also display:
  - Single
  - Married Filing Jointly
  - Married Filing Separately
  - Head of Household

**Note:** An Individual *Budget Worksheet* displays the factors used to determine each household member's eligibility. An Individual may be determined eligible for multiple programs.



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The *Budget Worksheet* includes an annual household budget and a monthly budget displayed for each household member.

### Soft Pause Indicator

The *Budget Worksheet* displays a Soft Pause indicator for each individual. When a MAGI Medi-Cal Individual reports a change in circumstance which may affect their program eligibility, the consumer's coverage is "paused" until the county evaluates whether the Individual is eligible for a Consumer Protection Program (CPP) or possibly Medically Needy (Non-MAGI Medi-Cal). This is referred to as a "Soft Pause." The purpose of a Soft Pause is to maintain continued MAGI Medi-Cal eligibility while individuals listed below are considered for Consumer Protection Programs.

**Soft Paused Due To** displays one of the following values:

- Child (the member is a child)
- Parent (the member is a parent)
- Aged/Blind/Disabled (the member attests to being 65 or older, blind, or disabled)
- Not Applicable (Soft Pause is not applied to this member)

If Soft Pause is applied a reason is listed. If Soft Pause is not applied, then the value displays as **Not Applicable**.

### MAGI Medi-Cal Monthly Income Budget

The **MAGI Medi-Cal Monthly Income Budget** includes specific individual household Income as reported.

**a. Employment Income** - countable monthly earned income

**b. Self-Employment Income** – countable monthly self-employment income

**c. Other Income** – countable monthly other income, such as unemployment benefits, Social Security (SS), retirement or pension income, rents or royalties, alimony received, investments, capital gains, farming or fishing income, canceled debts, court awards, jury duty pay, and other types of income

**d. Total Income (sum of a, b, and c)** of household individuals

**e. Allowable Deductions** – certain expenses that can be deducted on an income tax return, such as alimony paid, student loan interest, tuition and fees, educator expenses, IRA contributions, moving expenses, penalties on early withdrawal of savings, and health savings account deductions

**f. Total Income after Deductions (Subtract e from d)** – countable monthly income

**g. Projected Monthly Income** – income that was updated and indicated as expected yearly income is divided by 12 to get the monthly projected income. **Note:** if income is displayed here, income and deductions entered on the *Income Details* page will not be displayed (lines a-f).

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**h. Countable Income (Sum of f and g)** – total of monthly countable income and the projected monthly income

**i. Number of household members + Number of expected babies** – Household size for member's individual MAGI Medi-Cal budget, displays the names in the household and if there are any pregnant members and their number of expected babies

- **show more** – click the link to expand and display the list of household members, and the number of expected babies if applicable.
- **show less** – click the link to collapse the list.

| MAGI Medi-Cal Monthly Income Budget   |           |
|---|-----------|
| <b>MAGI Medi-Cal Individual Household Income Budget</b>   |           |
| a. Employment Income (Monthly)  | \$1800.00 |
| b. Self-Employment Income (Monthly)   | \$200.00  |
| c. Other Income (Monthly)   | \$0.00    |
| d. Total Income (Sum of a, b, c)  | \$2000.00 |
| e. Allowable deductions (Monthly)   | \$0.00    |
| f. Total Income after Deductions (Subtract e from d)  | \$2000.00 |
| g. Projected Monthly Income   | N/A       |
| h. Countable Income (Sum of f and g)  | \$2000.00 |
| i. Number of household members + Number of expected babies  | 4         |
| <a href="#">show more</a>   |           |
| j. Federal Poverty Level for (h) (Monthly)  | \$99.00   |
| k. FPL % for individual (Divide (h) by (j) and round)   | 2021%     |
| <b>MAGI Medi-Cal Eligible?</b>  |           |
| Meets 435.603(f)(2)(i-iii) exception to use a non tax filer household composition for MAGI Medi-Cal                               | No        |
| Meets 435.603(i) exception to use APTC income/deduction calculations for MAGI Medi-Cal determination                              | No        |
| Meets 435.119(c): Adults ineligible to the New Adult Group due to dependent child under age 19 without Minimum Essential Coverage | No        |

**j. Federal Poverty Level for (h) (Monthly)** – the monthly 100% FPL displays for the household size from line (i)

**k. FPL % (Divide (h) by (j) and round)** – the individual's countable income divided by the 100% FPL results in the individual's FPL% to determine if within the MAGI Medi-Cal FPLs

- **MAGI Medi-Cal Eligibility** – is indicated with a **Yes** when MAGI Medi-Cal criteria is met or **No** when the individual does not meet the criteria for MAGI Medi-Cal determination
- **Medi-Cal exceptions:**
  - 435.603(f)(2)(i-iii) exception to use a non-tax filer household composition for MAGI Medi-Cal

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- 435.603(i) exception to use APTC income/deduction calculations for MAGI Medi-Cal determination
- 435.119(c) Adults ineligible to the New Adult Group due to dependent child under age 19 without Minimum Essential Coverage

### **Tax Credit & Cost Sharing Reductions Income Budget**

The **Tax Credit & Cost Sharing Reductions Income Budget** displays the yearly household income and allowable deductions to calculate the following:

- a. Employment Income** – The countable yearly earned income
- b. Self-Employment Income** – The countable yearly self-employment income
- c. Other Income** – The countable yearly other income such as unemployment benefits, Social Security, retirement or pension income, rents or royalties, alimony received, investments, capital gains, farming or fishing income, canceled debts, court awards, jury duty pay, and other types of income
- d. Total Yearly Household Income (sum of a, b, and c)** – All countable yearly income
- e. Allowable Deductions** – All allowable yearly deductions, such as alimony paid, student loan interest, tuition and fees, educator expenses, IRA contributions, moving expenses, penalties on early withdrawal of savings, and health savings account deductions
- f. Total Income after Deductions (subtract e from d)** – The countable yearly income
- g. Projected Annual Income** – The income that was updated and indicated as *Expected Yearly Income*. **Note:** if income is displayed here, income and deductions entered on the *Income Details* page will not be displayed (lines a-f).
- h. Countable Income (sum of f and g)** – The total of the yearly countable income and the projected yearly income
- i. Number of household members** – The number of members in the APTC tax filing household
- j. Federal Poverty Level for (h)** – The yearly 100% FPL for the household size from line (i).  
**Note:** If \$0 is displayed, then it may be that there is no tax filer in the case therefore resulting in \$0 FPL

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**k. FPL% for individual** (divide (h) by (j) and round) – The FPL % for the family for the Tax Credit/Cost Sharing Reduction budget

| Tax Credit & Cost Sharing Reductions Income Budget    |                       |
|---|-----------------------|
| a. Employment Income (Yearly)                         | \$21000.00            |
| b. Self-Employment Income (Yearly)                    | \$2400.00             |
| c. Other Income (Yearly)                              | \$0.00                |
| d. Total Household Income (sum of a,b, & c)           | \$24000.00            |
| e. Allowable deductions (Yearly)                      | \$0.00                |
| f. Total Income after Deduction (Subtract e from d)   | \$24000.00            |
| g. Projected Annual Income                            | N/A                   |
| h. Countable Income (Sum of f and g)                  | \$24000.00            |
| i. Number of household members                        | 3                     |
| <a href="#">show more</a>                             |                       |
| j. Federal Poverty Level for (h) (Yearly)             | \$121.27              |
| k. FPL % for individual (Divide (h) by (j) and round) | 19790%                |
| Eligible for:   |                       |
| Not Lawfully Present Multiplier                       | Unsubsidized CCP<br>1 |
| Benchmark plan monthly premium:                       |                       |
| Maximum Annual Premium Amount:                        | \$0.00                |
| Maximum Monthly Premium Amount:                       | \$0.00                |

Back Continue

The section highlighted above in red displays the following eligibility determinations under the heading **Eligible for**:


- **APTC and CSR with Alaskan Native/American Indian (AI/AN)**
- **APTC and CSR without AI/AN**
- **APTC only**
- **AI/AN CSR only**
- **Unsubsidized Covered California Plan (CCP)** – Insurance Affordability Program application over 400%
- **None** – Not eligible to APTC, CSR, or unsubsidized
- **Not Lawfully Present Multiplier** – If a number less than 1 displays, this indicates there are individuals in the tax filing household that are not lawfully present.
  - The number is calculated by including only the lawfully present household members in the household size. For example: A husband and wife claim two (2) children as tax dependents, one (1) child is not lawfully present (No citizenship or valid immigration status); therefore, the not lawfully present multiplier would be calculated as follows: \$19,790 (100% FPL for subsidy household for three (3) for benefit year 2015) and divide that by \$23,850 (100% FPL for subsidy household for four (4) for benefit year 2015) which equals .08297 and <1
- **A Benchmark Plan Monthly Premium** - The second lowest cost Silver Plan, for this Individual, displays.

- **Maximum Annual Premium Amount** – The projected maximum annual premium paid displays
- **Maximum Monthly Premium Amount** – The projected maximum monthly premium paid displays

The **Back** and **Continue** buttons are available at the bottom of the *Budget Worksheet* page. The **Continue** and **Back** button navigate to the corresponding *Eligibility Results Page* associated with this Budget Worksheet.



**Budget Worksheet Page Information**

Clicking the **Information** icon (  ) displays a popup with information that defines the elements on the *Budget Worksheet* page.


**Budget Worksheet** ✕

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**Q: What is this page for?**

A: This page will show you the budget worksheet associated with a specific eligibility results.

**Questions and Answers**

**Q: What does the  button do?**

A: Clicking the button takes you to the previous page.

**Q: What does the  button do?**

A: Clicking the button takes you to the corresponding Eligibility Results page.

**Elements of the *Budget Worksheet* page**

| Label                                      | Element Type | Description  | Validation |
|--|--------------|--|------------|
| Soft Paused Due To:                        | Text         | Displays soft paused reason if eligible to soft pause.                             | N/A        |
| Person Primary Tax Filer                   | Text         | Indicates whether individual is primary tax filer.                                 | N/A        |
| Person Included in Primary Tax Filer's Tax | Text         | Indicates whether individual is included in the primary tax filer's tax household. | N/A        |



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| Budget Worksheet                             |      |   |     |
|--|------|---|-----|
| Person Plans to File Taxes                   | Text | Indicates whether individual plans to file taxes.   | N/A |
| Person Expected to be Required to File Taxes | Text | Indicates whether individual expects to be required to file taxes.                              | N/A |
| Person Tax Filing Status                     | Text | Display individual's tax filing status if the individual attest to filing taxes.                | N/A |
| Person Tax Dependent Status                  | Text | Indicates whether individual is a tax dependent.  | N/A |
| Who claims this person as a tax dependent?   | Text | If available, display the full name of the person who claims the individual as a tax dependent. | N/A |
| Employment Income                            | Text | Displays total employment income used in the budget.  | N/A |
| Self-Employment Income                       | Text | Displays total self-employment income used in the budget.                                       | N/A |
| Other Income                                 | Text | Displays total other income used in the budget.   | N/A |
| Total Income                                 | Text | Displays the sum of employment income, self-employment income, other income.                    | N/A |
| Allowable deductions                         | Text | Displays total allowable deductions used in the budget.   | N/A |

|  |      |   |     |
|--|------|---|-----|
| Total Income after Deduction                           | Text | Displays total income minus allowable deductions.   | N/A |
| Projected Monthly Income                               | Text | Displays total projected monthly income used in the budget.   | N/A |
| Projected Annual Income                                | Text | Displays total projected annual income used in the budget.  | N/A |
| Countable Income                                       | Text | <p>If the budget is MAGI Medi-Cal monthly budget, display Total Income after Allowable deductions + Project Monthly Income.</p> <p>If the budget is Tax Credit &amp; Cost Sharing Reductions Income Budget, display Total Income after Allowable deductions + Project Monthly Income.</p> | N/A |
| Number of household member                             | Text | Displays the total number of household member used in the budget.   | N/A |
| Number of household member + Number of expected babies | Text | Displays the total number of household member and expected babies (if applicable) used in the budget.   | N/A |
| show more  | Text | On click of link, expands and displays list of household members and number of expected babies (if applicable).   | N/A |
| show less  | Text | On click of link, collapses and hides list of household members and number of expected babies (if applicable).  | N/A |

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|                                       |      |   |     |
|---------------------------------------|------|---|-----|
| Federal Poverty Level                 | Text | Displays federal poverty level in monthly or annual amount.   | N/A |
| FPL % for individual household        | Text | Displays FPL percentage   | N/A |
| MAGI Medi-Cal Eligible?               | Text | Indicates whether individual is eligible for MAGI Medi-Cal  | N/A |
| Meets 435.603(f)(2) (i-iii) exception | Text | Indicates whether individual meets 435.603 (f)(2)(i-iii) exception  | N/A |
| Meets 435.603(i) exception            | Text | Indicates whether individual meets 435.603 (i) exception  | N/A |
| Meets 435.119(c)                      | Text | Indicates whether individual meets 435.119 (c)  | N/A |
| Eligible for:                         | Text | Display the consumer's exchange programs eligibility.   | N/A |
| Not Lawfully Present Multiplier       | Text | If a number less than 1 is displayed, there are 'Not Lawfully Present' Individual(s) in the tax filing household. | N/A |
| Benchmark plan monthly premium        | Text | Displays benchmark plan monthly premium for the individual.   | N/A |
| Maximum Annual Premium Amount         | Text | Displays maximum annual premium amount for the individual.  | N/A |
| Maximum Monthly Premium Amount        | Text | Displays maximum monthly premium amount for the individual.   | N/A |

**Close**

Use the **Close** button at the bottom of the pop-up to close and return to the *Budget Worksheet* page.