State Supplementation

Mandatory Minimum Supplementation
Administration: State Department of Health and Welfare.

Optional State Supplementation
Administration: State Department of Health and Welfare.
Effective date: January 1, 1974.

Funding
Administration: State funds.
Assistance: State funds.

Passalong method: Maintaining payment levels.
Place of application: Local offices of the state Department of Health and Welfare.

Scope of coverage: Optional state supplement provided to all SSI recipients, including children, residing in the specified living arrangements (see Table 1). Persons living in the household of another are included under the living independently standard; state supplement is increased to offset the reduced federal payment.

Resource limitations: Federal SSI regulations apply.

Income exclusions: Federal SSI regulations apply; also all in-kind support and maintenance.

Recoveries, liens, and assignments: None.

Financial responsibility of relatives: Husband and wife mutually; parent for minor child.

Interim assistance: State does not participate.

Payment levels: See Table 1.

Number of recipients: See Table 2.

Table 1.
Optional state supplementation payment levels, January 2004 (in dollars)

<table>
<thead>
<tr>
<th>Living arrangement</th>
<th>Combined federal and state</th>
<th>State supplementation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Individual</td>
<td>Couple</td>
</tr>
<tr>
<td>Living independently or in the household of another a</td>
<td>616.00</td>
<td>866.00</td>
</tr>
<tr>
<td>Living with an essential person b</td>
<td>866.00</td>
<td>. .</td>
</tr>
<tr>
<td>Room and board facility</td>
<td>761.00</td>
<td>c</td>
</tr>
<tr>
<td>Residential and assisted living facility</td>
<td>903.00</td>
<td>c</td>
</tr>
<tr>
<td>Certified family home</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Level I</td>
<td>903.00</td>
<td>c</td>
</tr>
<tr>
<td>Level II</td>
<td>970.00</td>
<td>c</td>
</tr>
<tr>
<td>Level III</td>
<td>1,038.00</td>
<td>c</td>
</tr>
<tr>
<td>Semi-independent group residential facility</td>
<td>761.00</td>
<td>c</td>
</tr>
<tr>
<td>Assisted living facility or certified family home</td>
<td>d</td>
<td>. .</td>
</tr>
</tbody>
</table>

NOTE: . . . = not applicable.

a. State supplement is increased to offset the reduced federal payment for persons living in the household of another.
b. The same supplement is given for living with an essential person to individuals and couples.
c. Couples are treated as two individuals starting with the month after leaving an independent living arrangement.
d. The income limit for this payment level is $539.00. There is no state supplementation to SSI; only recipients who are living in a residential and assisted living facility or a certified family home and who do not receive SSI are eligible.
**Table 1. Continued**

**DEFINITIONS:**

**Living independently or in the household of another.** Includes recipients living in their own household (i.e., house, apartment, hotel, rooming house, or room and board facility) or in the household of another. Also includes blind or disabled children living with their parents and individuals paying room and board to a relative.

**Living with an essential person.** Includes recipients living in their own household or in the household of another with a person of their choice whose presence in the household is essential to the recipients' well-being and who renders specific services of a kind that would have to be provided for the recipients if they lived alone.

**Room and board facility.** A facility in which a person purchases food, shelter, and household maintenance requirements from one vendor. Such a facility is not required to be licensed as a shelter home.

**Residential and assisted living facility or certified family home.** One or more buildings constitutes a facility or residence, however named, that is operated on either a profit or nonprofit basis, for the purpose of providing 24-hour care for three or more adults who need personal care or assistance and supervision essential for sustaining activities of daily living or for the protection of the individual.

**Certified family home.** A family home in which an adult chooses to live who is not able to reside in his or her own home and who requires care or help in daily living, protection, security, and encouragement toward independence.

**Semi-independent group residential facility.** A facility having one or more living areas under a common management in which an opportunity to learn independent living skills is provided under individualized service plans to not less than three nor more than eight developmentally disabled or mentally ill persons not requiring direct supervision.

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**Table 2. Number of persons receiving optional state supplementation, January 2004**

<table>
<thead>
<tr>
<th>Living arrangement</th>
<th>Total</th>
<th>Aged</th>
<th>Blind</th>
<th>Disabled Adults</th>
<th>Disabled Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>All recipients</td>
<td>11,699</td>
<td>2,070</td>
<td>26</td>
<td>8,768</td>
<td>835</td>
</tr>
<tr>
<td>Living independently or in the household of another, or living with an essential person</td>
<td>10,966</td>
<td>1,940</td>
<td>24</td>
<td>8,219</td>
<td>783</td>
</tr>
<tr>
<td>Room and board facility</td>
<td>685</td>
<td>121</td>
<td>2</td>
<td>513</td>
<td>49</td>
</tr>
<tr>
<td>Residential and assisted living facility or certified family home</td>
<td>5</td>
<td>1</td>
<td>0</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>Certified family home</td>
<td>4</td>
<td>1</td>
<td>0</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Semi-independent group residential facility</td>
<td>39</td>
<td>7</td>
<td>0</td>
<td>29</td>
<td>3</td>
</tr>
<tr>
<td>Assisted living facility or certified family home</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
</tr>
</tbody>
</table>

NOTE: -- = not available.

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**State Assistance for Special Needs**

**Administration**

State Department of Health and Welfare.

**Special Needs Circumstances**

**Restaurant meals:** Eating-out allowance of up to $50 per month if physically unable to prepare meals.

**Maintenance for guide dog:** Allowance for care and maintenance of guide dog of up to $17 per month.

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**Medicaid**

**Eligibility**

**Criteria:** SSI program guidelines (Title XVI).

**Determined by:** State.

**Medically Needy Program**

State does not provide a program for the medically needy.

**Unpaid Medical Expenses**

The Social Security Administration does not obtain this information.