

## Guide to Reading the State Summaries

This guide explains the program features detailed in the summaries for the 50 states and the District of Columbia. Three of the major state assistance programs are:

- State supplementation (mandatory and optional) of federal Supplemental Security Income payments,
- State assistance for special needs, and
- Medicaid.

To facilitate comparisons across states, a separate section includes four tables that summarize:

- The number of persons receiving optional supplementation,
- Selected features of state supplementation programs,
- Selected features of medical programs affecting SSI recipients and the needy, and
- State threshold amounts for blind and disabled individuals to maintain Medicaid eligibility under section 1619(b) provisions of the Social Security Act.

With the exception of Ohio, all states and the District of Columbia have provided current data for this publication. The state summaries contain information on the program features discussed below.

### ***State Supplementation***

#### ***Mandatory Minimum Supplementation***

The states provide mandatory minimum supplementation only to recipients who were converted to the Supplemental Security Income (SSI) program from the former state assistance programs when the SSI program began. Mandatory minimum state supplementary payments are required by Public Law 93-66 to maintain the December 1973 payment levels that these recipients received under the former state assistance programs. States are required to provide this supplementation to maintain their eligibility for Title XIX (Medicaid) federal matching funds. The governmental unit responsible for administering these payments may be either a state or local agency or the Social Security Administration.

#### ***Optional State Supplementation***

Some states provide optional monthly supplements to help persons meet needs not fully covered by federal SSI payments. The state determines whether it will make a payment, to whom, and in what amount. These supplements, paid on a regular monthly basis, are intended to cover such items as food, shelter, clothing, utilities, and other daily and special necessities determined by the individual states. Some states provide optional supplementary payments to all persons eligible for SSI benefits. Others may limit payments to certain SSI recipients such as the blind or residents of domiciliary care facilities, or they may extend payments to persons who are ineligible for SSI because their income is too high.

**Administration.** The governmental unit responsible for administering these payments may be a state or local agency or the Social Security Administration (SSA). Under state administration, the state must absorb both program benefits and administrative costs. Under federal administration, the state must reimburse SSA for the cost of the program benefits and, as of October 1, 2004, must pay \$9.06 in administrative costs for each benefit paid. As of October 1, 2004, the rate was adjusted for inflation as calculated by the change in the consumer price index (CPI) between June 2003 and June 2004, rounded to the nearest whole cent. The Commissioner may select a different rate for a state, taking into account the complexity of administering the state's supplementary payment program.

**Effective date.** The date when the state instituted or revised its optional supplementation program.

**Statutory basis for payment.** The state law(s) authorizing the supplementary payments.

**Funding.** The source of funds for supplementary payments and administrative costs. In states requiring financial participation from local governments, the portions contributed by the state and the locality are indicated.

**Passalong method.** To maintain eligibility for Medicaid reimbursement, any state making supplementary payments after June 30, 1977, must continue making payments and must pass along the cost-of-living increase to the federal benefit rate (FBR). Two methods are available to ensure that cost-of-living increases are passed on to the recipients: the payment levels method and the total expenditure method.

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Under the payment levels method, the state's supplemental payment for any of the living arrangement categories cannot be below their adjusted March 1983 levels. The adjusted level is the state's March 1983 payment level minus the portion of the July 1983 increase in the FBR that was not attributable to the increase in the cost of living (that portion was \$10.30 per individual and \$15.40 per couple); the essential person increment may be reduced by \$5.50.

Under the total expenditure method, state expenditures for supplementary payments in the current calendar year must at least equal expenditures in the preceding calendar year. If expenditures fall short in the current year, the state must increase expenditures in the next calendar year by an amount at least equal to the shortfall.

**Place of application.** The office(s) accepting applications for supplementary payments.

**Scope of coverage.** The categories of persons the state has elected to supplement. States with state-administered programs establish their own eligibility conditions and payment categories. States with federally administered programs must adhere to SSI eligibility criteria in all aspects but are allowed to establish additional income exclusions and payment categories.

**Resource limitations.** The resource limitations and exclusions for federally administered state supplementation are the same as for federal SSI payments: countable resources must be worth \$2,000 or less for an individual, or \$3,000 or less for a couple. Countable resources are properties, real or personal, that count toward the resource limits. Recognizing that not everything an individual owns is available for his or her support and maintenance, the law provides for excluding certain resources in determining eligibility for SSI. Excluded resources include (but are not limited to):

- The house an individual lives in;
- A car, if it is used to provide necessary transportation;
- Household goods (if needed for maintenance, use, and occupancy of the home) and personal effects;
- Life insurance policies with a total face value of \$1,500 or less per person;
- Burial plots or spaces for the individual or his or her immediate family;
- A burial fund of up to \$1,500 each for the individual's and his or her spouse's burial expenses; and

- Property essential to self-support, including property used in a trade or business or on the job if the individual works for someone else.

States with state-administered supplementation can establish their own resource limitations and exclusions for optional state supplementary payments.

**Income exclusions.** An exclusion is the amount of a recipient's income that is not counted against the state supplementary payment.

In general, an SSI recipient's income from sources other than SSI is counted against the SSI payment amount. Some income, however, is excluded from being counted. The federal program excludes \$20 per month of earned or unearned income; in addition, \$65 per month of earned income plus one-half of the remaining earnings is excluded. Some types of income are entirely excluded, such as certain home energy and support and maintenance assistance, food stamps, most federally funded housing assistance, state assistance based on need, one-third of child support payments, and income received infrequently or irregularly.

States that elect federal administration must exclude at least the amounts excluded by the federal program and may exclude more. Countable income is deducted first from the federal payment. Any income that remains to be counted after the federal payment is reduced to zero is deducted from the state supplementary payment.

States with state-administered programs can establish their own income exclusions of any amount and type. In most states, the supplementary payment is added to the federal amount, and countable income is deducted first from the federal payment, as in states with federal administration. In a few states, however, the supplement takes the form of a state-guaranteed income amount that exceeds the federal benefit.

**Recoveries, liens, and assignments.** Provisions of state supplementation plans governing recovery of assistance payments and assumption of a recipient's property by the agency. As a condition of providing assistance, a state may require that a lien be placed on a recipient's property. Such a requirement does not affect a person's eligibility or payment status for federal SSI benefits or federally administered state supplementary payments.

**Financial responsibility of relatives.** State supplementation provisions that govern the responsibility of relatives (other than parent for child and spouse for spouse) for providing economic support and returning overpayments.

**Interim assistance reimbursement (IAR).** The Social Security Administration may reimburse a state

that has provided basic needs assistance to an individual during the period in which either the person's application for SSI was pending or his or her SSI benefits were suspended or terminated. The individual's retroactive SSI payment is sent to the state as reimbursement if:

- The state has an agreement with SSA to participate in the IAR program;
- The individual has given SSA written authorization to have his or her retroactive payment sent to the state as reimbursement; and
- The individual is found eligible for SSI payments or has had his or her benefits reinstated for the same period of suspension or termination.

**Payment levels.** The maximum state supplementary payments and the combined maximum federal and state payments that can be awarded to recipients without countable income are presented, by state-designated living arrangements, in Table 1 in each state summary. Unless otherwise stated, payment levels apply equally to aged, blind, and disabled recipients. The federal benefit rates that are included in the combined payment levels became effective January 2005 (unless otherwise stated) and are given in the table below.

In states where the SSI payments are federally administered, each living arrangement is described according to the following federal living arrangements. The state may also have other living arrangements. States that administer the SSI payment

have the option to supplement and determine their own definitions of living arrangements.

*Federal Code A.* Includes eligible persons who:

- Live in their own household whether or not they are receiving in-kind support and maintenance;
- Live in a foster or family care situation;
- Have no permanent living arrangement (for example, a transient);
- Live in an institution (except inmates of public institutions) for all or part of a month provided that Medicaid does not pay more than 50 percent of the cost of their care; or
- Live alone with a child, spouse, or persons whose income may be deemed to the eligible person.

It also includes eligible persons for whom Codes B, C, and D do not apply.

*Federal Code B.* Includes eligible persons who:

- Live in a household other than their own throughout a month with at least one other person who is not their child, their spouse, or an ineligible person whose income is deemed to them; and
- Receive food and shelter from within that household.

The Code A payment standard is reduced by one-third for people in federal Code B living arrangements.

*Federal Code C.* Includes eligible children under age 18 who live in the same household as their parents (that is, deeming applies). The payment standard is the same as in Code A.

**Federal benefit rates, January 2005 (in dollars)**

Living arrangements	Individual	Couple	Essential person <sup>a</sup>
Living independently	579.00	869.00	290.00
Living in the household of another <sup>b</sup>	386.00	579.34	193.34
Living in a Medicaid facility <sup>c</sup>	30.00	60.00	...

NOTE: ... = not applicable.

- This represents the additional amount included in a recipient's check to cover the needs of a household member who provides essential care and services to the recipient and whose needs were previously taken into account in determining the recipient's assistance payment under a state plan approved under titles I, X, XIV, or XVI of the Social Security Act.
- If the recipient lives in another person's household for a full calendar month and receives both food and shelter from that person, the federal benefit rate (amounts for living independently) is reduced by one-third.
- Includes eligible persons who live in a public or private medical institution throughout a month and Medicaid is paying more than 50 percent of the cost of their care. It also includes eligible children under age 18 who live in a public or private medical institution throughout a month and Medicaid, or a combination of Medicaid and private insurance, is paying more than 50 percent of the cost of care.

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*Federal Code D.* Includes eligible persons who live in a public or private medical institution throughout a month and Medicaid is paying more than 50 percent of the cost of their care. It also includes eligible children under age 18 who live in a public or private medical institution throughout a month and Medicaid, or a combination of Medicaid and private insurance, is paying more than 50 percent of the cost of care.

**Number of recipients.** The number of recipients receiving optional payments from the state is displayed in Table 2 in each state summary. This number may include persons who are ineligible for federal SSI payments but meet state eligibility criteria.

### ***State Assistance for Special Needs***

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This assistance is for emergency or special conditions not covered by monthly SSI or optional state supplementary payments. Disaster benefits, burial expenses, additional subsidies for institutional care, and moving expenses are included in this category.

**Administration.** The governmental unit responsible for administering these payments is indicated.

**Special needs circumstances.** The special needs circumstances (recurring and nonrecurring) for which assistance can be approved are defined. Where available, eligibility requirements and payment limitations are described.

### ***Medicaid***

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All states have federally assisted medical assistance (Medicaid) programs.

### ***Eligibility***

States may grant Medicaid eligibility to all SSI recipients or apply state guidelines in determining eligibility.

Either the SSI program guidelines or the state guidelines may be used to determine eligibility. State guidelines may not be more restrictive than the state's January 1972 medical assistance standards. The governmental unit responsible for determining eligibility is indicated.

### ***Medically Needy Program***

The presence or absence of a medically needy program for SSI-related populations is indicated. Statute permits states to choose either no medically needy program, a restricted program, Temporary Assistance for Needy Families (TANF), or a program for the TANF-related and one or more of the SSI-related categories (that is, aged, blind, or disabled). States determine eligibility for this program.

### ***Unpaid Medical Expenses***

Under Medicaid statute, a state must pay unpaid medical expenses incurred for service covered under its Medicaid state plan for up to 3 months before an individual is found eligible for SSI, if the individual would have been eligible had he or she applied then. The entry indicates whether SSA has a contractual agreement with the state to inquire about the unpaid medical expenses of SSI claimants.

## Summary Tables

**Summary Table 1.**

**Number of persons receiving optional state supplementation, by state and eligibility category, January 2005**

State	Total	Aged	Blind	Disabled	
				Adults	Children
Alabama <sup>a</sup>	432	150	6	276	b
Alaska <sup>a</sup>	14,993	4,983	72	9,938	c
Arizona	514	--	--	--	c
Arkansas <sup>d</sup>	...	...	...	...	...
California	1,163,380	343,488	18,858	671,455	129,579
Colorado <sup>e</sup>	34,982	20,420	27	13,782	753
Connecticut	f	--	--	--	g
Delaware	708	55	12	595	46
District of Columbia	1,587	155	12	1,328	92
Florida <sup>a</sup>	9,393	3,705	3	5,685	c
Georgia <sup>d</sup>	...	...	...	...	...
Hawaii	2,451	697	24	1,667	63
Idaho	12,241	2,244	25	6,996	2,976
Illinois	29,947	6,674	109	23,164	b
Indiana	3,892	1,229	22	2,641	c
Iowa	5,734	993	642	4,099	b
Kansas <sup>d</sup>	...	...	...	...	...
Kentucky	4,396	1,607	23	2,766	b
Louisiana	4,713	1,410	54	3,249	b
Maine	34,296	--	--	--	--
Maryland	f	--	--	--	--
Massachusetts	169,908	44,243	3,960	97,968	23,737
Michigan	218,941	--	--	--	--
Minnesota	28,224	6,330	136	21,758	b
Mississippi <sup>d</sup>	...	...	...	...	...
Missouri	8,572	2,745	876	4,951	c
Montana	954	29	16	849	60
Nebraska	6,079	1,256	58	4,765	b
Nevada	<sup>h</sup> 8,603	7,848	491	...	g
New Hampshire	7,365	1,353	253	5,759	b
New Jersey	<sup>i</sup> 146,720	32,732	883	85,540	27,564
New Mexico	478	58	5	415	c
New York	617,219	--	--	--	--
North Carolina	23,456	12,010	102	11,344	c
North Dakota	476	--	--	--	c
Ohio	<sup>j</sup> 2,303	--	--	--	--
Oklahoma	72,126	22,595	569	39,191	9,771
Oregon	23,071	3,178	487	19,406	g
Pennsylvania	12,714	5,362	22	7,311	19
Rhode Island	29,269	3,933	185	19,965	5,186
South Carolina	2,960	1,317	12	1,631	b
South Dakota	3,426	--	--	--	--
Tennessee <sup>d</sup>	...	...	...	...	...
Texas	10,380	2,685	139	7,556	b
Utah	1,563	358	15	1,020	170

(Continued)

**Summary Table 1.  
Continued**

State	Total	Aged	Blind	Disabled	
				Adults	Children
Vermont	12,625	1,192	84	9,232	2,117
Virginia <sup>k</sup>	6,367	2,774	13	3,580	c
Washington	f	--	--	--	--
West Virginia <sup>d</sup>	...	...	...	...	...
Wisconsin	98,934	9,931	1,012	66,131	21,860
Wyoming	2,700	--	--	--	--

SOURCES: Social Security Administration, Supplemental Security Record, 100 percent data; information in the state summaries.

NOTE: -- = not available; . . . = not applicable.

- a. Includes certain grandfathered non-SSI recipients who meet state eligibility criteria.
- b. A separate count for children is not available.
- c. Children under 18 years old are not eligible for optional payment.
- d. The state does not have an optional supplementation program.
- e. Data not available after 2002.
- f. Total not available; see Table 2 in state summary for details.
- g. Only blind children are eligible; a separate count is not available.
- h. Includes 264 persons not distributed by eligibility category. Disabled persons are not eligible.
- i. Includes one person not distributed by eligibility category.
- j. Represents 2004 data.
- k. Represents July 2005 data.

**Summary Table 2.****Selected features of state supplementation, by state, January 2005**

State	Administration of—		Method of passalong	Participation in interim assistance reimbursement program
	Mandatory minimum supplementation	Optional state supplementation		
Alabama	No recipients	State	Payment levels	No
Alaska	State	State	Total expenditures	Yes
Arizona	State	State	Payment levels	Yes
Arkansas	Federal	No program	No program	No
California	Federal	Federal	Payment levels	Yes
Colorado	State	State	Total expenditures	Yes
Connecticut	No recipients	State	Payment levels	Yes
Delaware	Federal	Federal/state	Payment levels	No
District of Columbia	Federal	Federal/state	Total expenditures	Yes
Florida	No recipients	State	Payment levels	Yes
Georgia	Federal	No program	No program	Yes
Hawaii	Federal	Federal	Total expenditures	Yes
Idaho	State	State	Payment levels	No
Illinois	State	State	Payment levels	Yes
Indiana	No recipients	State	Payment levels	Yes
Iowa	Federal	Federal/state	Payment levels	Yes
Kansas	Federal	No program	No program	Yes
Kentucky	No recipients	State	Payment levels	Yes
Louisiana	Federal	State	Payment levels	No
Maine	State	State	Payment levels	Yes
Maryland	Federal	State	Payment levels	Yes
Massachusetts	Federal	Federal	Payment levels	Yes
Michigan	Federal	Federal/state	Payment levels	Yes
Minnesota	No recipients	State	Payment levels	Yes
Mississippi	Federal	No program	No program	No
Missouri	State	State	Payment levels	Yes
Montana	Federal	Federal	Payment levels	Yes
Nebraska	State	State	Total expenditures	Yes
Nevada	No recipients	Federal	Payment levels	Yes
New Hampshire	State	State	Payment levels	Yes
New Jersey	Federal	Federal	Payment levels	Yes
New Mexico	State	State	Payment levels	Yes
New York	Federal	Federal/state	Payment levels	Yes
North Carolina	State	State	Payment levels	Yes
North Dakota	No recipients	State	Payment levels	No
Ohio	Federal	State	Payment levels	Yes
Oklahoma	State	State	Total expenditures	No
Oregon	State	State	Total expenditures	Yes
Pennsylvania	Federal	Federal/state	Payment levels	Yes
Rhode Island	No recipients	Federal	Payment levels	Yes
South Carolina	No recipients	State	Payment levels	No
South Dakota	Federal	State	Payment levels	No
Tennessee	Federal	No program	No program	Yes
Texas	No recipients	State	Payment levels	No
Utah	No recipients	Federal	Payment levels	Yes
Vermont	No recipients	Federal	Payment levels	Yes
Virginia	No recipients	State	Payment levels	Yes
Washington	State	State	Total expenditures	Yes
West Virginia	No program	No program	No program	No
Wisconsin	No recipients	State	Total expenditures	Yes
Wyoming	State	State	Payment levels	No

SOURCE: Based on information in the state summaries.

**Summary Table 3.****Selected features of medical programs affecting SSI recipients and the needy, by state, January 2005**

State	Medicaid eligibility		Medically needy program	SSA obtains information on unpaid medical expenses
	Criteria	Determined by—		
Alabama	Federal	Federal	No	No
Alaska	Federal	State	No	No
Arizona	Federal	Federal	Yes	No
Arkansas	Federal	Federal	Yes	Yes
California	Federal	Federal	Yes	No
Colorado	Federal	Federal	No	Yes
Connecticut	State	State	Yes	No
Delaware	Federal	Federal	No	Yes
District of Columbia	Federal	Federal	Yes	Yes
Florida	Federal	Federal	Yes	No
Georgia	Federal	Federal	Yes	No
Hawaii	State	State	Yes	No
Idaho	Federal	State	No	No
Illinois	State	State	Yes	No
Indiana	State	State	No	No
Iowa	Federal	Federal	Yes	Yes
Kansas	Federal	State	Yes	No
Kentucky	Federal	Federal	Yes	Yes
Louisiana	Federal	Federal	Yes	Yes
Maine	Federal	Federal	Yes	Yes
Maryland	Federal	Federal	Yes	Yes
Massachusetts	Federal	Federal	Yes	Yes
Michigan	Federal	Federal	Yes	No
Minnesota	State	County	Yes	No
Mississippi	Federal	Federal	No	No
Missouri	State	State	No	No
Montana	Federal	Federal	Yes	No
Nebraska	Federal	State	Yes	No
Nevada	Federal	State	No	No
New Hampshire	State	State	Yes	No
New Jersey	Federal	Federal	Yes	Yes
New Mexico	Federal	Federal	No	No
New York	Federal	Federal	Yes	No
North Carolina	Federal	Federal	Yes	No
North Dakota	State	State	Yes	No
Ohio	State	State	No	No
Oklahoma	State	State	Yes	No
Oregon	Federal	State	No	No
Pennsylvania	Federal	Federal	Yes	Yes
Rhode Island	Federal	Federal	Yes	Yes
South Carolina	Federal	Federal	No	No
South Dakota	Federal	Federal	No	Yes
Tennessee	Federal	Federal	Yes	Yes
Texas	Federal	Federal	Yes	Yes
Utah	Federal	State	Yes	No
Vermont	Federal	Federal	Yes	No
Virginia	State	State	Yes	No
Washington	Federal	Federal	Yes	Yes
West Virginia	Federal	Federal	Yes	Yes
Wisconsin	Federal	Federal	Yes	No
Wyoming	Federal	Federal	No	Yes

SOURCE: Based on information in the state summaries.



**Summary Table 4.****State threshold amounts for disabled and blind individuals to maintain Medicaid eligibility under section 1619(b) of the Social Security Act, calendar year 2005**

State	Twice state supplementation <sup>a</sup> (dollars)	Base amount <sup>b</sup> (dollars)	State per capita Medicaid expenditure (dollars)	Threshold <sup>c</sup>	
				Amount (dollars)	Rank
<i>Disabled individuals</i>					
Alabama	0	14,916	5,637	20,553	50
Alaska	8,688	23,604	20,946	44,550	2
Arizona	0	14,916	9,573	24,489	36
Arkansas	0	14,916	8,159	23,075	43
California	5,424	20,340	10,414	30,754	13
Colorado	0	14,916	14,970	29,886	16
Connecticut	4,392	19,308	25,787	45,095	1
Delaware	0	14,916	16,269	31,185	11
District of Columbia	0	14,916	13,100	28,016	24
Florida	0	14,916	9,075	23,991	39
Georgia	0	14,916	7,996	22,912	45
Hawaii	0	14,916	8,534	23,450	41
Idaho	1,248	16,164	18,363	34,527	6
Illinois	0	14,916	13,770	28,686	20
Indiana	0	14,916	14,278	29,194	18
Iowa	0	14,916	9,298	24,214	38
Kansas	0	14,916	13,893	28,809	19
Kentucky	0	14,916	8,350	23,266	42
Louisiana	0	14,916	8,664	23,580	40
Maine	240	15,156	19,261	34,417	7
Maryland	0	14,916	14,520	29,436	17
Massachusetts	2,745	17,661	14,125	31,786	8
Michigan	336	15,252	6,113	21,365	48
Minnesota	1,464	16,380	23,151	39,531	3
Mississippi	0	14,916	7,517	22,433	47
Missouri	0	14,916	11,752	26,668	27
Montana	0	14,916	9,773	24,689	33
Nebraska	288	15,204	15,597	30,801	12
Nevada	0	14,916	11,822	26,738	26
New Hampshire	648	15,564	23,727	39,291	4
New Jersey	750	15,666	12,375	28,041	23
New Mexico	0	14,916	12,423	27,339	25
New York	2,088	17,004	20,571	37,575	5
North Carolina	0	14,916	11,487	26,403	28
North Dakota	0	14,916	16,437	31,353	10
Ohio	0	14,916	13,660	28,576	21
Oklahoma	1,200	16,116	5,100	21,216	49
Oregon	41	14,957	9,698	24,655	34
Pennsylvania	658	15,574	9,221	24,795	32
Rhode Island	1,376	16,292	15,375	31,667	9
South Carolina	0	14,916	9,677	24,593	35
South Dakota	360	15,276	12,910	28,186	22
Tennessee	0	14,916	4,175	19,091	51
Texas	0	14,916	11,098	26,014	30
Utah	0	14,916	11,410	26,326	29

(Continued)

**Summary Table 4.  
Continued**

State	Twice state supplementation <sup>a</sup>	Base amount <sup>b</sup>	State per capita Medicaid expenditure	Threshold <sup>c</sup>	
				Amount	Rank
<b><i>Disabled individuals (cont.)</i></b>					
Vermont	1,249	16,165	13,808	29,976	14
Virginia	0	14,916	10,568	25,484	31
Washington	0	14,916	7,714	22,630	46
West Virginia	0	14,916	9,430	24,346	9
Wisconsin	2,011	16,927	12,994	29,921	15
Wyoming	245	15,161	7,827	22,988	44
<b><i>Blind individuals</i></b>					
California	6,960	21,876	10,414	32,290	1
Iowa	528	15,444	9,298	24,742	5
Massachusetts	3,594	18,510	14,125	32,635	2
Nevada	2,623	17,539	11,822	29,361	3
Oregon	641	15,557	9,698	25,255	4

SOURCE: Social Security Administration, Program Operations Manual System (POMS), SI 02302.200, Charted Threshold Amounts.

- a. Twice the annual state supplementation rate, if any, for an individual living independently.
- b. The base amount is the annual amount of earned income it takes to reduce the annual SSI federal plus state benefit to zero. It is calculated as the sum of twice the state individual supplementation rate plus \$14,916; \$14,916 is the amount of earned income it takes in calendar year 2005 to reduce the annual federal benefit to zero, based on the monthly calculation (\$85 plus twice the monthly federal benefit rate of \$579) multiplied by 12.
- c. The threshold is the sum of the base amount and the state per capita Medicaid expenditure.