

Connecticut

State Supplementation

Mandatory Minimum Supplementation

No recipients.

Optional State Supplementation

Administration: State Department of Social Services.

Effective date: January 1, 1974.

Statutory basis for payment: Connecticut General Statutes, section 17b-600.

Funding

Administration: State funds.

Assistance: State funds.

Passalong method: Maintaining payment levels.

Place of application: Regional offices of state agency.

Scope of coverage: Optional state supplement provided to all aged, blind, and disabled SSI or Title II recipients living alone or with others. No provision is made for essential persons. The only children eligible for supplementation are those who are blind. Blind and disabled recipients are reclassified as aged upon reaching age 65.

Resource limitations: No limit on real property occupied as a home. Equity in real property other than a home must be liquidated. Value of personal property (excluding household and personal effects, car if needed, and tools and equipment or livestock essential to production of income) is limited to \$1,600 for an individual and \$2,400 for a couple. In addition, up to \$1,800 for burial contract is reduced by the value of irrevocable burial arrangements and the face value of life insurance policies of \$1,500 or less.

Income exclusions

Unearned income: For recipients residing in the community, state disregards \$278.00 of any unearned income including SSI; for recipients residing in boarding homes, \$185.70 is disregarded. The disregard is \$345.90 for recipients residing with unrelated persons in the community.

Earned income: The first \$65 and one-half of the remainder for aged and disabled; the first \$85 and one-half of the remainder for the blind. Work-related expenses for the blind, including personal expenses such as Social Security tax, life and health insurance, lunch, and transportation, are excluded. Additional deductions are allowed for the blind and disabled related to plans for self-support. Those who are disabled are also allowed deductions for impairment-related work expenses.

Recoveries, liens, and assignments: Liens secure claims against real property. State has a preferred mandatory claim against an estate to the extent that it is not needed for the support of the surviving spouse, parent, or dependent children of the decedent. Liens may be released upon payment of claim or amount equal to beneficiary's interest. If applicant or recipient owns other nonhome property, he or she must be making a bona fide effort to sell it. During that time, he or she gives the state a security mortgage.

Financial responsibility of relatives: Spouse for spouse.

Interim assistance: State participates.

Payment calculation method: A standard applies that is established by the state for the total SSI payment. The federal SSI payment and any countable income are deducted from the state standard. The remainder is the state supplementation.

Payment levels: See Table 1.

Number of recipients: See Table 2.

Total expenditures¹: The state reported expenditures of \$42,609,009 for calendar year 2010 in state-administered payments to SSI recipients.

1. Includes payments made to some non-SSI recipients who meet state eligibility criteria, but do not meet federal SSI eligibility guidelines.

State Assistance for Special Needs**Administration**

State Department of Social Services.

Special Needs Circumstances**Recurring**

Emergency housing: One occurrence per calendar year; no more than 60 days per occurrence.

Refuse collection: Standard community rate.

Therapeutic diet: \$36.20 a month.

Meals on Wheels: \$4.65 for one meal a day; \$8.50 for two meals a day.

Restaurant meals: \$36.20 a month for an individual living in the community; \$7.80 per day for an individual living in emergency housing.

Nonrecurring

Security deposit for heating service: Actual cost up to a limit of \$200 for equipment only.

Storage charges: Up to 3 months.

Moving expenses: Market charge.

Essential household furnishings: Lower of actual cost or department standard for particular item.

Telephone installation: Standard residential line charge for service connections plus \$23 for labor and \$4 maximum for phone jack.

Essential clothing: Department standard for particular item.

Medicaid**Eligibility**

Criteria: State guidelines.

Determined by: State.

Medically Needy Program

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

Unpaid Medical Expenses

The Social Security Administration does not obtain this information.

Table 1.
Optional state supplementation payment levels, January 2011 (in dollars)

Living arrangement	Combined federal and state		State supplementation	
	Individual	Couple	Individual	Couple
Independent community living ^a	842.00	1,285.00	168.00	274.00
Licensed room and board facility	674.00	1,011.00	b	b
Medicaid facility ^c	69.00	138.00	39.00	78.00

SOURCES: Social Security Administration, Office of Income Security Programs; state information.

- The budget process is used to establish payment amounts. This supplement consists of a housing allowance (maximum of \$400 for living alone; \$200 for living with others), basic needs items, minus countable income (see "Income exclusions"). The amount presented assumes eligibility for the highest rental allowance and the maximum budget amount.
- Committee sets state payments for recipients in boarding homes in accordance with individual cost data for the operations of the facility.
- Recipients residing in a Medicaid facility receive a supplement that varies depending on the facility.

DEFINITIONS:

Independent community living. Any type of living arrangement that is not a licensed room and board facility or a medical or penal institution.

Licensed room and board facility. Community group home, training home, family care home, private boarding home, or other residential facility that is licensed by the Connecticut Department of Mental Retardation, Department of Children and Families, Department of Mental Health and Addiction Services, Department of Public Health Services, or other state agency and that at a minimum provides lodging and meals to various groups of elderly, blind, or disabled individuals.

Medicaid facility. Includes recipients residing in a federal Code D living arrangement, general hospitals, long-term care facilities, intermediate care facilities, institutions for the mentally retarded and mental disease facilities for residents younger than age 21 or aged 65 or older, and tuberculosis facilities for persons aged 65 or older.

Table 2.
Number of persons receiving optional state supplementation, January 2011

Living arrangement	Total	Aged	Blind ^a	Disabled
All recipients	10,348	2,769	56	7,523
Independent community living	8,433	2,461	24	5,948
Licensed room and board facility	1,892	308	32	1,552
Medicaid facility	23	0	0	23

SOURCE: State information.

NOTE: Includes some non-SSI recipients who meet state eligibility criteria, but do not meet federal SSI eligibility guidelines.

a. Includes blind children.