

Chapter 2: Eligibility

(iii) Determining Eligibility for Basic Income Support

(c) Income Support Needs Test

Intent:	To identify eligibility for basic income support and special needs income support benefits and how to apply the regulated requirements.
Act: (if applicable)	14. (1) The eligibility of an applicant for income support shall be determined by an officer based on the information provided by the applicant under section 17, and where, based on the criteria prescribed in the regulations, the applicant's assessed need for income support is determined to be greater than his or her income and assets, that person shall be considered to be eligible for income support.
Regulations:	<p>9. (1) A person shall, in accordance with section 13 of the Act, pursue all other financial resources available to the person or the person's spouse or cohabiting partner as a condition of eligibility for income support.</p> <p>(2) An applicant's eligibility for income support shall be determined based on an examination of the applicant's liquid assets and if those assets exceed the limits referred to in section 26, the applicant shall not be eligible for income support.</p> <p>(3) Where an applicant's liquid assets do not exceed the limits referred to in section 26, an applicant's eligibility for income support shall be determined by evaluating the applicant's financial situation for the 30 days preceding the date of application according to the following formula:</p> $BR + (.40 \times BR) + CBA \text{ is } ? \text{ I} - D$ <p>Where:</p> <p>BR = the amount for maintaining a residence referred to in subsection 13(1), plus the amount for shelter referred to in paragraph 16(1)(a) or (b) if applicable, for the 30 day period before the date of application, or the amount referred to in subsection 14(1) or (2) for the 30 day period before the date of application;</p> <p>CBA = a child benefit adjustment referred to in paragraph 19 (1)(g) if the applicant is entitled to it;</p>

I = the applicant’s total net income calculated according to paragraphs 8(c) and 8(d) minus the deduction for expenses incurred in earning that income referred to in section 11; and

D = the deduction referred to in section 11.

(4) An applicant who is not entitled to income support according to subsection (3) may be reconsidered on the date on which the applicant's income during the preceding 30 days has decreased to the level set out in subsection (3).

(5) Notwithstanding another provision of this section, where an applicant is applying for income support due to job action at the workplace, the applicant shall not be eligible for income support.

Overview: N/A
(if applicable)

Policy: (100) General

There are two needs tests used in the Income Support Program to determine eligibility for benefits and services.

Eligibility Assessment for Basic Benefits

- The most commonly used needs test is the eligibility assessment to determine basic Income Support benefits. This assessment takes into account the income of the applicant and family during the past 30 days and establishes an eligibility date. For applicants identified as eligible, the benefits they receive may be different from the requirements used to determine an eligibility date. For example, if living in an NLHC unit, the actual rent paid is used to determine eligibility but once deemed eligible; the fixed NLHC rates for Departmental recipients is used.

Eligibility Assessment for Special Needs Benefits

- The needs test used when applicants are requesting a specific item (i.e. vision care, hearing aids or burials) takes into account income for the past 30 days, and considers the basic Income Support requirements as well as the cost of the item being requested.
- These needs tests are only completed where the applicant’s liquid assets at the time of application fall below the prescribed rates defined in the IES Regulations.

(200) Needs Test when there has been no Income or an Income Source is Reduced or Terminated

Determining an Eligibility Date

- Applicants must complete the Application for Income Support.
 - Income Support benefits are provided only after all other possible income sources have been explored and/or exhausted.
 - Applicants are eligible for Income Support benefits when their liquid assets fall under the permissible amounts, as defined in Regulations and the total cost of their requirements plus the adjustment exceed their income (partially exempt income and non-exempt income).
 - Income Support benefits are only provided to a person(s) who is eligible as determined by the eligibility assessment. This test includes all income and requirements of the family as identified in the IES Regulations.
 - The eligibility assessment is used to calculate the applicant's requirements and their resources in order to determine an eligibility date. The Client Services Officer (CSO) totals the requirements of the applicant(s), using the rates defined in Regulations, plus a 40% eligibility adjustment, and compares it to the income of the applicant(s) for the 30 days previous to the date of application.
 - Eligible requirements which may be included in the assessment are identified in Regulation 9 of the IES Regulations.
 - Full verification of the applicant's resources (liquid assets and income) is required.
 - The applicant may be eligible on the date of application or may have a future eligibility date determined by CAPS. The future eligibility date cannot be more than 30 days from the date of the current application.
 - In order for CAPS to accurately determine a future eligibility date, it is critical that CSO's record income for the correct covering periods and the correct frequency (i.e. weekly vs. bi weekly vs. one-time etc).
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- Initially CAPS will total all income received in the past 30 days and compare it to the total requirements for the same period. If an applicant is not eligible on the date of application, CAPS will then prorate the income over the period in which the income was received and assess the income within the 30 day assessment period to determine an eligibility date.

(300) Needs Test When Ongoing Income Cannot Meet the Cost of a Requirement

- There are three areas when this needs test would be used:
 - Hearing Aids
 - Vision Care
 - Burials
- Applicants must complete the Application for Income Support.
- Eligibility is established for these items by totaling the basic requirements, adding in the cost of the specific item requested and deducting the resources of the applicant(s) for the past 30 days.
- Assuming there will be no change in the requirements and resources of the applicant(s), the requirements and resources are projected ahead for the next 30 days.
- If the total requirements, including the cost of the items requested, are greater than total resources; the applicant is eligible for a contribution towards the cost of the item or the total cost of the item, whichever is less. Note: Once there is eligibility for an item and the request is resolved, the cost of that item cannot be included to determine eligibility for other items.
- If the request is for hearing aids and there is eligibility for at least \$1.00, the CSO can provide an Authorization for Health Benefits to the applicable Regional Health Authority.
- Full verification of the resources (liquid assets and income) and the cost of the non-basic need item are required.
- The CSO must record the information in a case note.
- If it is determined that the applicant is eligible for vision care, any disposable income would be assessed as a contribution towards that item and the case is then considered as equivalent to an Income Support case in terms of resources. As a result, the applicant(s) would be entitled to a drug card for

	<p>the same covering period of eligibility. This would also apply to cases eligible for burial costs where there is a remaining dependent. Please note, that this would not apply to cases eligible only for hearing aids as there is no financial contribution required under this program, and the applicant would have income above IS rates, even after eligibility for the hearing aid is confirmed. These applicants should be referred to the NLPDP for drug card coverage.</p> <ul style="list-style-type: none"> • The CSO must record the information in a case note.
Procedure:	N/A
Authority Level:	Client Services Officer
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