Mental Retardation Bulletin

Date of Issue: January 29, 1988
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Subject: Quarterly Liability Summaries

By: Deputy Secretary for Mental Retardation

By: Deputy Secretary for Mental Health

Scope:

County Mental Health/Mental Retardation Administrators

Purpose:

The purpose of this Bulletin is to notify County Mental Health and Mental Retardation Programs of new procedures for submitting summaries of adjustments and write-offs of liability.

Background:

55 Pa. Code Ch. 4305, titled "Liability for Community Mental Health and Mental Retardation Services", Section 4305.19, requires county administrators to submit summaries of adjustments and write-offs of liability to the Department of Public Welfare.

Regulation Interpretation:

55 Pa. Code Ch. 4305, titled "Liability for Community Mental Health and Mental Retardation Services", Section 4305.19 states:

The county administrator shall submit a summary of adjustments of liability and write-offs of liability to the Department on a quarterly basis. The summary shall be submitted on forms prescribed by the Department.

In accordance with Section 4305.19:

(a) Form MH/MR 877, titled "Liability Decision Summary Face Sheet" and Form MH/MR 883, titled "Summary of Write-Offs" shall be submitted by counties to the following addresses:

Comments and questions regarding this Bulletin should be directed to:

Regional Mental Retardation Program Managers
Regional Mental Health Community Program Managers
Office of Mental Health:

Office of Community Programs
Liability Write-Off Reports
Room 308, Health and Welfare Building
Harrisburg, Pennsylvania 17120

Office of Mental Retardation:

The following appropriate Regional Mental Retardation Program Manager:

Regional Mental Retardation Program Manager
Southeast Region
306 State Office Building
1400 Spring Garden Street
Philadelphia, Pennsylvania 19130

Regional Mental Retardation Program Manager
Northeast Region
100 Lackawanna Avenue
Third Floor, Room 315
Scranton, Pennsylvania 18503

Regional Mental Retardation Program Manager
Central Region
2330 Ararat Boulevard
P.O. Box 2675
Harrisburg, Pennsylvania 17105

Regional Mental Retardation Program Manager
Western Region
1403 State Office Building
300 Liberty Avenue
Pittsburgh, Pennsylvania 15222

(b) Forms MH/MR 577 and MH/MR 883 are due on a quarterly basis on July 10, October 10, January 10, and April 10 of each year. If there are no write-offs or adjustments, reports indicating "none" shall be submitted.

Obsolete Bulletin:

Mental Health/Mental Retardation Bulletin Number 99-86-15, titled "Quarterly Liability Write-Off Reports and Maximum Liability Decision Summary Sheets" issued May 1, 1986.
APPENDIX I

I. INCOME: POST-ELIGIBILITY COMPUTATION

In determining patient liability for the special income group with earned income, the following steps apply:

NOTE: The total maintenance needs deduction (A. and B. 1-5) for any person in the Waiver may not exceed 300% of the Federal portion of the SSI payment of $1,052 ($354 X 300%) for 1988.

A. Unearned Income: From the total gross unearned income deduct the current SSI Federal-State payment level which is $386.40 per month for the resident's maintenance expenses including room, board, and incidental expenses.

B. Earned Income: From the total gross earned income deduct in the following order:

1. The $20 income disregard
2. The $35 earned income deduction
3. The impairment-related work expenses:

   (i) Payments for attendant care services if assistance is needed by the Waivers beneficiary in traveling to and from work and while at work because of his impairment.

   (ii) Payments for a medical device if the Waivers beneficiary's impairment requires him to use the device to work.

   (iii) Payments for a prosthetic device if the Waivers beneficiary's impairment requires him to use the prosthetic device to work.

   (iv) Payments for impairment related nonmedical appliances and equipment and residential modifications needed by the Waivers beneficiary for his employment. Residential modifications are paid only if the employment is done in the home.

   (v) Payments for drugs and medical services if necessary for the Waivers beneficiary to control his impairment.

   (vi) Payments for installing, maintaining, and repairing the items listed in subparagraphs (i)-(v) that are necessary for the Waivers beneficiary's employment.

   (vii) Payments for similar items and services not listed above which are directly related to the Waivers beneficiary's impairment and needed by him to work.
4. 1/2 of the remaining earned income

5. An amount set aside from earned income to fulfill a plan to achieve self-support (PASS) as approved by the County MH/MR staff.

NOTE: The total deductions from earned income may not exceed $675.50 which is 300% of the Federal portion of the SSI payment minus the SSI Federal-State payment of $385.40.

C. Combine the products of Step A and Step B and deduct from that total in the following order:

1. An amount to meet the needs of the person's spouse. This amount may not exceed the current SSI Federal-State payment level which is $385.40 per month, or an amount to meet the needs of the person's family which may not exceed the maximum AFDC monthly payment for the appropriate size family. (See PAEM 175.23(a))

2. The amounts incurred for medical or remedial care that are not subject to payment by a third party including Medicare and other health insurance premiums, deductibles, or co-insurance charges.

3. The cost of necessary medical or remedial care recognized under State law as long as it is not covered under Pennsylvania's Medical Assistance Program and is not subject to payment by a third party.

D. The result arrived at in Step C is the Waivers beneficiary's liability toward the cost of services.

E. For initial determinations, prepare the PA/FS 162 according to instructions in MB 99-85-37.

F. For the monthly determination when a change in income or deductions occurs but the income remains within the 300% special gross income limit:
   - Send a PA/FS 162-C if the liability for cost of waiver services decreases, or
   - Send a PA/FS 162-A if the liability for cost of waiver services increases.

G. If the total gross income exceeds the 300% special gross income limit, notify the appropriate persons through the normal PA/FS 162-A process of the Waivers beneficiary's ineligibility.

II. RESOURCE LIMIT

The MA resource limit is $1,900 for one person. If the Waivers beneficiary's countable resources are equal to, or less than, $1,900, the person is MA resource eligible. The MA resource requirements for the Categorically Needy Nonmoney Program (NMP) apply.