

Guidance Manual for

State/County Special Assistance In-Home and Transitions to Community Living Initiative

Section A

What is State County Special Assistance In-Home (SA/IH)

SA/IH provides a cash supplement to help low-income adults who are at risk of placement in a licensed residential care setting to reside in a private living setting. The payments are intended to help maintain the individual's health and safety while residing in the community.

The payment source for SA/IH is 50% state and 50% county funds and is intended to assist with the provision of daily necessities such as food, shelter, essential clothing, utilities, transportation, and other services directly related to the individual's health and safety. The SA/IH payment must not replace the formal and informal services and supports available to an individual.

SA/IH is administered through the county department of social services (DSS) where the individual is a private living resident. Eligibility is determined by the income maintenance staff. The Division of Aging and Adult Services (DAAS) provides oversight of the SA/IH program at the state level. This includes policy implementation and program administration and assuring that the payments are used for the intended purpose.

Through the settlement agreement between the State of North Carolina and the US DOJ (referred to as **the NC Transition to Community Living Initiative (TCLI)**), **the State has agreed to develop and** implement effective measures to prevent inappropriate institutionalization. The State also agreed to provide adequate and appropriate public services and supports identified through person-centered planning in the most integrated setting appropriate to meet the needs of individuals with SMI [serious mental illness], who are in or at risk of entry to an adult care home. The State has chosen to utilize the SA/IH program to help meet this requirement. The LME/MCO staff or staff employed under contract with the LME/MCO have the responsibility of assuring that, if appropriate, the TCLI individual apply for SA/IH and that the SA/IH benefit payment is necessary for health and safety reasons. The staff working with the TCLI individual is responsible for assuring that the payment is used as intended and agreed upon and that he/she meets ongoing eligibility requirements. Please see Section K for information on program review by DAAS.

Section B

Eligibility Criteria and Requirements for SA/IH

- I. **Level of Care:** A valid [NC Adult Care Home FL-2](#) indicating the need for licensed residential level of care including domiciliary, supervised living, group home, or adult care home must be completed, signed and dated by a physician, physician's assistant or nurse practitioner.

The date of the signature of the health care provider on the FL-2 may not be over 12 months.

If the current FL-2 is not complete or is going to expire within a short timeframe, a new one will be required and must be provided to the DSS. **A valid FL-2 is required for ongoing eligibility.**

Therefore, whenever an FL-2 expires because the health care provider's signature is over 12 months, a new one must be obtained prior to the expiration and submitted to the income maintenance caseworker. If an individual is not already in an adult care home, a new FL-2 dated within 90 days prior to the SA/IH application date must be obtained and submitted to the DSS.

- II. **Age or Disability:** An individual must be age 65 or older or be determined disabled or legally blind by Social Security standards. An individual receiving Supplemental Security Income (SSI) or Social Security benefits based on a disability meets the criteria.
- III. **Medicaid Eligibility:** The individual must meet all eligibility requirements for Adult Medicaid under Categorically Needy (CN) guidelines including income and resources limits. The income limit is 100% of the federal poverty level and can change annually. Countable resources for an individual must be \$2,000 or less. These income levels and resource limits must be maintained during the period of eligibility.
- IV. **Must be a resident of NC. Must have lived in NC for at least 90 days.**
- V. **Need: The individual has a documented financial need related to health and safety.** This is verified through an [Economic Assessment](#) conducted by a social worker or a care coordinator or worker affiliated with the Local Management Entity /Managed Care Organizations (LME/MCO.)
- VI. **Can Safely Live in Private Living Arrangement:** The social worker or worker or provider affiliated with the LME/MCO determines and documents that the individual can live safely in a private living arrangement with services, supports and the SA/IH payment.

Section C

Accessing SA/IH for Transitions to Community Living (TCLI) Individuals

I. How the County DSS Learns of the Individual's TCLI Housing Slot:

The NC Division of Aging and Adult Services (DAAS) receives a list of the TCLI authorized housing slot names regularly from the TCLI Team at DHHS. DAAS contacts the adult services supervisor at the DSS and provides information to both the current SA County of Eligibility and the county DSS in the desired city(ies) for housing as indicated by the LME/MCO based on the individuals stated preferences. The adult services supervisor informs the income maintenance staff of the name of the individual receiving a TCLI housing slot. **It is important for the LME/MCO to indicate all counties of interest when submitting the individual's name to DHHS for a TCLI housing slot.**

If the LME/MCO requests SA/IH for an individual with a TCLI housing slot, the DSS staff should assure that an SA/IH slot is available. The DSS request additional slots from DAAS. Those slots can be assigned quickly if the DSS does not have slots available.

II. Applying for SA/IH for an Individual: In-Reach Process

When an individual is residing in an adult care home (ACH) he/she may already be receiving Special Assistance to help pay for the ACH. The LME/MCO transition coordinator or care coordinator shall discuss the SA/IH Program with the TCLI individual. If the individual is interested in living independently in the community, and may have a need for additional financial assistance, the coordinator must contact the county DSS where his/her Medicaid originates. Unless the individual receives SSI, Medicaid CN eligibility may change once the individual moves from the ACH into a private living setting.

Early and frequent communication with the DSS income maintenance eligibility staff regarding the transition to private living and eligibility for Medicaid Categorically Needy (CN) is critical to avoid interruption or termination of benefits.

- A. When an individual indicates the desire to transition, and it may be appropriate to receive SA/IH, the LME/MCO transition coordinator or care coordinator shall:
 1. Obtain a signed release of information statement from the individual, which will allow the DSS to release information about his/her information and eligibility.
 2. Begin the determination of the initial need for enrollment in the SA/IH Program. The LME/MCO transition coordinator should explore all other resources before applying for SA/IH.
 3. Initiating SA/IH When the Individual is Receiving SA and Medicaid in the ACH

When the individual is receiving SA and Medicaid in the facility and moves into approved housing, in order to expedite the SA/IH and avoid interruption of the SA payments, contact the DSS income maintenance staff as soon as it is determined that he/she may be appropriate for SA/IH. If SA/IH is appropriate, based on the initial assessment, assist the individual with contacting the DSS income maintenance eligibility staff in the SA/Medicaid county of eligibility to initiate the process of SA/IH eligibility determination. The county of SA/Medicaid eligibility may not be the county in which the ACH is located.

- i. Contact the DSS income maintenance or Medicaid supervisor and request SA/IH for the individual. If he/she is currently receiving SA/Medicaid, and will continue to be Medicaid eligible in the community, the case can be transferred from SA to SA/IH

- without interruption, if he/she is otherwise eligible and the DSS worker is contacted timely. Inquire what is needed to further process the change from SA to SA/IH.
- ii. After the direct contact with the DSS income maintenance or Medicaid supervisor, **use Interagency Communication Form, [Appendix E Supplement 2](#), to communicate with the DSS to follow up.** Complete this form to provide official communication documentation. Check the box “Request SA/IH Eligibility” and complete other sections as needed.
 - iii. The DSS has been instructed to respond via the [Appendix E Supplement 1](#) within 5 days regarding presumptive eligibility for Medicaid CN, SA/IH presumptive eligibility and potential **maximum** SA/IH payment. If the individual receives SSI, he/she will continue to receive Medicaid CN in private living.
4. Inform the DSS if the individual is interested in moving to another county in order to verify that a Supported Housing Slot has been assigned by DHHS. If the transition coordinator has listed the desired county on the TCLI Housing Slot List that is submitted to DHHS, contact the DSS income maintenance eligibility staff in the desired county of residence and provide information on the progress of the application in the county of SA/Medicaid origin. If the county of interest has not been listed on the TCLI Housing Slot list, and therefore may not have been notified by DAAS staff, contact the TCLI Community Mailbox at Community@dhhs.nc.gov.
 5. Assure that a current valid [Adult Care Home FL-2](#) is available and provided to the DSS. See Eligibility Criteria and Requirements for SA/IH in Section B 1. above.
 6. Provide the private living address to the DSS caseworker once the individual has moved from the ACH. Use the [Interagency Communication Form, Appendix E Supplement 2](#) to communicate this and other changes or requests.
 7. Inform the income maintenance caseworker that the LME/MCO must receive the eligibility notices sent to the individual.
- B.** The DSS begins the process of evaluating this individual for the SA/IH program. Because Medicaid eligibility is a requirement for SA/IH, the income maintenance caseworker will assess the individual’s financial eligibility for Medicaid in a private living setting. Once a determination is made, the DSS will communicate with the LME/MCO Transition Coordinator via the SA/IH Case Management Manual, [Appendix E Supplement 1](#) indicating the potential for SA/IH eligibility, the authorization number, gross income and the **maximum amount of SA/IH the individual will be eligible to receive once he/she is a private living resident, if all eligibility criteria are met.** The DSS county of SA/Medicaid origin can transfer the case to another county DSS, if the individual

moves into private living in a different county. Contacting the county of SA/Medicaid origin helps assure that the SA/IH payment and Medicaid will not be interrupted.

- C. **Conduct an [Economic Assessment](#).** Once the LME coordinator receives communication from the county DSS of the potential eligibility and the *maximum* payment amount the coordinator can conduct the [Economic Assessment](#). The SA/IH Program provides a monthly payment intended to meet the specific needs of each individual. The [Economic Assessment](#) must be completed to determine the portion of the maximum payment each individual may receive. The final recommended payment amount will depend on this [Economic Assessment](#) and should be transmitted to the DSS via the [Appendix E Supplement 2](#).
 - 1. Once the DSS receives the [Appendix E Supplement 2](#) with the LME coordinator's recommended payment amount up to the maximum and notification that the individual has moved to a private living setting, the county can complete the SA/IH eligibility process.
 - 2. Follow up with the DSS contact to assure that the application is in progress and that all information needed has been received by the DSS.
- D. Once the county DSS has all the required information, the DSS will notify the individual and any person listed as the authorized representative in writing of the SA/IH payment amount. In situations where the original SA County of origin is not the county where the individual will be currently living, the approval process may take additional time, so it is imperative to keep the county DSS informed.

III. Obtaining SA/IH for an Individual Not currently placed in an ACH

Responsibilities of the LME/MCO and county DSS of Medicaid Origin:

- A. An application for SA/IH must be made at the Medicaid County of origin, or current private living county.
- B. If LME/MCO applies on behalf of individual, DSS will need a statement from her/him authorizing this along with a signed release of information.
- C. A current, valid FL-2 is required. The FL-2 must be dated within 90 calendar days prior to the date of the SA/IH application.

Section D
The Economic Worksheet

- I. Use the DAAS SA/IH [Economic Assessment](#) and [INSTRUCTIONS](#) (Appendix I.1 and at the end of this document)
- II. Explore regular monthly expenses and expenditures with the individual. Use the [Economic Assessment](#) to determine expenses that are essential for health, safety and basic needs.
- III. Do not arbitrarily divide the monthly household bills by the number of adults living in the household. Document the expenses paid by the individual requesting the SA/IH payment.
- IV. Explore unusual expenses reported by the individual and if necessary request to see documentation of the expenses.
- V. Document all resources available to the individual including the \$2000.00 TCLI transition funds. Keep in mind that SA/IH is a last resort source of payment and the SA/IH funds cannot replace existing resources available to the individual.
- VI. Remember that each individual is allowed a \$66.00 Personal Needs Allowance and that this money is disregarded when calculating the individual's income.
- VII. If a deficit is indicated on the [Economic Assessment](#), determine the SA/IH payment needed by the individual. The payment amount requested may not exceed the maximum payment amount (this amount provided by the income maintenance caseworker).
- VIII. Have the individual sign the [Economic Assessment](#) indicating agreement with the spending plan and as an acknowledgment that failure to follow the spending plan could result in reduction or termination of benefits.
- IX. Notify the income maintenance caseworker of the amount of the recommended SA/IH payment. Use [Appendix E Supplement 2](#) for this transmittal.

Section E
Uses of the SA/IH Payment

- I. The SA/IH payment is to be used to ensure that the health, safety and basic needs of the individual are met.

- II. Use the list below to help identify needs that may be addressed by the SA/IH payment. This list is not all inclusive.

Medications	Medical supplies	Personal hygiene items
Co-payments for medical appointments and services	Home repairs or modifications necessary to maintain safety	Adult Day Health/Adult Day Care
Nutritional supplements	Property taxes	Yard maintenance
Incontinence supplies	Smoke detectors	Household items
Mental health treatment and services	Extermination services for removal of pets and vermin	Essential technology for communication (Lifeline; Telephone Alert,)
OTC recommended by the PCP	Home alarms	Corporation/Company Payee fees for administering benefits
Additional PCS hours	Essential clothing	Pre-need Burial insurance
Durable medical equipment not covered by insurance	Chronic disease management/monitoring	Annual inspections related to heating and cooling and other safety inspections
Utility payments	Appliance Purchase or repair/replace damaged appliance	Vehicle insurance and repairs when used for individual's primary transportation
Dental needs	Rental or mortgage payments	Essential Transportation
Eye care	Essential furnishings	Cleaning services
Cleaning supplies	Food	

- III. SA/IH funds should not be “banked” for future use without a definite documented plan for the use of the funds. For example, the individual may need to save for higher winter heating costs or to replace an appliance.

- IV. The SA/IH payment should **NOT be used for the following items:**

Cable Bills	Purchases for others (gifts, bail bonds, etc.)
Internet service	Life Insurance not designated for burial expenses
Purchase of entertainment items such as televisions, stereos, IPADs	Cigarettes/Alcohol
Non-essential home repairs or modifications	Spending money
Automobile purchases	Debt repayment

There may be exceptions if there is clear documentation from the medical or mental health provider that certain items have a therapeutic benefit for the individual.

- V. If it is discovered that SA/IH payments have been authorized for prohibited items or services, the LME/MCO has 30 days to notify the income maintenance caseworker and make an adjustment to the payment using [Appendix E, Supplement 2](#) for this transmittal.
- VI. Adjustments may be made at any time to the amount of the SA/IH payment. Send the requested increase or decrease in the payment amount to the income maintenance caseworker using [Appendix E, Supplement 2](#).

Receipt of Payments

- I. All SA/IH payments are paid electronically. An individual may choose either Direct Deposit into a bank account or to have the payment available on an EBT card. Please see [DAAS Administrative Letter 2013-11](#) for more information on electronic benefits.
- II. The SA/IH payment is paid directly to the individual unless he/she is unable to handle his/her own finances or already has a substitute payee.
- III. If no substitute payee services are in place but one is needed for the individual, the LME/MCO Transition Team is responsible for requesting a payee arrangement prior to the individuals' move. Fees charged by a company/corporation serving as a payee for the individual are an allowable expense for use of SA/IH funds. Private individuals may not be reimbursed for serving as payee.
- IV. No receipts are required to be kept by the individual unless misuse of the SA/IH payment is suspected by the ACTT, Community Support or Tenancy Support staff.
- V. Payees must keep receipts for each payment disbursement until the ACTT, Community Support or Tenancy Support staff completes the SA/IH Payment Tracking Report for the months of disbursement.

Section G Ongoing Support and Oversight

- I. ACTT, Community Support and Tenancy Support staff will visit the SA/IH individual as often as needed but no less than one time per month.
- II. During the monthly visit, review the SA/IH payment plan to determine if supports and services funded with the SA/IH payment are being provided as authorized and meeting the needs of the individual.
- III. Oversight responsibilities also include reviewing the performance of the service provider and the response of the individual to the services provided to see if there is a need to make any adjustments. For example, if the individual requires essential transportation and it is on the SA/IH plan, the effectiveness of the service and service provider must be monitored.
- IV. All monitoring activities and actions taken must be documented in the record of the individual being served.
- V. **The SA/IH payment amount and all services or items purchased with the SA/IH payment for each individual served by the SA/IH program shall be recorded on the SA/IH Payment Tracking Reporting**

System available July 1, 2015. This report is web based and can be accessed by staff using their NCID and password at <https://saihpay.dhhs.state.nc.us/> anytime. This report should be completed for each case monthly. It shall be completed and available for review by DAAS staff no later than the 5th calendar day of the month following the previous month's payments.

(The LME/MCO will designate at least one individual to grant access to coordinators who will have cases with SA/IH. The LME/MCOs and designees should sign up for an NCID as Business Account by going to the NCID webpage at <https://ncidp.nc.gov/pmf/Registration.html>)

- VI. Reporting Changes in Situation: When the Individual Moves, or has another Change in Situation: Ongoing SA/IH case eligibility is determined by the county DSS where the individual is currently living in a private living situation. If after receiving SA/IH, the individual moves to another county, it is the responsibility of the individual and/or their authorized representative to notify the county DSS of the move or any other change in situation. Any changes in the individual's situation can be reported to the DSS via the [Appendix E Supplement 2](#).

Section H
Annual Reassessment and SA/IH Redetermination

- I. The ACTT, Community Support or Tenancy Support staff, using the SA/IH Economic Worksheet, will conduct an annual reassessment of the need for an ongoing SA/IH payment and document the ability of the individual to remain safely in the community.
- II. The income maintenance caseworker must evaluate eligibility for SA/IH annually. The ACTT, Community Support or Tenancy Support staff will need to assist the individual in making sure that a new FL2 is obtained as well as ensuring that all required documentation requested by the DSS SA income maintenance caseworker is provided promptly.
- III. The ACTT, Community Support or Tenancy Support staff should add, change or delete supports based upon the current needs of the SA/IH individual.
- IV. The income maintenance caseworker will provide the maximum payment amount available to the ACTT, Community Support or Tenancy Support staff who will then determine based upon the SA/IH [Economic Assessment](#) what the payment amount needed will be but not to exceed the maximum payment amount. Communication with the DSS SA income maintenance caseworker should be on [Appendix E Supplement 2](#) transmittal form.

Section I
Changes in Situation

- I. ACTT, Community Support or Tenancy Support staff worker must report changes in circumstances to the DSS SA income maintenance caseworker immediately, if possible, but no later than 5 days after the change occurs.
- II. The income maintenance caseworker must be notified if the individual is incarcerated. If incarceration occurs, the termination process for SA/IH will begin.
- III. The SA/IH payment must be evaluated for change or termination when individual moves or is hospitalized, out of state, etc. for more than 30 days. There are no exceptions to this policy.
- IV. After hospitalization or rehabilitation stays the needs of the individual must be evaluated for any necessary change. The FL2 must still be appropriate for SA/IH. If not appropriate then termination must be initiated. If still appropriate, make any changes needed to the payment based upon current needs.
- V. For individuals with SA/IH who transition off the TCLI program for any reason, but who need to continue receiving an SA/IH payment to live safely in the community, oversight of the individual with SA/IH will be continued by the LME/MCO. This oversight includes continued review of the SA/IH payment and assurance that the SA/IH payment is being appropriately used by the individual, monthly contact, completion of the SA/IH Payment Tracking Form, annual reassessment, and assistance completing the annual review with DSS IMC eligibility staff.

Section J
Denials and Terminations

- I. Terminate for SA/IH if individual is no longer eligible for Medicaid.
- II. Terminate if there is no longer a need for the SA/IH payment.
- III. Terminate if the individual fails to meet programmatic qualifications due to:
 - A. Death
 - B. Absent from the home over 30 days
 - C. Move out of state
 - D. Voluntary withdrawal from SA/IH
 - E. Health, safety and well-being can no longer be maintained in the community
 - F. Incarceration

Section K
Program Review

- I. DAAS has responsibility for oversight of the SA/IH Program.
- II. A list of LME/MCO contacts for TCLI SA/IH will be maintained by DAAS for each LME/MCO. It is the responsibility of each LME/MCO to provide notice of any contact changes to DAAS as changes occur during the year.
- III. The SA/IH [Economic Assessment](#) will be reviewed for a random sample of individuals receiving SA/IH with each LME/MCO at least annually by DAAS staff.
- IV. The SA/IH Payment Tracking entries will be reviewed at least quarterly for each LME/MCO.
- V. If DAAS finds that the LME/MCO or its provider is not satisfactorily overseeing the SA/IH payments (i.e., conducting [Economic Assessment](#) as required, communicating change or redetermination information with the department of social services contact, reporting the use of the SA/IH payment for each individual in the SA/IH payment tracking web-based database, or if it is discovered that the fund usage is not related to health and safety needs as required, or if oversight by the LME/MCO or its contractor is not sufficient) DAAS will report findings to DMA. DMA will follow-up with the LME-MCO until DAAS reports improvement has been accomplished by the LME-MCO staff.

Section L
Contacts

- I. Local DSS Directory- <http://www2.ncdhhs.gov/dss/>
- II. TCLI Community Mailbox – Community@DHHS.nc.gov

Special Assistance In-Home Program

Economic Assessment Worksheet

Instructions

The Economic Assessment Worksheet is a tool to be used to determine resources available to meet the client’s health and safety needs. It is used to assess any unmet financial needs that are required to assist the client to live safely in a community living setting. It also serves as a means to document what the SAIH payment is to be used for and serves as an agreement between the client and SAIH Program that the SAIH funds will be used as indicated.

Section A: Income and Expenses (Page 1 and 2)

Monthly Income

- List all income available to the client. Income source could include;

Social Security	Salary/Wages/Earnings
SSI	Child Support
Veteran’s Benefits	Alimony
Dividends/Interest	General Assistance (DSS)
Railroad Retirement	Tribal Income (prorate)
Pension, other retirement	On-going cash from others
Energy Assistance (prorate)	Rental Assistance*

List these under monthly income sources as these benefits help meet monthly essential expenses. For easy reference, these are also listed on page 2 of the Economic Assessment Worksheet. There may be other sources of income not listed.

- Enter the total income amount in Section J. 1.
NOTE: Per Federal Regulation: Food and Nutrition Act 2008 do not count Food and Nutrition Services as income.

Federal Regulation: Food and Nutrition Act 2008

Value of Allotment; Sec .8. (7 U.S.C. 2017)

(b) The value of benefits that may be provided under this Act shall not be considered income or resources for any purpose under any Federal, State, or local laws, including, but not limited to, laws relating to taxation, welfare, and public assistance programs, and no participating State or political subdivision thereof shall decrease any assistance otherwise provided an individual or individuals because of the receipt of benefits under this Act.

Monthly Expenses

This part of the assessment requires that the client is made aware that certain expenses are considered non-essential for the SAIH program and cannot be counted toward the total amount of expenses that will be used to determine the SAIH payment. Clients may need to make choices to forgo certain expenses in order to have their needs met to remain safely in the community.

There are columns for “essential expenses” and “non-essential expenses.” List items according to the category in which they belong. Examples of essential expenses include:

Rent*	Laundry
Basic Utilities	Medical bills/prescriptions and co-pays
Food	Essential insurance premiums (prorate)
Clothing (prorate to reasonable monthly amount)	
Transportation costs related to health and safety needs	

Page 2 of the worksheet also provides examples of essential and non-essential expenses for reference.

The client is allowed a \$66 per month Personal Needs Allowance (PNA) as are those individuals receiving SA in a licensed residential facility. The \$66 amount is added in the essential column and may be applied to any items or services the client wishes to purchase that are considered non-essential.

*Rent: If rental assistance is included as income then list the entire rent in section A under monthly expenses. If rental assistance is not included as income, then only list the amount of rent for which the client is responsible.

Unmet Essential Needs

- These are items or services not accounted for in the essential expenses column that the client needs for health and safety. This might include one-time expenses, short-term needs or a new service to which the client has not yet had access, but is an essential need. This might be a deposit for housing or electrical, or other services such as additional in home aide hours.
- List the item and the amount on page 1. If it is a one-time or short-term expense the SAIH payment amount will need to be adjusted. Document this on page 4 of the Economic Assessment Worksheet in the SAIH computation Section J.

Section B: Medical Insurance Coverage (Page 2)

- Gather information about the client's access to medical coverage and cost to client, if any. Include this in the essential monthly expenses on page 1 of the worksheet. Clients eligible for SAIH must also be eligible for full Medicaid, but may have other health insurance coverage.

Section C: Other Resources (Page 3)

- Verify and document other resources available to the client. Explore how these resources can be used to meet unmet needs. Document how they can be used or why they are not being used in Section G. on page 3 of the worksheet.

Section D through I: Documentation of Other Economic Information (Page 3)

- Document other economic information as indicated. This information should be used to assist the client in accessing all resources available to him/her and will reveal any issues that require follow-up.

Section J: Computation of the SAIH Payment (Page 4)

- The computation of the SAIH payment is documented in this section. The DSS IMC will communicate the maximum payment amount. Base the authorized payment amount on any deficit identified when comparing essential monthly expenses to available

income along with any other unmet financial need. Document the SAIH **maximum** payment based on the DSS Income Maintenance Caseworker communication on the first line.

Section K: Special Assistance In-Home Payment Agreement (Page 5)

- Based on computation in Section J, enter the SAIH authorized payment amount. Document the unmet need and monthly amounts for which the SAIH payment will be used. Note that total cannot exceed maximum authorized amount. The SAIH Payment cannot be used for:
 - Automobile Purchases/Car payments
 - Alcohol/Tobacco Products
 - Purchases for Others/Gifts
 - Spending Money
 - Costs associated with pet care
- Explain to the client that the SAIH funds are to be used only for the items listed. Review these items with the client and obtain the client's signature. Inform the client that failure to use the SAIH payments as indicated could result in reduction or termination of the SAIH payment.
- The worker must also sign and date the worksheet upon completion of the assessment. The client should be given a copy of Section K.
- Changes to the SAIH Payment prior to the annual economic reassessment will be documented here. The worker and client must date and initial these changes.
- The economic worksheet will be reviewed with the client during each review and changes made if needed. The worker and client must date and initial these changes.