

# GRH: Recording Income and Housing Costs for GA and SSI Recipients

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## Recording GRH Income and Housing Costs

updated 8/20/2010

When looking at GRH client income, there are typically two categories of eligible clients, those eligible for SSI and those eligible for General Assistance (GA).

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**GA:** When we budget a GA client for GRH in the MAXIS system, the budget shows no income and GRH pays the full grant (\$846 as of July 1, 2010). These clients also receive a cash grant from GA of \$89 for their personal needs. The simplest way to enter HMIS information for GA/GRH clients would be to show the \$89 cash grant as income, \$0 rent paid by client, with the rent paid as a full subsidy (\$846).

### GA GRH data entry information:

Income	89
Client rent	0
Subsidy type	GRH Base Rate

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**SSI:** For those GRH clients that receive SSI, the MAXIS system budgets their income less deductions and disregards. For example, SSI pays the clients \$674, and GRH disregards an amount for the person's personal needs and uses the rest as the client share of the GRH grant. The formula is: \$674 minus a personal needs allowance of \$89 (\$109 if SSDI), leaving the client with \$89 in cash and taking \$585 as the client share of the GRH payment. GRH pays \$261 to bring the total paid on behalf of the client to \$846. In this case the GRH subsidy would be \$261.

### SSI GRH: data entry information:

Income	674
Client rent	585
Subsidy Type	GRH Base Rate

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These are the two most common scenarios in GRH. The long-term homeless are mostly GA clients with a potential to get SSI at some point in the future. There are other variables that can come into play such as earned income. SSI and GA treat earned income similarly, but a SSI recipient can earn more and save assets than a GA recipient before their eligibility is affected. Clients losing either their SSI eligibility or their GA eligibility subsequently lose their GRH eligibility.

The next pages show how to enter the correct income and housing cost information on the HMIS forms.

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**7. Income Information - complete for *all adults and unaccompanied youth*. Update twice yearly before running fiscal and calendar-year reports and at exit.**

*Adults & unaccompanied youth:* **Has the client received cash income from any source in the 30 days before entering the program?**

- Yes     
  No     
  Client does not know     
  Client refused to answer

**If yes: Please record the client's cash income in the grid below:**

- Assign an income source to a household member if the source/amount leaves the household when that member departs.
- Do not assign the same income source/amount to more than one person in the same household.

Cash Income at Entry					
	Income Source (enter # from list below)	Last 30 day income	Receiving income source?	Start Date: Client's program entry date _____	End date (record <b>only</b> if income ends or changes)
GA	9	\$89	yes	program entry date	
SSI	3	\$674	yes	program entry date	
			yes	program entry date	
			yes	program entry date	
Cash Income Changes: update twice yearly before running reports and at exit					
	Income Source (enter # from list below)	Last 30 day income	Receiving income source?	Start Date	End date (record <b>only</b> if income ends or changes)
			yes		

**Cash Income Sources:**

- |   |  |
|---|--|
| <p>(1) Earned Income (H)</p> <p>(2) Unemployment insurance (H)</p> <p>(3) Supplemental Security Income (SSI) (H)</p> <p>(4) Social Security Disability Income (SSDI) (H)</p> <p>(5) A Veteran's disability payment (H)</p> <p>(6) Private disability insurance (H)*</p> <p>(7) Worker's compensation (H)*</p> <p>(8) TANF (MFIP) (H)</p> <p>(9) General Assistance (H)</p> <p>(10) Retirement income from social security (H)</p> <p>(11) Veteran's pension (H)</p> <p>(12) Pension from a former job (H)*</p> <p>(13) Child support (H)*</p> | <p>(14) Alimony or other spousal support (H)*</p> <p>(15) Contributions from other people*</p> <p>(16) Interest (bank), dividends, or annuities*</p> <p>(17) MSA/Minnesota Supplemental Aid*</p> <p>(18) Student grants/scholarship*</p> <p>(19) Tribal Funds*</p> <p>(20) Other income source*: _____</p> |
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## LTH Housing Cost Sub-assessment:

- Complete only if the client's current residence is *site-based supportive housing* or *scattered-site supportive housing* (options 1 or 2 in question 17 on previous page)
- Record at program entry; update twice a year before running fiscal and calendar year LTH reports.

	Start Date	End Date	Amount client pays for rent
GA	xx/xx/xxxx		\$ 0
SSI	xx/xx/xxxx		\$585
			\$
			\$

## 18. LTH Housing Subsidy Sub-assessment:

- Complete only if the client's current residence is *site-based supportive housing* or *scattered-site supportive housing* (options 1 or 2 in question 17 on previous page)
- Record at program entry; update twice a year before running fiscal and calendar year LTH reports.
- If the client has no subsidy, select "no subsidy."

	Start Date	End Date	Primary Source of Subsidy (select from list below)
GA	xx/xx/xxxx		4
SSI	xx/xx/xxxx		4

Options for Primary Source of Subsidy:

- |                            |                        |
|----------------------------|------------------------|
| (1) No subsidy             | (8) Property Subsidy   |
| (2) Bridges                | (9) SHP Leasing        |
| (3) County Funded          | (10) Section 8         |
| (4) GRH-Base rate          | (11) Shelter Plus Care |
| (5) HOME                   | (12) Sons of Bridges   |
| (6) HOPWA                  | (13) Other (specify):  |
| (7) MHFA Rental Assistance |                        |