Montana

State Supplementation

Mandatory Minimum Supplementation

Administration: Social Security Administration.

Optional State Supplementation

Administration: Social Security Administration.

Effective date: July 1, 1974.

Statutory basis for payment: Montana Code Annotated 52-1-104.

Funding
Administration: State funds.
Assistance: State funds.

Passalong method: Maintaining payment levels.

Place of application: Developmental Disabilities and Adult Protective Services District Offices, Child and Family Services Division of the Department of Public Health and Human Services, and other designated contracting agencies.

Scope of coverage: Optional state supplement provided to all persons residing in specified living arrangements.

Resource limitations: Federal SSI regulations apply.

Income exclusions: Federal SSI regulations apply.

Recoveries, liens, and assignments: None.

Financial responsibility of relatives: None.

Interim assistance: State participates.

Payment calculation method: The state supplementation is added to the federal payment. Countable income is deducted first from the federal payment. Any income that remains to be counted after the federal payment has been reduced to zero is then deducted from the state supplementary payment.

Payment levels: See Table 1.

Number of recipients: See Table 2.

Total expenditures: The Social Security Administration reported expenditures of $972,000 for calendar year 2007 in federally 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: 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 does not obtain this information.
### Table 1.
**Optional state supplementation payment levels, January 2008 (in dollars)**

<table>
<thead>
<tr>
<th>Living arrangement</th>
<th>State code</th>
<th>Combined federal and state</th>
<th>State supplementation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Individual</td>
<td>Couple</td>
</tr>
<tr>
<td>Assisted living facility</td>
<td>G</td>
<td>731.00</td>
<td>1,149.00</td>
</tr>
<tr>
<td>Group home for the mentally ill or disabled</td>
<td>H</td>
<td>731.00</td>
<td>1,149.00</td>
</tr>
<tr>
<td>Community home for the physically or developmentally disabled</td>
<td>I</td>
<td>731.00</td>
<td>1,149.00</td>
</tr>
<tr>
<td>Child and adult foster care home</td>
<td>J</td>
<td>689.75</td>
<td>1,066.50</td>
</tr>
<tr>
<td>Transitional living services for the developmentally disabled</td>
<td>K</td>
<td>663.00</td>
<td>1,013.00</td>
</tr>
</tbody>
</table>

**NOTE:** Up to $100 may be retained per month as a personal needs allowance, depending on the facility.

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

**DEFINITIONS:**

**G: Assisted living facility.** A facility that provides 24-hour personal care services to five or more persons who do not need skilled nursing care. Personal care services include help with eating, walking, dressing, bathing, etc., as well as supervision, local transportation, and protective oversight. These facilities must be licensed by the Department of Public Health and Human Services. Residents must:
- Be 18 years of age or older,
- Be ambulatory,
- Not be incontinent, and
- Not need chemical or physical restraints.

**H: Group home for the mentally ill or disabled.** Provides residential services to mentally ill persons in the community. Must have current license from the Department of Public Health and Human Services.

**I: Community home for the physically or developmentally disabled.** Homes for the developmentally disabled provide a family-type residence and related residential services to persons with developmental disabilities. Children can be residents of these homes. Homes for the severely disabled provide a home-like residence for two to eight severely disabled persons. Persons with a primary diagnosis of mental illness are not included in the latter homes. These homes must be licensed by the Department of Public Health and Human Services.

**J: Child and adult foster care home.** A children's foster home is a licensed home that provides care to a child. An adult foster home is a home licensed by the Department of Public Health and Human Services that provides personal and custodial care to disabled adults or aged persons.

**K: Transitional living services for the developmentally disabled.** This program provides an intermediate step between the group home and independent living. It consists of persons living in congregate apartments with some staff supervision. Staff provide assistance in such areas of daily living as cooking, shopping, and cleaning.

### Table 2.
**Number of persons receiving optional state supplementation, January 2008**

<table>
<thead>
<tr>
<th>Living arrangement</th>
<th>State code</th>
<th>Total</th>
<th>Aged</th>
<th>Blind</th>
<th>Disabled</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Adults</td>
</tr>
<tr>
<td>All recipients</td>
<td></td>
<td>1,030</td>
<td>35</td>
<td>13</td>
<td>874</td>
</tr>
<tr>
<td>Assisted living facility</td>
<td>G</td>
<td>75</td>
<td>32</td>
<td>0</td>
<td>43</td>
</tr>
<tr>
<td>Group home for the mentally ill or disabled</td>
<td>H</td>
<td>92</td>
<td>0</td>
<td>0</td>
<td>92</td>
</tr>
<tr>
<td>Community home for the physically or developmentally disabled</td>
<td>I</td>
<td>738</td>
<td>0</td>
<td>11</td>
<td>727</td>
</tr>
<tr>
<td>Child and adult foster care home</td>
<td>J</td>
<td>118</td>
<td>3</td>
<td>2</td>
<td>5</td>
</tr>
<tr>
<td>Transitional living services for the developmentally disabled</td>
<td>K</td>
<td>7</td>
<td>0</td>
<td>0</td>
<td>7</td>
</tr>
</tbody>
</table>

**SOURCE:** Social Security Administration, Supplemental Security Record, 100 percent data.