

## Indiana

### **State Supplementation**

#### **Mandatory Minimum Supplementation**

No recipients.

#### **Optional State Supplementation**

**Administration:** Family and Social Services Administration, Division of Aging.

**Effective date:** July 1, 1976.

**Statutory basis for payment:** Indiana Public Law 46, Acts of 1976.

#### **Funding**

*Administration:* State funds.

*Assistance:* State funds.

**Passalong method:** Maintaining payment levels.

**Place of application:** Family and Social Services Administration, county offices of the Division of Family Resources.

**Scope of coverage:** Optional state supplement provided to all adult Medicaid or SSI recipients who, because of age, blindness, or disability, are unable to reside in their own home and need care in a residential facility. Children under age 18 are not eligible for optional supplementation.

**Resource limitations:** An individual may have a reserve of nonexempt real and personal property (including cash, stocks, bonds, cash surrender value of life insurance, etc.) of no more than \$1,500; a couple may have no more than \$2,250. If spouse resides in the same facility, the resources of both, subject to the \$2,250 limit, are considered in establishing eligibility. Ownership of personal property essential for an adequate living arrangement, production of produce for home consumption, and personal effects do not affect an individual's eligibility. Cash surrender value of life insurance is disregarded if the face value does not

exceed \$10,000 and the beneficiary is the funeral director or the person's estate. The \$10,000 limitation is reduced by any amount in an irrevocable burial trust or irrevocable prepaid funeral arrangement. Real property offered for sale or rent is exempt.

**Income exclusions:** Disregarded from sheltered workshop earnings are a \$16 employment incentive, mandatory earnings deductions, and one-half of the remaining earnings.

**Recoveries, liens, and assignments:** None.

**Financial responsibility of relatives:** Spouse for spouse when residing in the same facility.

**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.

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

State does not provide assistance for special needs.

### **Medicaid**

#### **Eligibility**

**Criteria:** State guidelines.

**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.

**Table 1.**  
**Optional state supplementation payment levels, January 2006 (in dollars)**

| Living arrangement                         | Combined federal and state |        | State supplementation |        |
|--|----------------------------|--------|-----------------------|--------|
|  | Individual                 | Couple | Individual            | Couple |
| Licensed residential facility <sup>a</sup> | 1,196.90                   | b      | 593.90                | b      |
| Medicaid facility                          | 52.00                      | 104.00 | 22.00                 | 44.00  |

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

- a. Individuals living in licensed residential facilities receive a combined federal and state benefit of up to \$1,196.90 (state-supplemented portion is up to \$593.90)—including a personal allowance payment of up to \$52 per month. Lesser amounts may be paid depending on the cost of facility and income of recipients.
- b. Federal and state agencies consider couples residing in these living arrangements as individuals one month after leaving an independent living arrangement.

DEFINITIONS:

**Licensed residential facility.** Care in a licensed residential facility consists only of room, board, and laundry together with minimal administrative direction. The facility must be licensed by the state Department of Health and approved for participation in the Room and Board Assistance program by the state Family and Social Services Administration. A residential facility can be publicly or privately owned and for profit or not for profit.

**Medicaid facility.** Includes recipients residing in a federal Code D living arrangement.

**Table 2.**  
**Number of persons receiving optional state supplementation, January 2006**

| Living arrangement            | Total | Aged  | Blind | Disabled |
|-------------------------------|-------|-------|-------|----------|
| All recipients                | 3,513 | 1,006 | 19    | 2,488    |
| Licensed residential facility | 1,252 | 398   | 1     | 853      |
| Medicaid facility             | 2,261 | 608   | 18    | 1,635    |

SOURCE: State information.