

EXAMPLE

REMEMBER.....INCOME IN EACH MONTH.....INCOME OUT EACH MONTH!!!!

CLIENT NAME

Client Participation for Medicaid

Starting January 1, 2025

Instructions:

Each month, after all income is deposited:

- 1) Be aware that DHS counts the balance of the Resident Trust Account towards the Medicaid recipients \$2,000. PLEASE check the resident trust account before writing a check to the facility. PLEASE keep the resident trust account balance around \$50 each month. If they do not need the \$50 then, PLEASE write a \$50.00 check for CASH or use the ATM to draw \$50 out of their bank account. Put the money in an envelope for anything they may need in the future.
- 2) Write a check to the facility for the amount below.

Please let us know if/when any of the income or expense amounts change, this will affect the amount due to the facility. Once ?? is approved, be watching for an additional deposit from social security, for his/her Part B refund and possibly a Part D refund as well.

GROSS INCOME

Social Security (<u>gross</u> amount, not net)	\$1,381.70
IPERS	688.02
Pension	<u>403.12</u>
Total	\$2,472.84

ALLOWED EXPENSES

Medicare Part B	\$ 185.00-out of SS (reduces SS deposit)
Medicare Supplement	401.09
Drug Plan (Part D)	41.00
Personal Funds	50.00 – SEE NOTE ABOVE!
Care Center	<u>1,806.05</u>
Total	\$2,472.84