



OKLAHOMA DEPARTMENT OF HUMAN SERVICES



Assessment of Assets

Case name		Case number	County number	
Person in nursing facility, ADvantage, or Home and Community Based Waiver (HCBW)				
Social Security number		Date admitted to nursing facility, ADvantage, or HCBW		
Name of spouse			Social Security number	
Street address	City	State	Zip	Phone

The following resource determination is based on circumstances existing during the beginning month of a continuous period of nursing home care, ADvantage, or HCBW care.

Real estate other than the home

Market value	Amount owed	Equity value	Verification
Legal description			

Mineral rights

Market value	Amount owed	Equity value	Verification
Legal description			

Transfer of property

Market value	Equity value	Amount received	Verification
Date(s) transferred To whom:			

Resources

Resource	Amount or value	Verification
Savings accounts		
Checking accounts		
Annuity		
Certificates of deposit		
Safety deposit box		
Stocks/bonds		
IRA, KEOGH, or other		
Cash not in bank		
Trust fund(s)		
Life insurance		
Prepaid burial		
Automobile		
Farm equipment/livestock		
Other		

The community spouse's share of resources, as determined below, is used as the protected resource limit for that spouse for any subsequent application for continuous Title XIX nursing home, ADvantage, or HCBW care. The protected resource limit for the community spouse will remain in effect regardless of any change in resources. The amount protected is also dependent upon the integrity of the resource information and verification of the resources as presented by the requesting parties or applicants.

Resources jointly owned or owned solely by the institutionalized spouse that are part of the community spouse's protected amount must be transferred to the community spouse. The transfer is required when the institutionalized spouse is approved for Title XIX benefits and must be made within 12 months of the beginning date of Title XIX benefits.

I certify, to the best of my knowledge, that the foregoing information is true, correct, and complete.

Client signature

Date

Right to appeal:

Once application for Title XIX is made, you may request a hearing on the assessment of the resources, the computation of the community spouse's share or the amount protected for the community spouse. You or your authorized representative may contact the local office to request a hearing and to find out what specific verification is required in order to receive an adjustment.

Case name	Case number
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Computation section – OKDHS use only

AMOUNT

- A. Total resource value of both spouses _____
- B. Community spouse’s share (1/2 of total resource value not to exceed the maximum resource standard listed in OKDHS Appendix C-1, Maximum Income, Resources, and Payment Standards, Schedule XI) _____
- C. If the community spouse’s share is less than the minimum resource standard on OKDHS Appendix C-1, Schedule XI), the amount to be deemed to the community spouse is..... _____
- D. Community spouse’s protected share (B plus C)..... _____

_____ Worker signature _____ Date

Phone number _____