

# STATE OF ALASKA

FRANK H. MURKOWSKI, GOVERNOR

## DEPT. OF HEALTH AND SOCIAL SERVICES

### *DIVISION OF PUBLIC ASSISTANCE*

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## MEMORANDUM

**DATE:** August 2, 2004

**TO:** All Eligibility Staff

**FROM:** Mary Rogers  
Chief of Field Services

**SUBJECT:** EIS Procedure 2004-01 (Replaces EIS Procedure 1996-6)  
Coding Shelter Expenses for Temporary Assistance and Food Stamps

### INTRODUCTION

The Temporary Assistance and Food Stamp programs have specific policy on how shelter expenses affect eligibility and benefit amount. This procedure provides instructions on how to correctly code shelter expenses on the EIS DEMH (Dependent/Medical/Household Expenses) screen.

The two programs use shelter expenses differently in determining benefits. The Food Stamp Program allows a deduction from countable income if a household's shelter expenses are more than 50% of their net income. For the Temporary Assistance Program, a family will receive a lower benefit amount if shelter expenses are less than 30% of the need standard for their household size. Please refer to the Temporary Assistance and Food Stamp program policy manuals for specific policy regarding shelter expenses.

This procedure replaces EIS Procedure 1996-6. Please remove 1996-6 from your EIS Procedure Manual.

**I. HOUSEHOLD EXPENSE CODES**

Below is a list of household expense codes used on the DEMH screen to identify expenses a household may claim.

<u>CODE</u>	<u>Definition</u>	<u>Subtype?</u>	<u>Programs</u>
AC	Adult Care	Required	FS, TA, ME
CC	Child Care	Required	FS, TA, ME
CS	Child Support	N/A	FS, TA, ME
CW	Fuel - Coal/Wood	Required	FS, TA
EL	Electricity	Possible	FS, TA
FA	Full Allowance	N/A	TA – fair hearings
GB	Garbage/Trash Removal	Possible	FS, TA
GS	Natural or Propane Gas	Required	FS, TA
IN	Insurance	Possible	FS, TA
LO	Fishing/Farming Loss Amount	Required	FS
ME	Medical	Required	FS
MO	Mortgage	Possible	FS, TA
OE	Other Energy Expenses	Required	FS, TA
OL	Fuel – Oil	Required	FS, TA
OT	Other	Possible	FS, TA
RE	Rent	Possible	FS, TA
SD	Security Deposit	N/A	TA
SR	Space Rental	Possible	FS, TA
SW	Sewage Disposal	Possible	FS, TA
TL	Telephone	Possible	FS, TA
TX	Taxes or Assessments	Possible	FS, TA
WT	Water	Possible	FS, TA

These codes can be found on the Help Screen for the TY field on the DEMH screen. Access the Help Screen by placing your cursor under the TY column and pressing PF10.

**II. SUB-TYPE CODING EXAMPLES**

Below are screen displays illustrating the proper use of shelter expense sub-type codes.

**A. Shelter expense sub-type codes**

<u>SUB-TYPE</u>	<u>USE</u>	<u>PROGRAM</u>
<b>SU</b>	Used when the heating utility standard is applied. It can only be used with the following expense types: EL, GS, OL, CW, and OE. EIS will allow the regional heating utility standard based on the residence address on the ADDR screen.	<b>FS &amp; TA</b>

EIS DEMH											DEPENDENT / MEDICAL / HOUSEHOLD EXPENSES											062603 07:18							
											PROSPECTIVE																		
CASE NAME: NEEDHELP , KIRK											CASE NUMBER: 00000011											MONTH: 0103							
	NAME	REL		TY	SUB	AMOUNT	VR	PEND		TY	SUB	AMOUNT	VR	PEND															
01	KIRK	N	PI	GS	<b>SU</b>	100.00	HC																						
02	DARLA	N	OR																										
03	SARAH	N	CH																										
04	RACHE	N	CH																										
											MORE EXPENSES:											MORE CLIENTS:				NEXT-->			

<b>AT</b>	Used when an actual amount needs to be counted in the budget. Causes EIS to count the dollar amount in the <i>AMOUNT</i> field. Works with all utility expense types. This code will be rarely used.	<b>FS &amp; TA</b>
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EIS DEMH											DEPENDENT / MEDICAL / HOUSEHOLD EXPENSES											062603 09:15							
											PROSPECTIVE																		
CASE NAME: NEEDHELP , KIRK											CASE NUMBER: 00000011											MONTH: 0103							
	NAME	REL		TY	SUB	AMOUNT	VR	PEND		TY	SUB	AMOUNT	VR	PEND															
01	KIRK	N	PI	EL	<b>AT</b>	100.00	HC																						
02	DARLA	N	OR																										
03	SARAH	N	CH																										
04	RACHE	N	CH																										
											MORE EXPENSES:											MORE CLIENTS:				NEXT-->			

**SUB-TYPE**

**USE**

**PROGRAM**

**SH** Used when a TA family's actual utility expenses exceed the utility standards and actual expenses need to be allowed or when the amount allowed for TA is different than the amount used for FS. Causes EIS to count the dollar amount in the *AMOUNT* field for TA only. Works with all shelter/utility expense types. **TA only**

EIS DEMH	DEPENDENT / MEDICAL / HOUSEHOLD EXPENSES								062603	09:22		
PROSPECTIVE												
CASE NAME: NEEDHELP , KIRK						CASE NUMBER: 00000011 MONTH: 0103						
	NAME	REL	TY	SUB	AMOUNT	VR	PEND	TY	SUB	AMOUNT	VR	PEND
01	KIRK	N	PI	EL	SH	27.00	HC	EL		58.00	HC	
02	DARLA	N	OR									
03	SARAH	N	CH									
04	RACHE	N	CH									
MORE EXPENSES:    MORE CLIENTS:    NEXT-->												

**OT** Used when the amount allowed for FS is different than the amount used for TA. For example, when the household gets in-kind income for a portion of their rent, TA allows the full amount of rent and FS allows only the portion not covered by the in-kind income. Causes EIS to count the dollar amount in the *AMOUNT* field for FS only. Works with all shelter/utility expense types. **FS only**

EIS DEMH	DEPENDENT / MEDICAL / HOUSEHOLD EXPENSES								063003	13:36		
PROSPECTIVE												
CASE NAME: NEEDHELP , KIRK						CASE NUMBER: 00000011 MONTH: 0103						
	NAME	REL	TY	SUB	AMOUNT	VR	PEND	TY	SUB	AMOUNT	VR	PEND
01	KIRK	N	PI	RE	SH	300.00	HC	RE	OT	150.00	HC	
02	DARLA	N	OR									
03	SARAH	N	CH									
04	RACHE	N	CH									
MORE EXPENSES:    MORE CLIENTS:    NEXT-->												

Refer to Section IV, Examples in Case Processing, for examples on how these codes are used.

**B. Special Processing Notes:**

1. A sub-type entry (SU, AT, OT, or SH) **is required** for the heating utility standard codes GS, OL, CW, and OE. Failure to enter a sub-type will cause an edit and inability to authorize benefits. EXAMPLE: If a TA/Fs client heats with gas and is entitled to the heating utility standard, the DEMH is coded GS SU. **Note:** When EL is used as a heating utility code a sub-type SU, AT, OT, or SH is required.
2. If a family is eligible for the heating utility standard, no other utility codes should be entered. The additional entries of other utility expenses may cause a household to receive incorrect benefit amounts.
3. If no sub-type is used with the following utility expense codes: EL, WT, SW, and TL, EIS will allow the non-heating utility standard for that utility based on region no matter what figure is entered in the *AMOUNT* field.

**III. SHELTER FIELDS ON THE TAPD AND TABH**

**A. The Shelter Adjustment and Adjusted Need fields on the TAPD:**

EIS TAPD		TEMPORARY ASSISTANCE PAYMENT DETERMINATION		031303 09:10	
PAYMENT MONTH BASED ON: 0103		PROSPECTIVE			
CASE NAME: NEEDHELP , KIRK		CASE NUMBER: 00000011		MONTH: 0103	
UNIT TYPE: IC		UNIT SIZE: 04			
INCOME FROM EMPLOYMENT :	0.00	ATAP COUNTABLE INCOME :	0.00		
SELF EMPLOYMENT INCOME :	0.00	NEED STANDARD :	1335.00		
TOTAL EARNED :	0.00	PENALTY AMOUNT :	0.00		
INCOME FROM EDUCATION:	0.00	<b>SHELTER ADJUSTMENT :</b>	<b>80.00</b>		
OTHER UNEARNED INCOME:	0.00	<b>ADJUSTED NEED :</b>	<b>1255.00</b>		
TOTAL UNEARNED :	0.00	MONTHLY BENEFIT AMOUNT :	1255.00		
WORK EXPENSE DEDUCTION :	0.00	PRORATED BENEFIT AMOUNT:	1255.00		
EARNED INCOME DEDUCTION:	0.00	AFTER MAX PAY DEDUCTION:	967.60		
CHILD CARE DEDUCTION :	0.00	NEW BENEFIT AMOUNT :	967.00		
CHILD SUPPORT DEDUCTION:	0.00	AUTH OR PAID BENEFITS:	0.00		
NON-HH-MEMBR DEDUCTIONS:	0.00	SEASONAL ADJUSTMENT :	0.00		
TOTAL DEDUCTIONS :	0.00	BENEFIT AMT :	967.00		
		RECOUPMENTS (INFO) :	0.00		
AUTH PCN:	REVIEW DUE DATE:	GRANT AMOUNT (INFO) :	967.00		
DENIAL/CLOSURE REASON:		SEASONAL OVR:			
BENEFIT TYPE: I	BENEFIT ISSUANCE: I	REFUSE CASH?:			
PAYEE SETUP REQ: N	PFD IND:	MEDICAID - USE MIBW			
CT003-I IS ELIGIBLE - AUTHORIZATION REQUIRED			NEXT-->		

1. The *SHELTER ADJUSTMENT* field shows the difference between the household's maximum allowance and its total allowable shelter expenses.
2. The *ADJUSTED NEED* field shows the adjusted TA need amount after the *SHELTER ADJUSTMENT* is deducted from the need standard.

**B. The Shelter Allowance (SHELT ALLOW) Field**

The *SHELTER ALLOWANCE* field on the TABH shows the amount of the household's allowable expenses up to the Maximum Shelter Allowance:

```

SE002-I END OF DISPLAY REACHED
EIS TABH          TEMPORARY ASSISTANCE BENEFIT HISTORY          070103 10:53
                                                           GONZO!! F
CASE NAME: NEEDHELP , KIRK          CASE NUMBER: 00000011

          ALLOWABLE DEDUCTIONS
      HH  HH      SHELT  GROSS      INC WORK DEPCAR BEN          NET A I
      MNTH SZ TYPE  ALLOW  CTLINC PFD DED  EXP CH SUP TYPE AMOUNT RECOUP  BEN A I
0103 02 AI          170   1000      Y    0    0 INIT   269    0   269   I

                                          NEXT-->
    
```

1. EIS will automatically calculate the shelter allowance amount for TA using the shelter/utility type, sub-type, shelter codes, and amounts (if required) entered on the DEMH.
2. The amount calculated on the TAPD in the **SHELTER ADJUSTMENT** field plus the amount on the TABH in the **Shelter Allowance (SHELT ALLOW)** field equals the **Maximum Shelter Allowance** for the household size.

**IV: EXAMPLES IN CASE PROCESSING**

**Scenario A: TA Household, no expenses**

TA household of two, with no other income, living in the home of another person. The TA household is not responsible for paying any rent or utility expenses; therefore, no expenses are incurred. The benefit calculation for this household would be as follows:

No entry required on the DEMH.

```

EIS DEMH          DEPENDENT / MEDICAL / HOUSEHOLD EXPENSES    031303 10:36
                                                           PROSPECTIVE
CASE NAME: NEEDHELP , KIRK          CASE NUMBER: 00000011 MONTH: 0103

      NAME  REL      TY SUB  AMOUNT  VR  PEND      TY SUB  AMOUNT  VR  PEND
01 KIRK  N    PI
02 DARLA N    CH

          MORE EXPENSES:  MORE CLIENTS:          NEXT-->
    
```

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The TAPD will display the following:

EIS TAPD		TEMPORARY ASSISTANCE PAYMENT DETERMINATION		031303 10:39	
PAYMENT MONTH BASED ON: 0103		PROSPECTIVE			
CASE NAME: NEEDHELP , KIRK		CASE NUMBER: 00000011		MONTH: 0103	
UNIT TYPE: AI		UNIT SIZE: 02			
INCOME FROM EMPLOYMENT :	0.00	ATAP COUNTABLE INCOME :	0.00		
SELF EMPLOYMENT INCOME :	0.00	NEED STANDARD :	1069.00		
TOTAL EARNED :	0.00	PENALTY AMOUNT :	0.00		
INCOME FROM EDUCATION:	0.00	<b>SHELTER ADJUSTMENT :</b>	<b>320.00</b>		
OTHER UNEARNED INCOME:	0.00	ADJUSTED NEED :	749.00		
TOTAL UNEARNED :	0.00	MONTHLY BENEFIT AMOUNT :	749.00		
WORK EXPENSE DEDUCTION :	0.00	PRORATED BENEFIT AMOUNT:	749.00		
EARNED INCOME DEDUCTION:	0.00	AFTER MAX PAY DEDUCTION:	577.48		
CHILD CARE DEDUCTION :	0.00	NEW BENEFIT AMOUNT :	577.00		
CHILD SUPPORT DEDUCTION:	0.00	AUTH OR PAID BENEFITS:	0.00		
NON-HH-MEMBR DEDUCTIONS:	0.00	SEASONAL ADJUSTMENT :	0.00		
TOTAL DEDUCTIONS :	0.00	BENEFIT AMT :	577.00		
		RECOUPMENTS (INFO) :	0.00		
AUTH PCN:	REVIEW DUE DATE: 0603	GRANT AMOUNT (INFO) :	577.00		
DENIAL/CLOSURE REASON:		SEASONAL OVR:			
BENEFIT TYPE: I	BENEFIT ISSUANCE: I	REFUSE CASH?:			
PAYEE SETUP REQ: N	PFD IND:	MEDICAID - USE MIBW			
CT003-I IS ELIGIBLE - AUTHORIZATION REQUIRED		NEXT-->			

Since the client has no allowable expenses, a shelter adjustment of \$320 is subtracted from the need standard, resulting in an adjusted need of \$749.

The TABH will display the following:

SE002-I END OF DISPLAY REACHED													
EIS TABH		TEMPORARY ASSISTANCE BENEFIT HISTORY						031303 10:45					
CASE NAME: NEEDHELP , KIRK						CASE NUMBER: 00000011							
ALLOWABLE DEDUCTIONS													
HH	HH	<b>SHELT</b>	GROSS	INC	WORK	DEPCAR	BEN			NET A	I		
MNTH	SZ	<b>ALLOW</b>	CTLINC	PFD	DED	EXP	CH	SUP	TYPE	AMOUNT	RECOUP	BEN A	I
0103	02	AI	0	0	N	0	0	INIT		577	0	577	I
NEXT-->													

A zero amount will display in the *SHELT ALLOW* field, as the household does not pay any shelter expenses. After the ratable reduction, the client will receive a reduced grant of \$577.

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**Scenario B: TA Household, incurs expenses**

TA household of two, with no income, living in their own apartment. Rent is \$800 per month and heating costs are included in the rental payment. Household is responsible for phone costs of \$15 per month. The coding for the telephone is TL (no subtype) – because the family’s shelter costs exceed the maximum shelter allowance, the telephone utility standard is used.

Correct entry on the DEMH:

EIS DEMH	DEPENDENT / MEDICAL / HOUSEHOLD EXPENSES								031303	11:04	
PROSPECTIVE											
CASE NAME: NEEDHELP , KIRK						CASE NUMBER: 00000011 MONTH: 0103					
NAME	REL	TY	SUB	AMOUNT	VR	PEND	TY	SUB	AMOUNT	VR	PEND
01 KIRK	N	PI	RE	800.00	HC		TL		15.00	VV	
02 DARLA	N	SP									
03 SARAH	N	CH									
04 RACHE	N	CH									
				MORE EXPENSES:	MORE CLIENTS:				NEXT-->		

The TAPD will display the following:

EIS TAPD	TEMPORARY ASSISTANCE PAYMENT DETERMINATION								031303	11:03	
PAYMENT MONTH BASED ON: 0103 PROSPECTIVE											
CASE NAME: NEEDHELP , KIRK						CASE NUMBER: 00000011 MONTH: 0103					
UNIT TYPE: AI UNIT SIZE: 02											
INCOME FROM EMPLOYMENT :				0.00	ATAP COUNTABLE INCOME :				0.00		
SELF EMPLOYMENT INCOME :				0.00	NEED STANDARD :				1069.00		
TOTAL EARNED :				0.00	PENALTY AMOUNT :				0.00		
INCOME FROM EDUCATION:				0.00	<b>SHELTER ADJUSTMENT</b> :				<b>0.00</b>		
OTHER UNEARNED INCOME:				0.00	<b>ADJUSTED NEED</b> :				<b>1069.00</b>		
TOTAL UNEARNED :				0.00	MONTHLY BENEFIT AMOUNT :				1069.00		
WORK EXPENSE DEDUCTION :				0.00	PRORATED BENEFIT AMOUNT:				1069.00		
EARNED INCOME DEDUCTION:				0.00	AFTER MAX PAY DEDUCTION:				821.00		
CHILD CARE DEDUCTION :				0.00	NEW BENEFIT AMOUNT :				821.00		
CHILD SUPPORT DEDUCTION:				0.00	AUTH OR PAID BENEFITS:				0.00		
NON-HH-MEMBR DEDUCTIONS:				0.00	SEASONAL ADJUSTMENT :				0.00		
TOTAL DEDUCTIONS :				0.00	BENEFIT AMT :				821.00		
					RECOUPMENTS (INFO) :				0.00		
AUTH PCN:				REVIEW DUE DATE: 0603	GRANT AMOUNT (INFO) :				821.00		
DENIAL/CLOSURE REASON:					SEASONAL OVR:						
BENEFIT TYPE: I				BENEFIT ISSUANCE: I	REFUSE CASH?:						
PAYEE SETUP REQ: N				PFD IND:	MEDICAID - USE MIBW						
CT003-I IS ELIGIBLE - AUTHORIZATION REQUIRED					NEXT-->						

The *SHELTER ADJUSTMENT* for this case is \$0 because the \$800 rental payment plus the \$22 phone standard exceed the maximum shelter allowance of \$320 for a household of two. Since the *SHELTER ADJUSTMENT* is zero the *ADJUSTED NEED* remains \$1069. After the ratable reduction the family is eligible for a payment of \$821.



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The TABH will display as follows:

```

SE002-I END OF DISPLAY REACHED
EIS TABH          TEMPORARY ASSISTANCE BENEFIT HISTORY          031303 11:13

CASE NAME: NEEDHELP , KIRK          CASE NUMBER: 00000011

                ALLOWABLE DEDUCTIONS
      HH  HH      SHEL  GROSS      INC WORK DEPCAR BEN          NET A I
MNTN  SZ  TYPE  ALLOW  CTIN  LINC PFD  DED  EXP  CH  SUP  TYPE  AMOUNT  RECOUP  BEN  A  I
0103  02  AI           320      0      N      0      0  INIT   821      0      821  I

                                          NEXT-->
  
```

The *SHELTER ALLOWANCE* field will display the amount of \$320, the maximum shelter allowance for a household of two.

**Scenario C: TA/FS Household, all members receive FS and TA**

Combo TA/FS case, Kirk Needhelp and his two children. His rent is \$150 and his monthly electricity expenses are \$85. DEMH coding and the TAPD screens below:

```

EIS DEMH          DEPENDENT / MEDICAL / HOUSEHOLD EXPENSES    060104 11:23
                                PROSPECTIVE
                                GONZO!! F
CASE NAME: NEEDHELP , KIRK          CASE NUMBER: 00000011  MONTH: 0504

      NAME  REL      TY SUB  AMOUNT  VR  PEND      TY SUB  AMOUNT  VR  PEND
01 Kirk  N   PI      RE      150.00  HC      EL      85.00  HC
02 KID  O   N      CH
03 KID  T   N      CH

                                MORE EXPENSES:  MORE CLIENTS:  NEXT-->
  
```

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```

EIS TAPD          TEMPORARY ASSISTANCE PAYMENT DETERMINATION          060104 11:35
PAYMENT MONTH BASED ON: 0504          PROSPECTIVE          GONZO!! F
CASE NAME: NEEDHELP , KIRK          CASE NUMBER: 00000011 MONTH: 0504
UNIT TYPE: AI          UNIT SIZE: 03

INCOME FROM EMPLOYMENT :          500.00  ATAP COUNTABLE INCOME :          234.50
SELF EMPLOYMENT INCOME :          0.00   NEED STANDARD          :          1227.00
TOTAL EARNED          :          500.00  PENALTY AMOUNT          :          0.00
INCOME FROM EDUCATION:          0.00   SHELTER ADJUSTMENT :          160.00
OTHER UNEARNED INCOME:          0.00   ADJUSTED NEED          :          1067.00
TOTAL UNEARNED          :          0.00  MONTHLY BENEFIT AMOUNT:          832.50
WORK EXPENSE DEDUCTION :          0.00  PRORATED BENEFIT AMOUNT:          832.50
EARNED INCOME DEDUCTION:          265.50 AFTER MAX PAY DEDUCTION:          628.20
CHILD CARE DEDUCTION  :          0.00   NEW BENEFIT AMOUNT   :          628.00
CHILD SUPPORT DEDUCTION:          0.00   AUTH OR PAID BENEFITS:          0.00
NON-HH-MEMBR DEDUCTIONS:          0.00   SEASONAL ADJUSTMENT  :          0.00
TOTAL DEDUCTIONS      :          265.50  BENEFIT AMT          :          628.00
                                           RECOUPMENTS (INFO)   :          0.00
AUTH PCN: 9999          REVIEW DUE DATE: 0904  GRANT AMOUNT (INFO)  :          628.00
DENIAL/CLOSURE REASON:
BENEFIT TYPE: I          BENEFIT ISSUANCE: I          SEASONAL OVR:
PAYEE SETUP REQ: N          PFD IND:          MEDICAID - USE MIBW  REFUSE CASH?:
CT003-I IS ELIGIBLE - AUTHORIZATION REQUIRED          NEXT-->
  
```

Notice that his TA grant is reduced by \$160 because his expenses do not meet the 30% shelter allowance of \$368.10 for a household of three. The DEMH was coded for him to only receive the \$150 rent and the \$58 regional non-heating electricity standard for his area (Anchorage).

Giving him the actual \$85 electricity cost will increase his TA benefit. Code the DEMH like this:

```

EIS DEMH          DEPENDENT / MEDICAL / HOUSEHOLD EXPENSES          060104 11:41
PROSPECTIVE          GONZO!! F
CASE NAME: NEEDHELP , KIRK          CASE NUMBER: 00000011 MONTH: 0504

NAME  REL      TY SUB  AMOUNT  VR  PEND      TY SUB  AMOUNT  VR  PEND
01 Kirk N    PI      RE      150.00 HC
      EL SH      27.00 HC
02 KID O N    CH
03 KID T N    CH

MORE EXPENSES:          MORE CLIENTS:          NEXT-->
  
```

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```

EIS TAPD          TEMPORARY ASSISTANCE PAYMENT DETERMINATION          060104 11:42
PAYMENT MONTH BASED ON: 0504          PROSPECTIVE          GONZO!! F
CASE NAME: NEEDHELP , KIRK          CASE NUMBER: 00000011  MONTH: 0504
UNIT TYPE: AI  UNIT SIZE: 03

INCOME FROM EMPLOYMENT : 500.00  ATAP COUNTABLE INCOME : 234.50
SELF EMPLOYMENT INCOME : 0.00  NEED STANDARD : 1227.00
TOTAL EARNED : 500.00  PENALTY AMOUNT : 0.00
INCOME FROM EDUCATION: 0.00  SHELTER ADJUSTMENT : 133.00
OTHER UNEARNED INCOME: 0.00  ADJUSTED NEED : 1094.00
TOTAL UNEARNED : 0.00  MONTHLY BENEFIT AMOUNT : 859.50
WORK EXPENSE DEDUCTION : 0.00  PRORATED BENEFIT AMOUNT: 859.50
EARNED INCOME DEDUCTION: 265.50  AFTER MAX PAY DEDUCTION: 648.58
CHILD CARE DEDUCTION : 0.00  NEW BENEFIT AMOUNT : 648.00
CHILD SUPPORT DEDUCTION: 0.00  AUTH OR PAID BENEFITS: 0.00
NON-HH-MEMBR DEDUCTIONS: 0.00  SEASONAL ADJUSTMENT : 0.00
TOTAL DEDUCTIONS : 265.50  BENEFIT AMT : 648.00
RECOUPMENTS (INFO) : 0.00
AUTH PCN:          REVIEW DUE DATE:          GRANT AMOUNT (INFO) : 648.00
DENIAL/CLOSURE REASON:          SEASONAL OVR:
BENEFIT TYPE: I  BENEFIT ISSUANCE: I          REFUSE CASH?:
PAYEE SETUP REQ: N  PFD IND:          MEDICAID - USE MIBW
CT003-I IS ELIGIBLE - AUTHORIZATION REQUIRED          NEXT-->

```

This coding reduced the shelter adjustment dollar for dollar and increased his TA benefit by the \$27 that was coded EL SH 27.00 on the DEMH; but did not change the FS benefit. When entering shelter/utility expenses on the DEMH screen the regional non-heating utility standard must be known for the area so the correct coding is used and the correct expense is counted. Example: PI lives in Anchorage, the utility standard is \$58, so the addition of the EL SH 27.00 is needed to allow the full \$85 actual amount the client is obligated to pay.

Changing the scenario a bit – same household situation but Kirk’s rent is now \$450. Because the rent amount allows him to meet the 30% shelter allowance, only the non-heating electricity standard (\$58 – EL, no sub-type) is needed for both TA and FS.

```

EIS DEMH          DEPENDENT / MEDICAL / HOUSEHOLD EXPENSES          060104 12:00
PROSPECTIVE          GONZO!! F
CASE NAME: NEEDHELP , KIRK          CASE NUMBER: 00000011  MONTH: 0504

NAME  REL      TY SUB  AMOUNT  VR  PEND      TY SUB  AMOUNT  VR  PEND
01 Kirk N  PI      RE      450.00 HC      EL      85.00 HC

02 KID O N  CH
03 KID T N  CH

MORE EXPENSES:  MORE CLIENTS:          NEXT-->

```

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```

EIS TAPD          TEMPORARY ASSISTANCE PAYMENT DETERMINATION          060104 12:00
PAYMENT MONTH BASED ON: 0504          PROSPECTIVE          GONZO!! F
CASE NAME: NEEDHELP , KIRK          CASE NUMBER: 00000011 MONTH: 0504
UNIT TYPE: AI    UNIT SIZE: 03

INCOME FROM EMPLOYMENT :    500.00  ATAP COUNTABLE INCOME :    234.50
SELF EMPLOYMENT INCOME :    0.00    NEED STANDARD :    1227.00
TOTAL EARNED :    500.00  PENALTY AMOUNT :    0.00
INCOME FROM EDUCATION:    0.00    SHELTER ADJUSTMENT :    0.00
OTHER UNEARNED INCOME:    0.00    ADJUSTED NEED :    1227.00
TOTAL UNEARNED :    0.00    MONTHLY BENEFIT AMOUNT :    992.50
WORK EXPENSE DEDUCTION :    0.00    PRORATED BENEFIT AMOUNT:    992.50
EARNED INCOME DEDUCTION:    265.50  AFTER MAX PAY DEDUCTION:    748.94
CHILD CARE DEDUCTION :    0.00    NEW BENEFIT AMOUNT :    748.00
CHILD SUPPORT DEDUCTION:    0.00    AUTH OR PAID BENEFITS:    0.00
NON-HH-MEMBR DEDUCTIONS:    0.00    SEASONAL ADJUSTMENT :    0.00
TOTAL DEDUCTIONS :    265.50    BENEFIT AMT :    748.00
                                RECOUPMENTS (INFO) :    0.00
AUTH PCN:          REVIEW DUE DATE:          GRANT AMOUNT (INFO) :    748.00
DENIAL/CLOSURE REASON:          SEASONAL OVR:
BENEFIT TYPE: I    BENEFIT ISSUANCE: I          REFUSE CASH?:
PAYEE SETUP REQ: N    PFD IND:          MEDICAID - USE MIBW
CT003-I IS ELIGIBLE - AUTHORIZATION REQUIRED          NEXT-->
  
```

There is no reduction in the TA benefit because the household meets the 30% shelter allowance.

**Scenario D: FS Household, incurs expenses**

A FS household of three lives in Bethel. The household's only income is \$800 per month unemployment benefits. The household incurs the following expenses: \$500 rent, \$30 electricity (lights only), and \$12 phone. The non-heating utility standards for the region are \$110 for electricity and \$24 for phone.

The DEMH is coded with RE \$500, EL \$30, and TL \$12

```

EIS DEMH          DEPENDENT / MEDICAL / HOUSEHOLD EXPENSES          052703 13:44
                                PROSPECTIVE
CASE NAME: NEEDHELP , KIRK          CASE NUMBER: 00000011 MONTH: 0103

NAME  REL      TY SUB  AMOUNT  VR  PEND      TY SUB  AMOUNT  VR  PEND
01 KIRK N    PI      RE    500.00  HC          EL      30.00  HC
      TL    12.00   HC
02 DARLA N    OR
03 SARAH N    CH
04 RACHE N    CH

                                MORE EXPENSES:    MORE CLIENTS:          NEXT-->
  
```

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EIS calculates the total shelter costs using \$500 rent, \$110 electricity, and \$24 phone. Since no subtypes are entered for the expense codes EL and TL, EIS uses the non-heating utility standards in the budget.

The Food Stamp Allotment Determination (FSAD) screen will display the following:

EIS FSAD	FS ALLOTMENT DETERMINATION	052903 07:08
PAYMENT MONTH BASED ON: 0103	PROSPECTIVE	
CASE NAME: NEEDHELP , KIRK	CASE NUMBER: 00000011	MONTH: 0103
HH TYPE : REG HH SIZE: 03	COUNTABLE: 222.50	LIMIT: 1565.00
INCOME FROM EMPLOYMENT :	0.00	INCOME FROM EDUCATION: 0.00
SELF EMPLOYMENT INCOME :	0.00	OTHER UNEARNED INCOME: 800.00
TOTAL EARNED :	0.00	TOTAL UNEARNED : 800.00
FISHING/FARMING OFFSET :	0.00	
EARNED INCOME DEDUCTION:	0.00	NET INCOME AMOUNT : 222.50
STANDARD DEDUCTION :	229.00	ALLOTMENT INCOME : 66.75
MEDICAL EXPENSES :	0.00	MONTHLY ALLOTMENT : 621.00
DEPENDENT CARE EXPENSES:	0.00	PRORATED ALLOTMENT : 621.00
CHILD SUPPORT EXPENSES :	0.00	AFTER MAX PAY DEDUCTION: 621.00
<b>SHELTER COST DEDUCTION :</b>	<b>348.50</b>	PENALTY REDUCTION AMT : 0.00
TOTAL DEDUCTIONS:	577.50	NEW ALLOTMENT AMOUNT : 621.00
AUTH PCN:		AUTH/PAID ALLOTMENTS : 0.00
DENIAL/CLOSURE REASON :		ALLOTMENT AMOUNT : 621.00
BENEFIT TYPE: I BENEFIT ISSUANCE : I		RECOUPMENTS (INFO) : 0.00
CERTIFICATION THROUGH:		FINAL ALLOT (INFO) : 621.00
	REASON CODE:	
ID CARD REQ : N	SUBSIST HUNT/FISH: N	CAT. ELIG(Y)?:
CT040-E IS ELIGIBLE - AUTHORIZATION AND REASON CODE REQ'D		AUTH REP REQ: N
		NEXT-->

### Scenario E: TA/FS Household receives In-Kind Income

TA/FS household lives in Anchorage. Both the FS and TA household consists of PI and two children. PI assists the landlord in managing the apartment complex he lives in. PI receives \$150.00 per month in-kind income that, is applied toward his monthly rent of \$300.00.

To determine the correct Food Stamp allotment the DEMH screen must be coded RE OT \$150.00, the obligated rent amount less any in-kind income earned. In-kind income is exempt for food stamps.

To determine the correct TA allotment both the EAIN and DEMH must be coded. EIS will count the amount of in-kind income coded on the EAIN screen as well as the full amount of obligated rent entered on the DEMH screen. Example: PI's rent is \$300.00 per month. He earns \$150.00 in-kind income. Code the EAIN screen with IK \$150.00 and the DEMH screen with RE SH \$300.00.

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EIS EAIN	EARNED INCOME						070604 10:49	
	PROSPECTIVE						TERRITRAIN G	
CASE NAME: NEEDHELP , KIRK			CASE NUMBER: 00000011			MONTH: 0504		
		DENIAL			----MONTHLY----			
NAME	REL	CODE	TYPE	SUB	AMOUNT	HOURS	VR	PEND
01 Kirk	N	PI		IK	150.00	20	HC	
02 KID	O	N						
03 KID	T	N						
			MORE INCOME:	MORE CLIENTS:	NEXT-->			

EIS DEMH	DEPENDENT / MEDICAL / HOUSEHOLD EXPENSES						070604 10:50				
	PROSPECTIVE						TERRITRAIN G				
CASE NAME: NEEDHELP , KIRK			CASE NUMBER: 00000011			MONTH: 0504					
NAME	REL	TY	SUB	AMOUNT	VR	PEND	TY	SUB	AMOUNT	VR	PEND
01 Kirk	N	PI	RE SH	300.00	HC		<b>RE OT</b>		<b>150.00</b>	<b>HC</b>	
02 KID	O	N									
03 KID	T	N									
			MORE EXPENSES:	MORE CLIENTS:	NEXT-->						

**Scenario F: TA/FS Household, all members receive FS, some receive TA**

TA/FS household lives in Anchorage. The FS household consists of PI, his child, and his aunt; the PI and his child receive TA. The TA family has no other income. The aunt receives \$500 per month unemployment benefits. The aunt, who owns the home, has a mortgage payment of \$400 per month and pays for natural gas to heat the home. The PI pays half the utility costs along with \$30 to help with the mortgage payment.

Correct entry on the DEMH:

EIS DEMH	DEPENDENT / MEDICAL / HOUSEHOLD EXPENSES								031403	15:20		
PROSPECTIVE												
CASE NAME: NEEDHELP , KIRK						CASE NUMBER: 00000011 MONTH: 0103						
	NAME	REL	TY	SUB	AMOUNT	VR	PEND	TY	SUB	AMOUNT	VR	PEND
01	KIRK	N	PI	GS	SU	100.00	HC	RE		30.00	HC	
02	DARLA	N	OR	MO		370.00	HC					
03	SARAH	N	CH									
				MORE EXPENSES:				MORE CLIENTS:		NEXT-->		

Code the gas heating utility standard (GS SU) next to Kirk, since he is included in both the FS and TA cases. This will cause EIS to allow the full heating utility standard for both FS and TA. Code the \$30 Kirk contributes to the mortgage payment as RE (no sub-type) next to Kirk, and the remainder of the mortgage expense, \$370, next to Darla. This will cause EIS to allow \$30 toward the TA shelter allowance and the full \$400 mortgage expense toward the FS shelter deduction.