

MEDICAID PURCHASE PLAN (MAPP) IMPAIRMENT RELATED WORK EXPENSES (IRWE) WORKSHEET

Member Name	Social Security Number	Filing Date
Worker Number	CARES Case Number	PIN Number

Estimate the individual's annual IRWE expense costs and convert to a monthly amount using the list below as a reference. Ongoing expenses should be calculated using costs from the previous 12 months. At member option, one-time costs may be prorated over a 12-month period or deducted only for the month in which it will be incurred.

A list of IRWEs is on Page 2. This is not a full list.

IRWE Description	Total
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
MONTHLY IRWE TOTAL	\$

Examples of Impairment Related Work Expenses (IRWE):

- Attendant care services (at work, for transportation, other)
- Diagnostic procedures
- Durable medical equipment (plus installation, maintenance, and associated repair costs)
- Essential non-medical appliances and devices (electric air cleaner, etc.)
- Exterior home modifications that allow access to the street or to transportation (ramps, railings, pathways, etc.)
- Interior home modifications which create a work space to accommodate an impairment (enlargement of doorway, etc.)
- Interpreter (at workplace)
- Job Coach
- Medical devices
- Measuring instruments
- Mileage allowance (to and from work)
- Modified audio/visual equipment (enlarged monitor, speech-activated computer, etc.)
- Pacemakers
- Physical therapy
- Prostheses
- Reading aids
- Regularly prescribed medical treatment or therapy and physician's fees associated with this treatment
- Respirators
- Routine prescription drugs
- Special work tools
- Traction equipment, braces
- Typing aids
- Vehicle modification (plus installation, maintenance, and associated repair costs)
- Wheelchairs
- Work animal and associated costs (plus food, maintenance, and veterinary services)
- Workspace modifications (adjustable desk, etc.)
- Work subsidy (increased supervision, etc.)