

Department of Social Services, Division of Behavioral Health
Financial Eligibility

Frequently Asked Questions

Question: Do individuals have to apply for Medicaid and SSI to be eligible for services?

The Division of Behavioral Health is the payer of last resort. It is the expectation that if individuals qualify through other financial assistance programs such as Medicaid, that these programs are pursued and billed first. While applying for Medicaid or SSI and the determination is being made, the Division will reimburse for services. However, if individuals refuse to apply, they would not be eligible. For more information, please reference Contract Attachment B, Financial Eligibility.

Question: Who is considered part of the household?

Household composition involves any person receiving services who depends financially on the income of the other household members in order to reside at that residence and to maintain their daily living needs.

Question: How is the household determined if an adult is living with others?

If an individual (over the age of 18) is living with others (relatives or non-relatives) and the individual has earned income or receives a taxable income other than earned income and sufficiently shares the responsibility of paying for their portion of all household expenses in order to reside at that residence and to maintain their daily living needs, the household size would be one.

If the individual is married and/or has children residing with them along with others, the spouse and children must be included in the household composition.

Question: How is the household determined if an individual is part of a communal living arrangement?

If an individual is part of a communal living arrangement (i.e. Hutterite Colony), the household composition would consist of who is residing with the individual in their housing unit or apartment. If religious practices do not permit a wage or salary for work performed within the communal living arrangement, the total colony's income should not be included on the means testing 101 form. However, if personal spending money is earned outside of the colony by the individual or any identified household member, that money must be included as earned income. Do not include earned income from a child under the age of 18 or any dependent attending school.

Question: What is considered Earned Income?

Earned income includes all amounts received as wages, tips, bonuses, other employee compensation and self-employment income, whether in the form of money, services or property.

Question: What if an individual owns their own business?

If an individual owns their own business, the net business profit (after operating expenses) is the individual's annual earned income. The individual will be able to provide this information from their most recent tax filing.

Question: What is considered Unearned Income?

Unearned income includes all taxable income other than earned income and may include investments of money or property, interest, dividends and royalties. It may include pensions, alimony, unemployment compensation, SSI/SSDI income and any other income that is not earned.

Question: What if individuals refuse to complete the financial eligibility process?

If an individual (over the age of 18) is refusing to complete the means testing 101 and/or 102b form due to mental illness, the provider may still submit the completed 102a form along with a brief narrative explaining in more detail the client's mental health status, refusal of signature and any known information pertaining the individual's financial situation. The Division will work with the provider to consider a hardship for the individual.

Question: How is annual earned income determined if the household's income fluctuates monthly?

If the individual has been employed for at least 6 months or more, take the average of those months and multiply that average by 12 to get an estimated yearly gross income.

If an individual just started employment, determine the annual gross income by calculating the individual's rate of pay by the minimum number of hours the employer stated the individual will be working each week.

Question: Should prescription medication costs and lab work be documented for the entire household?

Yes. Out of pocket prescription medication costs and lab work (within the last 12 months) as it relates to the expenses of the entire household.

Question: Should health insurance premiums be documented for the entire household?

Yes. Health insurance premiums are monthly fees paid to the insurance company or health provider to provide coverage as it pertains to the entire household within a 12-month period.

Question: What about adults still on their parent's health insurance plan?

If an adult child is not included in the household composition, but the household covers that adult child on the family's healthcare plan (until age 26), the costs associated may be included in the deduction.

Question: What are Assistive Devices?

Assistive devices purchased within the last 12 months for the entire household. This may include mobility aids such as walkers or wheelchairs; cognitive aids to help people with memory, attention or thinking skills; emotional support aids such as a legally registered therapy animal; or

any device that would help prevent further impairments or secondary health conditions. A description of the assistive device purchased must be included on the 101 form.