
INSTITUTIONALIZATION

LTC BUDGETING PROCESS

**A. INSTITUTIONAL
BUDGET FORM,
DOM-336**

For each client in LTC, an Institutional Budget (DOM-336) is completed, either in MEDS or on paper, at the time of application and at each Redetermination. The budget form determines:

- eligibility based on income
- coverage group and fulfillment of the 30-consecutive day requirement
- the monthly maintenance needs allowance for a community spouse and/or other dependent family members
- the amount of Medicaid Income

**1. Eligibility
Based On
Income**

All individuals applying will have their total income received in the month counted as income for each month eligibility is being determined. Income for eligibility purposes does not include:

- any averaged income. Income subject to averaging is counted in its entirety in the month received for eligibility purposes.
- any VA Aid & Attendance
- gross rental income (consider only net rental income)

When testing total income of the eligible individual against the appropriate Federal Institutional Income limit, the income must be less than the Federal income limit in order for the applicant to be eligible in any month. If the total income is equal to or greater than the appropriate Federal maximum, eligibility must be denied for that month (unless an Income Trust is in effect).

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- 2. Coverage Group Determination & 30-Consecutive Day Requirement**
- For institutional purposes, an individual falls into one of 2 categories:
- Individuals who would be eligible for SSI at-home
 - Individuals who would not be eligible for SSI at-home

A determination as to which coverage group the individual would fit into is used for statistical purposes only.

Since there is no deeming of income from parent(s) or an ineligible spouse in any month of institutionalization, the SSI coverage group determination is based on the eligible's income only. If the individual or couple applying already receive SSI at-home, the coverage group is predetermined.

The 30-consecutive day requirement must be documented for any individual who is not Medicaid eligible at home. If the 30-consecutive day requirement is met for those who are not Medicaid eligible at home, the beginning date of Medicaid eligibility is potentially the first of the month of admission provided the applicant is eligible on all other factors for the first partial month.

- 3. Monthly Maintenance Needs Allowance For A CS and/or Dependents**
- This budgeting is completed only if the institutionalized individual has a community spouse. If the community spouse has other dependents residing in the same home with him/her, an additional allocation to the other dependent(s) may be allowed. Refer to the following subsection, "Medicaid Income Computation," for a complete discussion of this budgeting step.
- 4. Medicaid Income**
- If an institutional client is determined eligible based on income, then the client's income is then used to determine the client's cost of care, known as Medicaid Income. Refer to the following subsection on the "Medicaid Income Computation" for a complete discussion of this budgeting step.