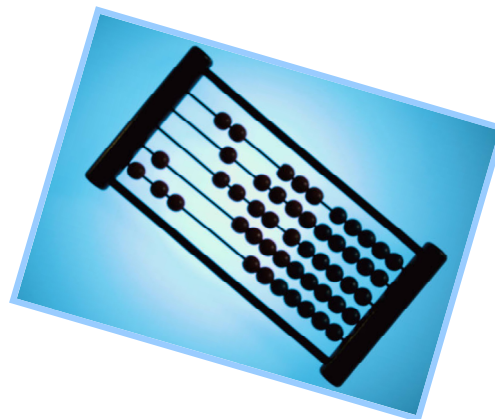


RMD Bulletin

Knowledge is power...

PFI & YBN

Make Sure the Numbers Match!



Revenue Management Division (RMD) is issuing this Bulletin to remind clinic staff that when enrolling clients into Healthy Way LA (HWLA), the income amount reported to Your Benefits Now (YBN) must match the amount on the Payer Financial Information (PFI) form. The Adjusted Monthly Income calculation, Box 21 of the PFI, must be supported with proof from the client's current financial documents. Also, keep in mind that if a client has **earned income**, the Healthy Way LA Earned Income Deduction form (attached) must be completed and a copy provided for RMD.

Please note that if there is not appropriate proof of income or there are differences between the amounts on the PFI, YBN, and/or clients' documentation, then the client's application for HWLA will be placed in pending status until the proper corrections have been made.

We're here to help you...

If you have any questions or require further information, please do not hesitate to contact RMD at (213) 480-3444 or RevenueManagement@dmh.lacounty.gov.

**LOS ANGELES COUNTY - DEPARTMENT OF MENTAL HEALTH
REVENUE MANAGEMENT DIVISION**

HEALTHY WAY LA EARNED INCOME DEDUCTION

Use the client's current Payer Financial Information (PFI) form, current income situation, and the chart below to determine if the client meets the financial criteria for Healthy Way LA. A client's monthly income as documented on the PFI must be equal to or less than the amounts below to qualify for Healthy Way LA. These amounts go up based on the number of people dependent on the client's income.

| Family Size | 133% Federal Poverty Level |
|-------------|----------------------------|
| 1 | \$1239 |
| 2 | \$1677 |

If the client works, deduct \$90 from their Adjusted Monthly Income (Line 21 on the PFI). If the client's income after the \$90 deduction is at or below 133% of the Federal Poverty Level then the client meets the income requirement for Healthy Way LA eligibility. Use the chart below to document the HWLA \$90.00 Earned Income Deduction and attach it to the PFI.

Client Name: _____ DMH ID #: _____

| Healthy Way LA Monthly Earned Income Worksheet | |
|---|-----------------|
| PFI Adjusted Monthly Income (Line 21) | \$ _____ |
| Less HWLA \$90.00 Earned Income Deduction | -\$ _____ |
| Adjusted Monthly Income for HWLA | \$ _____ |

Remember, Department of Mental Health requires income for all applicants to be verified. Income is considered as verified if there is current documentation of the client's income such as a current tax return, pay stubs, or a letter from the client's employer. A signed affidavit from the client is not acceptable as income verification.