

Iowa Department of Health and Human Services Attribution of Resources Appeal Summary

Appeal Number		Worker No.	County No.		
Name of Spouse in Facility or Waiver			Birth	Birthdate	
Name of Spouse at Home		Age on Date of Appeal	Birth	Birthdate	
Date of Application for Attribution Date of Application		for Assistance	Date	Date Appeal was Filed	
Date institutionalized spouse entered med approves waiver:	dical institution (incl	udes hospital, nursing fa	cility care	, etc.), or date IFMC	
Date the waiver applicant met level of car organization:	e criteria in a medi	cal institution as establish	ned by the	e peer review	
Total of current combined resources (if different from attribution amount):				\$	
A. Minimum monthly maintenance needs allowance as of the date of the appeal.			A	\$	
3. Community spouse gross income not deri	ved from countable	resources:			
Social Security (gross)					
Employment (gross wages)					
Private Pension					
IPERS					
Other Income (specify):					
			В		
C. Available income from institutionalized spouse to community spouse if entered a facility or waiver on or after February 8, 2006. Should be zero if entered before February 8, 2006.			С		
D. Total monthly income (B + C)			D		

At least one quote must be obtained from an insurance company for single-premium immediate lifetime annuities that will provide the community spouse a monthly payment equal to the shortfall of income from the minimum monthly maintenance needs allowance as of the date of the appeal. The bids shall be for life annuities with no remainder or term-certain payments.

Ε

AN ANNUITY DOES NOT NEED TO BE PURCHASED BY THE APPLICANT OR THE COMMUNITY SPOUSE. The annuity estimate is used to determine the amount of resources needed to provide the community spouse with an adequate monthly income.

ATTACHMENTS:

- 1. Application for attribution and application for assistance (if applicable).
- 2. Copy of the annuity bid.

E. Shortfall of income (A - D)

- 3. Information regarding any questionable resources (if applicable).
- 4. Other evidence the parties wish to submit (if applicable).

Calculate!

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