New Jersey

State Supplementation

Mandatory Minimum Supplementation

Administration: Social Security Administration.

Optional State Supplementation

Administration: Social Security Administration.

Effective date: January 1, 1974.

Statutory basis for payment: New Jersey Statutes

Annotated, 44:7-86.

Funding

Administration: State funds. Assistance: State funds.

Passalong method: Maintaining payment levels.

Place of application: Social Security Administration

field offices.

Scope of coverage: Optional state supplement provided to every aged, blind, and disabled recipient, including children, except those in publicly operated community residences or facilities where Medicaid pays less than 50 percent of the cost of care. Supplementation provided to recipients in approved residential facilities.

Resource limitations: Federal SSI resource limitations

apply.

Income exclusions: Federal SSI income exclusions

apply.

Recoveries, liens, and assignments: None.

Responsibility of relatives: None.

Interim assistance: State participates.

Payment levels: See Table 1.

Number of recipients: See Table 2.

State Assistance for Special Needs

Administration

Department of Human Services, Division of Family Development.

Special Needs Circumstances

Emergency assistance for catastrophic events and burial and funeral payments. Eligibility for payments based on meeting requirements for mandatory minimum or optional state supplementary payments.

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 (in dollars)

	State	Combined federal and state		State supplementation	
Living arrangement	code	Individual	Couple	Individual	Couple
Living in a congregate care facility a	Α	695.05	1,371.36	150.05	554.36
Living alone or with others	В	576.25	842.36	31.25	25.36
Living alone or with an ineligible spouse b	С	842.36		297.36	
Living with an essential person ^c	С	842.36		24.36	
Living in the household of another	D	407.65	637.76	44.31	93.09
Living in a Medicaid facility	G	40.00	80.00	10.00	20.00

NOTE: . . . = not applicable.

- a. State supplement includes a \$67.50 personal needs allowance per person per month.
- b. Federal criteria are used in determining an ineligible spouse. Applies to recipients who live with either their ineligible spouse only, or with only their ineligible spouse and foster child(ren).
- c. Payment levels for essential person apply only to cases converted from former state assistance programs.

DEFINITIONS:

A: Living in a congregate care facility. Includes recipients in:

- Residential heath care facilities, assisted-living residences, or comprehensive personal care homes licensed by the Department of Health.
- Recipients in residential facilities for children and adults under the supervision of or placement by the Division of Developmental Disabilities or the Division of Youth and Family Services and approved by the Department of Human Services.
- **B:** Living alone or with others. Includes all recipients residing in a federal Code A or C living arrangement who do not meet the definitions of other state living arrangements. Includes persons in:
- The Transitional Residency Program when their placement is through the Division of Mental Health and Hospitals, Department of Human Services
- · Room and board facilities licensed by the Department of Community Affairs, and
- Persons in medical facilities who are residing in a federal Code A living arrangement on the basis of their eligibility under section 1611(e)(1)(E).

C: Living alone or with an ineligible spouse.

- · Applies to recipients who live with their ineligible spouse only or with their ineligible spouse and foster children only.
- Uses federal criteria. Recipient currently has an essential person living in the household and in December 1973 was receiving assistance under an approved state plan that covered the needs of an essential person.
- D: Living in the household of another. Includes all recipients residing in a federal Code B living arrangement.
- G: Living in a Medicaid facility. Includes all recipients residing in a federal Code D living arrangement.

Table 2. Number of persons receiving optional state supplementation, January 2002

	State				Disabled	
Living arrangement	code	Total	Aged	Blind	Adults	Children
All recipients		143,670	33,390	930	84,860	24,490
Licensed in a congregate care						
facility	Α	6,550	550	20	5,550	430
Living alone or with others Living alone or with an ineligible	В	109,910	22,100	720	65,660	21,430
spouse Living in the household	С	5,270	2,360	50	2,850	10
of another	D	17,820	7,400	130	8,280	2,010
Living in a Medicaid facility	G	4,120	980	10	2,520	610