Required	MCH FINANCIAL FORM WORKSHEET (MCH-3) (green)
	Purpose: To determine financial eligibility of the family for the program.
	The PHN Care Coordinator will document the income of all those who are living in the household. Also include <u>medical insurance information and child support paid out</u> . The state office will use this information to determine financial eligibility.
	If a client is currently eligible for Medicaid, SSI and/or DD Waiver, household income information does <u>not</u> need to be completed. They would meet our income guidelines.
	Note: Families who may be eligible financially and meet the qualifications of Medicaid, SSI or KidCare CHIP will be required to apply for them and notify us of their eligibility status before MCH will make them eligible for services.
	Completed by: PHN Care Coordinator or family.
	When: At first contact with client/family.
	Retention: Original to state and copy in file.
	Updated: Annually.