

Iowa

State Supplementation

Mandatory Minimum Supplementation

Administration: Social Security Administration.

Optional State Supplementation

Administration: State Department of Human Services administers supplemental payments for persons receiving residential or in-home health-related care, persons eligible for the supplement for Medicare, and persons eligible for Medicaid. Social Security Administration administers all other supplemental payments.

Effective date: January 1, 1974 (blind), May 1, 1974 (aged and disabled); October 1, 2003 (eligible for Medicare supplement or Medicaid).

Statutory basis for payment: Code of Iowa, chapter 249.

Funding

Administration: State funds.

Assistance: State funds.

Passalong method: Maintaining payment levels.

Place of application: Social Security Administration field offices for federally administered payments; local offices of state Department of Human Services for state-administered payments.

Scope of coverage: Optional state supplement provided to all aged, blind, and disabled persons residing in the specified living arrangements (see Table 1).

Supplementation is not provided to residents of emergency shelters or medical facilities. Blind children are eligible for optional supplementation if living in their own household or with a dependent relative; disabled children are eligible for optional supplementation if living with a dependent relative.

Resource limitations: Federal SSI regulations apply.

Income exclusions: Federal SSI regulations apply.

Recoveries, liens, and assignments: None.

Financial responsibility of relatives: None.

Interim assistance: State participates.

Payment levels: See Table 1.

Number of recipients: See Table 2.

State Assistance for Special Needs

State does not provide assistance for special needs.

Medicaid

Eligibility

Criteria: SSI program guidelines (Title XVI).

Determined by: Social Security Administration.

Medically Needy Program

State provides a program for the aged, blind, and disabled medically needy.

Unpaid Medical Expenses

The Social Security Administration obtains this information.

Table 1.
Optional state supplementation payment levels, January 2005 (in dollars)

Living arrangement	State code	Combined federal and state		State supplementation	
		Individual	Couple	Individual	Couple
Living independently (blind)	A	601.00	^a 913.00	22.00	^a 44.00
Living in the household of another (blind)	B	408.00	^a 623.34	22.00	^a 44.00
Living with a dependent person	C				
Aged and disabled		872.00	1,162.00	293.00	293.00
Blind		894.00	1,206.00	^b 315.00	^b 337.00
Family life or boarding home	D	721.00	1,153.00	142.00	284.00
Living with a dependent person in the household of another	H				
Aged and disabled		679.00	872.34	293.00	293.00
Blind		701.00	916.34	315.00	337.00
Family life or boarding home (one-third reduction in federal benefit rate applies)	I	528.00	1,172.34	142.00	593.00
Residential care ^c	...	777.17	...	^b 198.17	...
In-home health care	...	1,059.55	^d 1,830.10	^c 480.55	^c 961.10

NOTE: ... = not applicable.

- a. Payment level when both members of a couple are blind; when only one member is blind, payment is reduced by \$22.00.
- b. Amount based on allowable costs of residential care (\$17.86 to \$25.07 per day), plus a personal needs allowance of \$89.00 per month, minus the federal SSI payment. State administers payments.
- c. Payment is based on actual cost of in-home health-related care up to a maximum of \$480.55, plus basic federal benefit. State administers payments.
- d. Payment is based on both members of a couple needing in-home health-related care. When one member needs care, payment is reduced by \$480.55. State administers payments.

DEFINITIONS:

A: Living independently (blind). Includes all blind recipients who are not included under another arrangement, do not have an essential person, and are not otherwise ineligible for supplementation.

B: Living in the household of another (blind). Includes all blind recipients who are residing in a federal Code B living arrangement, are not included under another state arrangement, do not have an essential person, and are not otherwise ineligible for supplementation.

C and H: Living with a dependent person. Includes a recipient residing in a federal Code A, B, or C living arrangement. The recipient has an ineligible spouse, parent, child, or adult child living in the home who is financially dependent on him or her as defined by the Iowa Department of Human Services.

D and I: Family life or boarding home. Includes recipients residing in a federal Code A living arrangement who reside in a family life home or boarding home licensed by the Iowa Department of Health or certified by the Iowa Department of Human Services.

Residential care. Includes recipients who require custodial care (but not nursing care) on a 24-hour basis. The purpose of these facilities is to provide care for recipients who because of age, blindness, or disability are unable to adequately care for themselves in an independent living arrangement. Recipients must have the written recommendation of a physician to be admitted to these facilities.

In-home health care. Includes recipients who require personal services, nursing care, or both in their own home. The primary purpose of the program is to enable recipients to remain in their own home for as long as possible. Care must be recommended in writing by a physician and must be provided under the supervision of a registered nurse.

Table 2.
Number of persons receiving optional state supplementation, January 2005

Living arrangement	State code	Total	Aged	Blind	Disabled
All recipients		5,734	993	642	4,099
Living independently (blind)	A	625	0	625	0
Living in the household of another (blind)	B	15	0	15	0
Living with a dependent person	C	1,051	151	2	898
Family life or boarding home	D and I	6	2	0	4
Living with a dependent person in the household of another	H	4	1	0	3
Residential care	--	2,369	483	0	1,886
In-home health care	--	1,664	356	0	1,308

NOTE: -- = not available.