### Alaska

#### State Supplementation

**Mandatory State Supplementation**

No recipients.

**Optional State Supplementation**

**Administration:** Department of Health and Social Services, Division of Public Assistance.

**Effective date:** January 1, 1974.

**Statutory basis for payment:** Alaska Statutes 47.25.430-47.25.615.

**Funding**

**Administration:** State funds.

**Assistance:** State funds.

**Passalong method:** Maintaining total expenditures.

**Place of application:** Local offices of the state Department of Health and Social Services, Division of Public Assistance.

**Scope of coverage:** Optional state supplement provided to all needy aged, blind, and disabled persons, including certain grandfathered persons who would receive SSI payments except for their income level but excluding persons in the Alaska Pioneer Homes, in any nonmedical public institution, or in public or private institutions for mental disorders. Children under age 18 are not eligible for optional supplementation.

**Resource limitations:** Federal SSI regulations apply.

**Income exclusions:** Federal SSI regulations apply; in-kind income is also excluded.

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

**Financial responsibility of relatives:** Child for aged parent.

**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. For non-SSI recipients, any countable income is subtracted from the state standard.

**Payment levels:** See Table 1.

**Number of recipients:** See Table 2.

**Total expenditures:** The state reported expenditures of $52,550,523 for calendar year 2006 in state-administered payments to SSI recipients.

#### State Assistance for Special Needs

State does not provide assistance for special needs.

#### 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.
### Table 1.
Optional state supplementation payment levels, January 2007 (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</td>
<td>985.00</td>
<td>1,462.00</td>
</tr>
<tr>
<td>Living independently with an ineligible spouse</td>
<td>1,144.00</td>
<td>. . .</td>
</tr>
<tr>
<td>Living in the household of another</td>
<td>783.34</td>
<td>1,165.67</td>
</tr>
<tr>
<td>Living in the household of another with an ineligible spouse</td>
<td>879.34</td>
<td>. . .</td>
</tr>
<tr>
<td>Assisted living home</td>
<td>723.00</td>
<td>1,134.00</td>
</tr>
<tr>
<td>Assisted living home with an ineligible spouse</td>
<td>723.00</td>
<td>. . .</td>
</tr>
<tr>
<td>Medicaid facility</td>
<td>75.00</td>
<td>150.00</td>
</tr>
</tbody>
</table>

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

**NOTE:** . . . = not applicable.

**DEFINITIONS:**

**Living independently.** Includes eligible persons who:
- Live alone in their own household, whether or not receiving in-kind support and maintenance;
- Live alone or with a minor child, spouse, or anyone whose income is deemed available to them;
- Live in a household in which all members receive federal or state public assistance;
- Live in the household of another and pay at least a prorated share of the household expenses; or
- Live in the household of another where the eligible person or deemor has an ownership interest in the home or is liable to the landlord for any part of the rent.

**Living in the household of another.** Includes eligible persons who reside in another’s household for a full calendar month, except for temporary absences, and receive both food and shelter from that person.

**Assisted living home.** Includes eligible persons who reside in an assisted living home for a full calendar month.

**Medicaid facility.** Includes recipients who reside for a full calendar month in a skilled nursing facility or an intermediate care facility that is certified and licensed by the Alaska Department of Health and Social Services to provide long-term care.

### Table 2.
Number of persons receiving optional state supplementation, January 2007

<table>
<thead>
<tr>
<th>Living arrangement</th>
<th>Total</th>
<th>Aged</th>
<th>Blind</th>
<th>Disabled</th>
</tr>
</thead>
<tbody>
<tr>
<td>All recipients</td>
<td>15,768</td>
<td>4,982</td>
<td>84</td>
<td>10,702</td>
</tr>
<tr>
<td>Living independently</td>
<td>14,167</td>
<td>4,575</td>
<td>80</td>
<td>9,512</td>
</tr>
<tr>
<td>Living in the household of another</td>
<td>601</td>
<td>145</td>
<td>0</td>
<td>456</td>
</tr>
<tr>
<td>Assisted living home</td>
<td>936</td>
<td>238</td>
<td>4</td>
<td>694</td>
</tr>
<tr>
<td>Medicaid facility</td>
<td>64</td>
<td>24</td>
<td>0</td>
<td>40</td>
</tr>
</tbody>
</table>

**SOURCE:** State information.

**NOTE:** Includes certain grandfathered non-SSI recipients who meet state eligibility criteria.