
**DEPARTMENT
POLICY****FIP, RCA and SDA Only**

Financial eligibility is documented for each FIP/RCA/SDA group in data collection and eligibility results in Bridges.

Documentation of financial eligibility is required at application, re-determination and when program policy requires a budget; see BEM 505, 515. Documentation must reflect the group's current financial eligibility status.

The remainder of this item covers the completion of the DHS-1172 for the FIP, RCA and SDA programs. The budget calculations are automatically completed as part of the eligibility determination and benefit calculation in Bridges and an automated budget worksheet are displayed in eligibility summary. In addition, hyperlinks can be used to view individual income and asset details.

Bridges applies all of the following rules when computing a FIP/RCA/SDA budget:

- Drop cents before entering any amount used to compute the issuance amount on the worksheet.
- If an entry on the worksheet is the result of a computation using other amounts that do not appear on the worksheet, cents are included in the computation and dropped from only the final result which is entered on the form.
- When the result of a computation is a negative number, a zero is entered on the worksheet.
- Cents amounts are included when computing recouped, vendored and benefit amounts.
- All amounts entered on the worksheet are monthly amounts unless otherwise specified in the instructions.
- Only countable, available income and assets, as defined in BEM 400, 500, 505 and 518, are entered on the worksheet.

The absence of an entry on any worksheet line in sections A-G is considered to represent an entry of zero. However, zero may be entered whenever appropriate.

**DHS-1172
COMPLETION
INSTRUCTIONS**

Use these instructions if it is necessary to complete a budget worksheet manually.

ID Block:

Case Name - Enter the name of the grantee.

Case Number - Enter the group's assigned number.

Benefit Mo/Yr - Enter the month and year of the benefit month the worksheet being completed for.

County/Dist/Section/Unit/Specialist - Enter the load number.

Program - Check off the program type.

Process - Check off the budgeting process type.

Group Size - Enter the number of persons in the FIP/SDA eligible group. Include eligible children who are **not** immunized.

**Section A; Cash
Assets****Family Independence Program (FIP), Refugee Cash Assistance (RCA) and State Disability Assistance (SDA) Only - See BEM 400**

1. Enter the total countable value of all the checking accounts.
2. Enter the total countable value of all the savings accounts.
3. Enter the total countable value of all the other liquid assets.
4. Enter the sum of lines 1, 2, and 3.
5. Enter the program's asset limit.

**Section B;
Payment Standard****FIP, RCA and SDA Only - See BEM 515**

1. **SDA-SLA Only** - Enter the monthly rate for the SLA and level of care; see RFT 235.
2. **SDA-SLA Only** - Enter the SLA Incidentals allowance; see RFT 235.

3. **SDA-SLA Only** - Add the amounts on lines 1 and 2 and enter the sum.
4. **FIP/RCA/SDA-Independent only** - Enter the amount of the payment standard for this group's program, eligible group size and grantee status or living arrangement; see RFT 210 or 225.
5. **Immunization Penalty (FIP Only)** - Enter the amount on line 4 less the amount of the immunization penalty, if the group is subject to it.
6. **Payment Standard** - Subtract the amount in line 5 from the sum of line 3 plus line 4.

**Section C;
Qualifying Income
Test**

FIP and RCA Only - See BEM 518.

1. Enter the total gross earned income for the group that is from employment.
2. Enter all the self-employment income; see BEM 502.
3. Enter the sum of lines 1 and 2.
4. For each member with earnings enter the lesser of \$200 or the amount on line 3.
5. Subtract line 4 from the total in line 3.
6. Enter 20 percent of the total in line 5.
7. Subtract line 6 from the remainder in line 5.
8. Enter all the countable unearned income.
9. Enter the sum of line 7 and line 8.
10. Enter the lesser of the countable child support income or \$50.00.
11. Subtract line 10 from the remainder in line 9.
12. Enter the child support expense.

13. Subtract line 12 from the remainder in 11. If this is less than the payment standard in B6 continue onto section D.

Section D; Issuance Test

FIP, RCA and SDA Only

1. Enter the total gross earned income for the group.
2. Enter all of the self-employment income; see BEM 502.
3. Enter the sums of lines 1 and 2.
4. For each member with earnings enter the lesser of \$200 or the amount on line 3.
5. Subtract line 4 from the total in line 3.
6. Enter 50 percent of the total in line 5.
7. Subtract line 6 from the remainder in line 5.
8. Enter all of the countable unearned income.
9. Enter the sum of line 7 and line 8.
10. Enter the lesser of the countable child support income or \$50.00.
11. Subtract line 10 from the total in line 9.
12. Enter the child support expense.
13. Enter the Spousal Deduction.
14. Subtract lines 12 and 13 from the remainder in line 11.

Section E; Child Support Income Test

FIP Only

1. Enter the total monthly certified current support amount to the voluntary support amount.

2. Enter the child support exclusion the group is eligible to receive. Enter the lesser of the amount on line 1 or \$50.
3. Enter the total from line D7.
4. Enter the monthly unearned income that the client receives.
Note: The amount in line 4 should not include any child support payments.
5. Subtract line 2 from line 1 then add lines 3 and 4.
6. Enter the amount paid for the court ordered child support; see BEM 518.
7. Subtract line 6 from line 5.

Section F; Issuance Amount

FIP, RCA and SDA Only

1. Enter the amount from line B6.
2. Enter the amount from line D14.
3. Enter the recoupment amount.
4. Subtract line 2 and line 3 from the amount on line 1 and enter the result.

Note: Divide line 4 by 2 if the first month of issuance is only going to be the second half of the month.

Example: Client applies for FIP August 17th. The earliest the group can start to receive benefits is the second half of September.

Section G; Countable Income for Food Assistance

FIP, RCA and SDA Only - See BEM 550.

1. Enter the amount from line F4.
2. Enter an amount if recoupment is due to IPV.
3. If the group is subject to an immunization penalty enter \$25, if not enter \$0.

4. Enter the sum of line 1, line 2, and line 3.

LEGAL BASE

FIP

MDHHS Annual Appropriations Act
P.A. 280 of 1939, as amended

RCA

45 CFR 400.66

SDA

MDHHS Annual Appropriations Act
Mich Admin Code, R 400.3151 – 400.3180