P.O. Box 3599

Topeka, KS 66601-9738
Department of Health
and Environment
Division of Health Cave Finance

## SSI DISREGARD WORKSHEET (Independent Living and HCBS Only)

Case Name:
Instructions: Use this form to compute the SSI income disregard if the applicant(s)/recipient(s) has/have earned income. Only one disregard may be allowed for each assistance plan. Enter dates and amounts in the identifying information and complete either Section I, II, III as appropriate. Attach this form to the PA-3104.5 or the PA3104.6.


