Service Chapter: ACA Medicaid Non- ACA Medicaid 510-03 & 510-05
Effective Date: October 1, 2025
Amended: 11/20/2025

Overview

Amended 11/20/2025 to add 510-05-70-30, 510-08-85-25, 510-05-85-30.

Updating language to clarify that Medicaid coverage will be suspended for certain Medicaid eligible individuals during admission to an Institution for Mental Disease (IMD).

Clarifying what conditions need to be met for an individual to be considered gainfully employed and updating examples of what is and isn't considered gainful employment.

Description of Changes

1. **Institutions for Mental Disease (IMD) 510-03-35-97 - Change**

   Updating verbiage to clarify what happens to Medicaid when certain individuals are admitted to an Institution for Mental Disease (IMD).

2. **Institutions for Mental Disease (IMD) 510-05-35-97 - Change**

   Updating verbiage to clarify what happens to Medicaid when certain individuals are admitted to an Institution for Mental Disease (IMD).

3. **Gainful Employment 510-05-57-15 - Change**

   Reformatting the original text under this policy section. Adding in more examples of what is considered gainful employment and what is not considered gainful employment. Specifying that a client must be in receipt of Workers with Disabilities (WWD) when they go on medical leave from their employment.

4. **Excluded Assets 510-05-70-30 – Change**

   IRAs/Roth IRAs are only excluded as an asset if receiving periodic payments.

5. **Post Eligibility Treatment of Income 510-05-85-25 – Change**

   Revise current policy to incorporate the exclusion of tribal income from natural resources as disregarded income.

6. Disregarded Income 510-05-85-30-Change

Adding that SSI income does not affect the QMB budget to Policy.

Policy Section Updates

1. Institutions for Mental Disease (IMD) 510-03-35-97

~~An individual under age 65 who is a "patient" in an IMD is not eligible for Medicaid, except as identified in subdivision d, unless the individual is under age 21 and is receiving inpatient psychiatric services and meets the certificate of need for admission. An individual who attains age 21 while receiving treatment, and who continues to receive treatment as an inpatient, may continue to be eligible through the month the individual attains the age of 22.~~

An IMD is a hospital, nursing facility, or other institution of more than 16 beds that is primarily engaged in providing diagnosis, treatment or care of persons with mental diseases. A facility with 16 beds or less is not an IMD. An institution is classified as an IMD if its main purpose is for the care and treatment of mental diseases. An intermediate care facility for individuals with intellectual disabilities (ICF-IID) is not classified as an IMD.

Current listing of IMDs in North Dakota

Admission at an Institution for Mental Disease (IMD) does not make an individual ineligible for Medicaid. However, Medicaid will not pay for covered services for individuals under age 65 who reside at an IMD unless the individual:

- Is 21 and under AND
- Has a certificate of need AND
- Receives inpatient psychiatric services.

For those who do not meet the criteria for Medicaid to pay for covered services, their Medicaid coverage will be suspended while they are residing at the IMD.

In Medicaid policy, "residing" in an Institution for Mental Disease (IMD) means that a person is admitted and staying overnight at the facility and is receiving inpatient or residential treatment. Individuals who are present at the IMD only for outpatient services or day treatment are not considered to be residing in the facility. Suspension of Medicaid eligibility does not apply to individuals receiving only outpatient or day services at an IMD.

Note: An individual who attains age 21 while receiving treatment, and who continues to receive treatment as an inpatient, may continue to receive Medicaid covered services through the month the individual attains the age of 22.

~~a. An IMD is a hospital, nursing facility, or other institution of more than 16 beds that is primarily engaged in providing diagnosis, treatment or care of persons with mental diseases. A facility with 16 beds or less is not an IMD. Whether an~~

~~institution is an IMD is determined by its overall character as that of a facility established and maintained primarily for the care and treatment of mental diseases. An intermediate care facility for individuals with intellectual disabilities (ICF-IID) is not an IMD.~~

~~IMDs include the North Dakota State Hospital, and facilities determined to be a Psychiatric Residential Treatment Facility (PRTF) by the Medical Services Division. For any other facility, contact the Medical Services Division for a determination of whether the facility is an IMD.~~

~~For current listings of IMDs use this link~~:

~~5-24-imd-facility-list.pdf (nd.gov)~~

~~Note: Teen Challenge in Mandan: Only the men's program is considered an IMD.~~

~~b.~~ A. An individual on conditional release or convalescent leave from an IMD is not considered to be ~~a "patient"~~ residing in that institution. However, such an individual who is under age 21 and has been receiving inpatient psychiatric services is considered to be ~~a "patient~~" residing in the institution until unconditionally released or, if earlier, the last day of the month in which the individual reaches age 22.

~~c.~~ B. An individual on conditional release is an individual who is away from the institution, for trial placement in another setting or for other approved leave, but who is not discharged. An individual on "definite leave" from the state hospital is an individual on conditional release.

~~d. A child under the age of 19 who is determined to be continuously eligible for Medicaid, but who does not meet the certificate of need, remains eligible for Medicaid, however, no medical services will be covered during the stay in the IMD.~~

The period of ~~ineligibility~~ Medicaid suspension under this section begins the day after the day of entry and ends the day before the day of discharge of the individual from a public institution or IMD. A Ten-Day Advance Notice is not needed when terminating benefits due to entry into the public institution or IMD. See Paragraph (4)(c)(iii) of 510-03-25-25, "Decision and Notice," for further information.

2. Institutions for Mental Disease (IMD) 510-05-35-97

~~An individual under age 65 who is a "patient" in an IMD is not eligible for Medicaid, except as identified in subdivision d and e, unless the individual is under age 21 and~~

~~is receiving inpatient psychiatric services and meets the certificate of need for admission. An individual who attains age 21 while receiving treatment, and who continues to receive treatment as an inpatient, may continue to be eligible through the month the individual attains the age of 22.~~

An IMD is a hospital, nursing facility, or other institution of more than 16 beds that is primarily engaged in providing diagnosis, treatment or care of persons with mental diseases. A facility with 16 beds or less is not an IMD. An institution is classified as an IMD if its main purpose is for the care and treatment of mental diseases. An intermediate care facility for individuals with intellectual disabilities (ICF-IID) is not classified as an IMD.

Current listing of IMDs in North Dakota

Admission at an Institution for Mental Disease (IMD) does not make an individual ineligible for Medicaid. However, Medicaid will not pay for covered services for individuals under age 65 who reside at an IMD unless the individual:

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- Receives inpatient psychiatric services.

For those who do not meet the criteria for Medicaid to pay for covered services, their Medicaid coverage will be suspended while they are residing at the IMD.

In Medicaid policy, “residing” in an Institution for Mental Disease means that a person is admitted and staying overnight at the facility and is receiving inpatient or residential treatment. Individuals who are present at the IMD only for outpatient services or day treatment are not considered to be residing in the facility. Suspension of Medicaid would not occur if the individual were receiving outpatient or day services at the IMD.

Note: An individual who attains age 21 while receiving treatment, and who continues to receive treatment as an inpatient, may continue to receive Medicaid covered services through the month the individual attains the age of 22.

Note: Individuals eligible under the PACE program will remain eligible for Medicaid covered services regardless of their age while a patient in an IMD.

~~a. An IMD is a hospital, nursing facility, or other institution of more than 16 beds that is primarily engaged in providing diagnosis, treatment or care of persons with mental diseases. A facility with 16 beds or less is not an IMD. An intermediate care facility for Individuals with Intellectual Disabilities (ICF-IID) is not an IMD~~

~~For current listings of IMDs use this link:~~

~~5-24-imd-facility-list.pdf (nd.gov)~~

~~Note: Teen Challenge in Mandan: Only the men's program is considered an IMD~~

~~b.~~ A. An individual on conditional release or convalescent leave from an IMD is not considered to be ~~a "patient"~~ residing in that institution. However, such an individual who is under age 21 and has been receiving inpatient psychiatric services is considered to be a ~~"patient"~~ residing in the institution until unconditionally released or, if earlier, the last day of the month in which the individual reaches age 22.

~~c.~~ B. An individual on conditional release is an individual who is away from the institution, for trial placement in another setting or for other approved leave, but who is not discharged. An individual on "definite leave" from the state hospital is an individual on conditional release.

~~d. A child under the age of 21 who is determined to be continuously eligible for Medicaid, but who does not meet the certificate of need, remains eligible for Medicaid, however, no medical services will be covered during the stay in the IMD.~~

~~e. Individuals eligible under the PACE program will remain eligible for Medicaid regardless of their age.~~

The period of ~~ineligibility~~ Medicaid suspension under this section begins the day after the day of entry and ends the day before the day of discharge of the individual from an IMD. A Ten-Day Advance Notice is not needed when terminating benefits due to entry into the IMD. See Paragraph (4)(c)(iii) of 510-03-25-25, "Decision and Notice," for further information.

3. Gainful Employment 510-05-57-15 - Change

(N.D.A.C. 75-02-02.1-24.2)

~~1. An individual may be regarded as gainfully employed only if the activity asserted as employment:~~

~~a. Produces a product or service that someone would ordinarily be employed to produce and for which payment is received;~~

~~b. Reflects a relationship of employer and employee or producer and customer;~~

~~c. Requires the individual's physical effort for completion of job tasks, or, if the individual has the skills and knowledge to direct the activity of others, reflects the outcome of that direction; and~~

~~d. The employment setting is not primarily an evaluative or experiential activity.~~

~~e. Gainful employment will normally look like work to a reasonable person and will normally include withholding or payment of FICA. Gainful employment could include such activities as self-employment but not day services. Gainful employment cannot be measured by the number of hours worked or amount of earnings, but is based solely on the activity involved. The following examples may help in determining what is and is not gainful employment.~~

An individual is considered gainfully employed if all the following conditions are met:

- The employed individual provides a service or product that would require employment and there is a clear employer-employee relationship.
- The individual is paid for their work and withholding taxes or FICA are withheld from their paycheck;
- If the individual is self-employed, they must provide a service or product that results in payment for the service or product); and
- The individual demonstrates the necessary skills to perform essential job functions, including physical or technical knowledge, or they have the ability to direct the activities of others.

Other considerations around gainful employment:

- Gainful employment can include self-employment
- Gainful employment cannot be measured by the number of hours worked or the amount of earnings but is based on the activity involved.
- The work activities of applicants and recipients who receive employment related Extended Services from licensed Extended Services providers meet gainful employment criteria.

~~**EXAMPLE:** An individual is trained and employed as an electronics technician. However, due to a physical disability, does not have the manual dexterity to complete testing and repair procedures. The individual has an assistant that the technician directs on those procedures. Since it is the technician's knowledge of procedures and specifications that is necessary for production, that activity is considered gainful employment even though the assistant actually performs the physical labor.~~

~~In this example, the assistant may have a cognitive disability and does not have the knowledge to complete the procedures but does have the physical skills to do so with the technician's direction. This also would meet the test for gainful employment.~~

~~**EXAMPLE:** Vocational Rehabilitation, DD and Special Education often use situational assessments in actual business settings to evaluate vocational potential or to provide the individual with experiences in various employment settings to assist in making career decisions. There may be actual work activity in the workplace but there is no commitment to hire, or one expected as an outcome.~~

~~The work activities of applicants and recipients who receive employment related Extended Services from Licensed Extended Service Providers meet the gainful employment criteria. Receipt of Extended Services indicates that the individual is not in an evaluative or experiential activity, but is participating in supported employment on a long-term basis. Receipt of the Extended Services can be identified in the provider's Individual Service Plan for the applicant or recipient.~~

Examples of Jobs that meet gainful employment conditions:

- An individual is trained and employed as an electronics technician but does not have the manual dexterity to complete testing and repair procedures due to physical disability. The technician directs an assistant on the testing and repair procedures using the technician's knowledge of procedures and specifications necessary for production and job completion. The technician is considered gainfully employed as the individual has the skills and knowledge to supervise or direct the activity of others who perform the physical labor.

- Individuals in receipt of Extended Services indicate the individual is not in an evaluative or experimental activity but is participating in supported employment on a long-term basis. Receipt of the Extended Services can be identified in the provider's Individual Service Plan for the applicant or recipient.

~~**EXAMPLE:** An individual is engaged in an activity sorting objects such as nuts and bolts. However, when the task is completed they are dumped together and mixed up again. While there may be some therapeutic value involved for the individual, it does not produce a product that anyone would pay for, and does not look like work to a reasonable person.~~

~~**EXAMPLE:** An individual is in a training situation where a business agrees to provide the setting for the individual to engage in some activity (stocking shelves for instance) but the business does not have a position open, does not pay the individual, and if the individual were not completing the activity, existing personnel~~

~~and resources would cover it. While it is productive activity, there is not a demand by the business for that service.~~

Jobs are not considered gainful employment when:

- The individual is not paid for the work they do.
- The employer creates a job for an individual to perform a work activity but there is normally no position required for that work activity. The job could be done by existing personnel, and the individual would not be replaced if they left the job.
- An individual is engaged in an activity sorting objects such as nuts and bolts but when the task is completed, they are dumped together and mixed up again. While there may be some therapeutic value involved for the individual, it does not produce a product that anyone would pay for and is not considered gainful employment even if the individual is paid.
- The employment setting is primarily an evaluative or experimental activity.

Note: Vocational Rehabilitation, Developmental Disabilities programs and Special Education often use situational assessments in actual business settings to evaluate vocational potential or to provide the individual with experiences in various employment settings to assist in making career decisions. There may be actual work activity in the workplace but there is no commitment to hire, or one expected as an outcome.

~~1. When an individual who is considered gainfully employed stops working, and is no longer on the payroll, the individual is no longer considered gainfully employed. However, if an individual quits one job to begin another, the individual is considered gainfully employed if the individual will not be unemployed for more than one calendar month.~~

When an individual who is considered gainfully employed stops working, and is no longer on the payroll, the individual is no longer considered gainfully employed.

- If an individual quits one job to begin another, the individual is considered gainfully employed if the individual will not be unemployed for more than one calendar month.
- If the individual quits their job and does not have another job, a desk review must be completed to determine if they are asset eligible for traditional Medicaid. If the client does not verify their assets or they are

over the medically needy asset limit, the case must be closed. Advance notice rules must apply.

~~1.When an individual who is considered gainfully employed is not working due to illness or injury, the individual is considered gainfully employed if the individual intends to, and can, return to work. If the illness or injury is expected to last more than three months, a statement from the individual's physician will be needed indicating whether the individual can reasonably be expected to return to work. Further determinations of gainful employment shall be based on the physician's statement.~~

When a recipient of WWD is unable to work due to illness or injury, the individual will continue to be considered gainfully employed if the individual intends to and can return to work.

- A statement from the individual's physician or employer will be needed to indicate when the individual can reasonably be expected to return to work. The individual can remain open on WWD coverage for up to three months while on medical leave. However, if the individual has not returned after the third month, WWD must close, and asset eligibility must be determined for traditional Medicaid. Advance notice rules apply.

3. Excluded Assets 510-05-70-3 – Change

23. Funds held in retirement plans that are considered qualified retirement plans and meet the qualified retirement criteria established by the Internal Revenue Service (IRS); 26 U.S.C. These include:

- SEP-IRA (Simplified employee pension) plans
- Employer or employee association retirement accounts
- Employer simple retirement accounts
- 401(k) retirement plans (which include independent (sole proprietorship) plans)
- 403(b) retirement plans
- 457 retirement plans
- 401 (a) Employer-sponsored money-purchased retirement plan
- ~~Individual Retirement Plan (IRA's)~~
- ~~Roth Individual Retirement Plan (Roth IRA's)~~

5. Post Eligibility Treatment of Income 510-05-85-25 – Change

(N.D.A.C. Sections 75-02-02.1-34(6) and 75-02-02.1-38.1)

This section prescribes specific financial requirements for determining the treatment of income and application of income to the cost of care for individuals with a certification of need or who are screened as requiring nursing care services, and who are residing in nursing facilities, the state hospital, the Anne Carlsen facility, the Prairie at St. John's center, the Stadter Psychiatric Center, a Psychiatric Residential Treatment Facility (PRTF), intermediate care facilities for the intellectually disabled (ICF-ID), and individuals receiving swing bed care in hospitals.

1. The following types of income may be disregarded:

    a. Occasional small gifts;

    b. For so long as 38 U.S.C. 5503 remains effective, ninety dollars of Veteran's Administration improved pensions paid to a veteran, or a surviving spouse of a veteran, who has neither spouse nor child, and who resides in a Medicaid-approved nursing facility;

    c. Payments to certain United States citizens of Japanese ancestry, resident Japanese aliens, and eligible Aleuts made under the Wartime Relocation of Civilians Reparations Act;

    d. Agent Orange payments;

    e. German Reparation payments made to survivors of the holocaust, and reparation payments made under sections 500 through 506 of the Austrian General Social Insurance Act;

    f. Netherlands Reparation payments based on Nazi, but not Japanese, persecution during World War II, Public Law 103-286;

    g. Radiation Exposure Compensation, Public Law 101-426;

    h. Interest or dividend income from liquid assets; and

i. From annual countable gross CRP and rental income, an amount equal to the real estate taxes for CRP and rental property that the recipient is responsible for paying on that property.

Example 1: Ed is in the nursing home. He receives rental income on farmland in the amount of $24,000. Ed is responsible to pay the property taxes. The most current tax statement verifies that Ed is responsible for property taxes of $3600. $24,000 - $3600 is his annualized adjusted rental income of $20,400; divided by 12 equals $1700 per month unearned income to Ed.

Example 2: Ralph and Edna are married. Edna is in the nursing home~~,~~and Ralph is in the community. Their farmstead is leased out in both of their names. They receive annual gross rent of $30,000 and the property taxes for which both are responsible is $6,000. Since they both own and are entitled to the income, it is divided, so each has gross rental income of $15,000. Likewise, the property tax is split between them. When determining Edna's income, the $15,000 - $3,000, or $12,000 is prorated over the year for $1000 per month. When determining Ralph's income, the $15,000 is prorated over the year, giving him countable income of $1250 per month. Because only Edna is in a long-term care facility, only she is allowed the property tax disregard.

Example 3: Pete is in the nursing home. He receives land rental income of $12,000 in April and $12,000 in October. His most recent tax statement verifies his responsibility of $4,000 in property taxes. Taking his annual rental income of $24,000 minus his property tax liability of $4000 equals $20,000 countable annual rental income. Dividing this by 12 months gives us a prorated countable monthly unearned rental income of $1,666.67. This would be reviewed in March of the following year to determine if the income or the liability has changed. If they apply after the April payment was received, but prior to receipt of the October payment, only the $12,000 October payment minus half of the allowed property tax liability would be prorated up to the next payment the following April.

j. Income tax refunds are excluded in the month received (they may be a countable asset, see 510-05-70-30(16) for treatment as an asset).

k. Money received by Native Americans from the lease or sale of natural resources, and rent or lease income, resulting from the exercise of federally-protected rights on excluded Indian property, is considered an asset conversion and is therefore not considered as income (even if the money is taken out of the IIM account in the same month it was deposited into the account). This includes distributions of per capita judgment funds or property earnings held in trust for a tribe. This does not Include local Tribal funds that a Tribe distributes to individuals on a per capita basis, but which have not been held in trust by the Secretary of Interior (e.g., tribally managed gaming revenues - which is countable income).

l. Disbursements from The People's Fund and General Disbursements to members of the Mandan, Hidatsa, Arikara (MHA) Nation also known as Three Affiliated Tribes (TAT) come from natural resources (oil and gas royalties), therefore are disregarded income.

NOTE: Income received by Native Americans from the sale or lease of natural resources cannot be requested.

2. The mandatory payroll deductions under FICA and Medicare are allowed from earned income. (This does not include federal or state income tax withholding).

3. The following deductions are allowed in the following order:

   a. The appropriate nursing care or ICF-ID income level;

   b. Amounts provided to a spouse or family member for maintenance needs (this is the appropriate Medicaid income level for the spouse or family member, NOT alimony or child support);

   c. Medical expenses for necessary medical or remedial care. (See examples of what are and are not considered necessary medical expenses at 510-05-85-35(2)(3)). Each medical or remedial care expense claimed for deduction must be documented in a manner, which describes the service, the date of the service, the amount of cost incurred, and the name of the service provider. An expense may be deducted only if it is:

      i. Incurred in the month for which eligibility is being determined, or was incurred in a prior month but was actually paid in the month for which eligibility is being determined and was not a previous

month's client share (recipient liability) or was not previously allowed as a deduction or offset of client share;

ii. Provided by a medical practitioner licensed to furnish the care;

iii. Not subject to payment by any third party, including Medicaid and Medicare;

iv. Not incurred for nursing facility services, swing bed services, or **HCBS** during a period of ineligibility because of a **disqualifying transfer**; and

v. Claimed.

d. The cost of Medicare and health insurance premiums. A health insurance premium may be deducted from income in the month the premium is paid or may be prorated and deducted from income in the months for which the premium affords coverage. For purposes of this deduction, premiums for health insurance include payments made for insurance, health care plans, or nonprofit health service plan contracts which provide benefits for hospital, surgical, and medical care, but do not include payments made for coverage which is:

i. Limited to disability or income protection coverage;

ii. Automobile medical payment coverage;

iii. Supplemental to liability insurance;

iv. Designed solely to provide payments on a per diem basis, daily indemnity, or non-expense-incurred basis; or

v. Credit accident and health insurance.

e. The cost of long-term care insurance premiums, for insurance carried by the recipient or the recipient's spouse. The premium may be deducted from income in the month the premium is paid or prorated and deducted from income in the months for which the premium affords coverage.

f. A deduction of payments made for services of a guardian or conservator may be made, up to a maximum deduction equal to five percent of countable gross monthly income excluding nonrecurring lump sum payments.

4. Payments from any source, which are or may be received as a result of a medical expense or increased medical need, such as health or long-term care insurance payments, VA Aid and Attendance, VA homebound benefits intended for medical expenses, or VA reimbursements for unusual medical expenses, must be added to the remaining income to determine client share.

6. Disregarded Income 510-05-85-30-Change

(N.D.A.C. Section 75-02-02.1-38.2)

This section applies to the following:

- Individuals residing in their own home;
- Individuals in a specialized facility;
- Individuals on Medicare Premium Assistance Program 510-05-60;
- Individuals on Workers with Disabilities 510-05-57 or Children with Disabilities 510-05-58 coverages.

This section does not apply to the following:

- Individuals receiving psychiatric or nursing care services in a nursing facility, the state hospital, a Psychiatric Residential Treatment Facility (PRTF), an intermediate care facility for the intellectually disabled (ICF-ID), or receiving swing-bed care in a hospital. Refer to the Post Eligibility Treatment of Income section 510-05-85-25 when determining eligibility for these members.

1. Money payments made by the Department, another state, or tribal entities in connection with the State LTC Subsidy program, foster care, subsidized guardianship, or the subsidized adoption program (does not include Casey Family, or other private foster care payments)

2. Court Ordered Child Support payments and Social Security Survivor income for a child under age eighteen years and enrolled in a Medicaid waiver under section 1915c of the Social Security Act.

3. County general assistance that may be issued on an intermittent basis to cover emergency type situations;

4. Income received as a housing allowance by programs sponsored by the United States Department of Housing and Urban Development and rent supplements or utility payments provided through the Housing Assistance Program;

5. Income of an individual living in the parental home if the individual is not included in the Medicaid unit.

6. Educational loans, scholarships, grants, awards, Workforce Safety & Insurance vocational rehabilitation payments, and work study received by a student. See 510-05-85-15 (Unearned income) for treatment of student income received from the Veteran's Administration; or any fellowship or gift (or portion of a gift) used to pay the cost of tuition and fees at any educational institution;

7. In-kind contributions, except in-kind contributions received in lieu of wages.

8. Per capita judgment funds paid to members of the Blackfeet Tribe and the Gross Ventre Tribe under Pub. L. 92-254, to any tribe to pay a judgment of the Indian claims commission or the court of claims under Pub. L. 93-134, or to the Turtle Mountain Band of Chippewa Indians, the Chippewa Cree Tribe of Rocky Boy's Reservation, the Minnesota Chippewa Tribe, or the Little Shell Tribe of Chippewa Indians of Montana under Pub. L. 97-403;

9. Compensation received by volunteers participating in the ACTION program as stipulated in the Domestic Volunteer Service Act of 1973, including the National Senior Volunteer Corps, including Retired Senior Volunteer Program (RSVP), Foster Grandparents, and Senior Companion Program; National Volunteer Programs to Assist Small Businesses and Promote Volunteer Services by Persons with Business Experience; Volunteers in Service to America (VISTA) (now AmeriCorps*VISTA, not to be confused with AmeriCorps, a separate program), VISTA Literary Corps;

10. Benefits received through the Low-Income Home Energy Assistance Program;

11. Training funds received from Vocational Rehabilitation;

12. Training allowances of up to thirty dollars per week provided through a tribal native employment works program, or the Job Opportunities and Basic Skills Training program;

13. Income tax refunds and earned income credits;

14. Needs-based payments, support services, and relocation expenses provided through programs established under the Workforce Innovation and Opportunity Act (WIOA), and through the Job Opportunities and Basic Skills program;

15. Income derived from submarginal lands, conveyed to Indian tribes and held in trust by the United States, as required by Pub. L. 94-114;

16. Income earned by an eligible child (not a caretaker, spouse, or pregnant woman) who is a full-time student, or a part-time student who is not employed one hundred hours or more per month. The earnings of an eligible child are counted if the child is a part time student who is employed full time;

17. Payments from the family subsidy program;

18. Fifty dollars per month of current child support, received on behalf of children in the Medicaid unit, from each budget unit that is budgeted with a separate income level;

19. Payments made to recipients under title II of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970;

20. Tax-exempt portions of payments made as a result of the Alaska Native Claims Settlement Act;

21. Payments to certain United States citizens of Japanese ancestry, resident Japanese aliens, and eligible Aleuts made under the Wartime Relocation of Civilians Reparations Act;

22. Agent Orange payments;

23. A loan from any source that is subject to a written agreement requiring repayment by the recipient (which includes a reverse mortgage payment);

24. The Medicare part B premium refunded by the Social Security Administration;

25. Crime Victims Reparation payments;

26. Temporary Assistance for Needy Families (TANF) benefit and support services payments made by the Department or another state;

27. Lump sum SSI benefits in the month in which the benefit is received (subject to the asset limits in the months thereafter); German reparation payments made to survivors of the holocaust, and reparation payments made under sections 500 through 506 of the Austrian General Social Insurance Act;

29. Assistance received under the Disaster Relief and Emergency Assistance Act of 1974 or some other federal statute, because of a presidentially declared major disaster (including disaster assistance unemployment compensation), and interest earned on that assistance. Comparable assistance received from a state or local government, or from a disaster assistance organization is also excluded;

30. Refugee cash assistance or grant payments;

31. Payments from the Child and Adult Food Program for meals and snacks to licensed families who provide day care in their home;

32. Extra checks received by individuals who are paid weekly or bi-weekly. The check may be from earned (but not self-employment) or unearned income. The last check received in the month is always considered the extra check. For individuals paid weekly, it is the fifth check and for individuals paid bi-weekly, it is the third check. Bonus checks, or checks for any other reason, are not considered extra checks;

33. All income, allowances, and bonuses received as a result of participation in the Job Corps Program;

34. Payments received for the repair or replacement of lost, damaged or stolen assets;

35. Homestead tax credits;

36. Training stipends provided to victims of domestic violence by private, charitable organizations, such as the Seeds of Hope Gift Shop, or the Abused Adult Resource Center, for attending their educational programs;

37. Allowances paid to children of Vietnam veterans who are born with Spina Bifida, or to children of women Vietnam veterans who are born with certain covered birth defects;

38. Netherlands Reparation payments based on Nazi, but not Japanese, persecution during World War II, Public Law 103-286;

39. Radiation Exposure Compensation, Public Law 101-426;

40. Interest or dividend income from liquid assets;

41. Additional pay received by military personnel as a result of deployment to a combat zone;

42. Occasional small gifts;

43. Money received by Indians from the lease or sale of natural resources, and rent or lease income, resulting from the exercise of federally-protected rights on excluded Indian property, is considered an asset conversion and is therefore not considered as income (even if the money is taken out of the IIM account in the same month it was deposited into the account). This includes distributions of per capita judgment funds or property earnings held in trust for a tribe. This does not include local Tribal funds that a Tribe distributes to individuals on a per capita basis, but which have not been held in trust by the Secretary of Interior (e.g., tribally managed gaming revenues - which is countable income);

44. Medicare Part D premiums, co-payments, and deductibles refunded by prescription drug plans;

45. For periods after October 1, 2008, all wages paid by the Census Bureau for temporary employment related to census activities will be disregarded as income;

46. The first $2,000 received by an individual age 19 and over as compensation for participation in a clinical trial for rare diseases or conditions meeting the requirements of Section 1612(b)(26) of the Act. This disregard is only allowed if approved by the Medicaid Eligibility Unit.

47. Monthly food coupons distributed to individuals age 55 and over from the Sisseton-Wahpeton Oyate Lake Traverse Reservation Food Distribution program.

48. Payments distributed by the Emergency Rent Assistance Program (ERAP).

49. Reimbursements from an employer, training agency, or other organization for past or future training, or volunteer related expenses are disregarded from income. Reimbursements must be specified for an identified

expense, other than normal living expenses, and used for the purpose intended.

Examples of disregarded reimbursements include:

a. Reimbursements for job or training-related expenses such as travel, per diem, uniforms, and transportation to and from the job or training site;

b. Reimbursements for out-of-pocket expenses of volunteers incurred in the course of their work.

50. Disbursements from The People's Fund and General Disbursements to members of the Mandan, Hidatsa, Arikara (MHA) Nation also known as Three Affiliated Tribes (TAT) come from natural resources (oil and gas royalties), therefore are disregarded income.

51. SSI income is not counted in the QMB, SLMB or QI-1 budget.

NOTE: Income received by Native Americans from the sale or lease of natural resources cannot be requested.