

**Determination Worksheet for Pickle Eligibles
and Other Protected Medical Group**

Case Name:	Case Number:
Applicant/Recipient (if different than above):	

Instructions: Complete all lines for Pickle determinations (see Medical KEESM 2681). For Disabled Widows and Widowers and Adult Disabled Children determinations, complete only Lines 3 through 12 (See Medical KEESM 2682 and 2683). For Early Widow/Widower determination, complete only Lines 4 through 12 (see Medical KEESM 2684).

1. Current OASDI Benefit Amount		\$
2. COLA amount Disregarded for Pickles	Line 1 x (_____) =	\$
3. COUNTABLE OASDI (1-2)		\$
4. Other Gross Unearned Income (Specify)		\$
5. Other Gross Unearned Income (Specify)		\$
6. Total Gross Unearned Income (3+4+5)		\$
7. Gross Earned Income (Specify)		\$
8. IRWE/BWE Disregard		\$
9. Adjusted Earned Income (7-8)		\$
10. Total Adjusted Income (6+9)		\$
11. SSI Disregard (\$20 or as computed on ES-3103.5)		\$
12. Countable income (10-11)		\$
If Line 12 is less than SSI benefit level indicated below, check Eligible	If Line 12 is greater than or equal to SSI benefit level indicated below, check Ineligible	Eligible: <input type="checkbox"/> Ineligible: <input type="checkbox"/>
Worker's signature:		Date:

SSI BENEFIT LEVEL (check one)	Total COLA Ratio – For Pickle Determinations			
	<i>Period of Last SSI Payment</i>	<i>COLA RATIO</i>	<i>Period of Last SSI Payment</i>	<i>COLA RATIO</i>
	1-22 through 12-22	0.0557	1-99 through 12-99	0.4121
	1-21 through 12-21	0.0678	1-98 through 12-98	0.4242
	1-20 through 12-20	0.0825	1-97 through 12-97	0.4405
___ \$841.00 Individual in own home (including spouse with no income)	1-19 through 12-19	0.1075	1-96 through 12-96	0.4546
	1-18 through 12-18	0.1250	1-95 through 12-95	0.4695
	1-17 through 12-17	0.1276	1-94 through 12-94	0.4829
	1-16 through 12-16	0.1276	1-93 through 12-93	0.4980
	1-15 through 12-15	0.1422	1-92 through 12-92	0.5159
___ \$1,261 individual with spouse in own home (spouse has income or is eligible for Pickle status)	1-14 through 12-14	0.1549	1-91 through 12-91	0.5407
	1-13 through 12-13	0.1690	1-90 through 12-90	0.5613
	1-12 through 12-12	0.1979	1-89 through 12-89	0.5782
	1-11 through 12-11	0.1979	1-88 through 12-88	0.5952
	1-10 through 12-10	0.1979	1-87 through 12-87	0.6004
	1-09 through 12-09	0.2419	1-86 through 12-86	0.6124
	1-08 through 12-08	0.2589	1-85 through 12-85	0.6255
___ \$560.67 Individual in household of another	1-07 through 12-07	0.2826	1-84 through 12-84	0.6382
	1-06 through 12-06	0.3108	7-82 through 12-83	0.6631
	1-05 through 12-05	0.3289	7-81 through 6-82	0.6970
	1-04 through 12-04	0.3428	7-80 through 6-81	0.7349
	1-03 through 12-03	0.3518	7-79 through 6-80	0.7588
___ \$840.67 Individual with spouse in household	1-02 through 12-02	0.3683	7-78 through 6-79	0.7735
	1-01 through 12-01	0.3896	7-77 through 6-78	0.7862
	1-00 through 12-00	0.4045		

Instructions for Completion of the ES-3104.6

Enter the case name and case number at the top of the form for identifying purposes. If the applicant/recipient is different than the case name, enter their name in the Applicant/Recipient field.

1. Enter the current monthly gross OASDI (Social Security) benefit amount.
2. Enter the amount of the COLA disregard. To calculate the disregard, locate the COLA ratio (from the table on the front of the worksheet) for the month and year of the last SSI payment. Multiple this amount by the amount on line 1.

Example: If the last SSI payment was in 08/2001 and the current OASDI payment is \$1,000, then the COLA ratio of 0.3896 times \$1,000 = \$389.60, which is the COLA disregard.

If the individual lives with a spouse who also has OASDI, separate calculations are required to determine the COLA disregard for each spouse's own OASDI.

3. For a Pickle determination, subtract line 2 from line 1. This is the countable OASDI (Social Security). Enter this amount. For a QDW determination, enter the OASDI amount received by the individual prior to loss of SSI. For an ADC determination, enter the ADC benefit amount received prior to loss of SSI.
4. For a EDW determination, enter the monthly gross unearned income other than the EDW benefit. If none, enter zero.
5. Enter (and name the source of) the monthly gross amount of any other unearned income. If none, leave blank.
6. Add lines 3,4, and 5. This is the total gross unearned income. If none, leave blank
7. Enter (and name the source of) the monthly gross earned income. If none, leave blank.
8. Enter the amount of any IRWE/BWE disregard. If none, leave blank.
9. Subtract line 8 from line 7. This is the adjusted earned income. If none, enter zero.
10. Add lines 6 and 9. This is the adjusted income. Enter this amount. If none, enter zero.
11. Enter the amount of the SSI Disregard computed via the ES-3103.5. Use of the ES-3103.5 is only required when there is countable earned income, otherwise the disregard is \$20.
12. Subtract line 11 from line 10. This is the total countable income. Enter this amount.

Identify the SSI benefit level for the appropriate living arrangement from the table on the front of the worksheet. If the amount in line 11 is less than the SSI benefit level, check "Eligible". If the amount in line 11 is greater than or equal to the SSI benefit level, check "Ineligible".

Sign and update the worksheet.