

## 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<sup>1</sup>:** The state reported expenditures of \$53,949,347 for calendar year 2009 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.

1. Includes payments made to some non-SSI recipients who meet state eligibility criteria, but do not meet federal SSI eligibility guidelines.

**Table 1.**  
**Optional state supplementation payment levels, January 2010 (in dollars)**

Living arrangement	Combined federal and state		State supplementation	
	Individual	Couple	Individual	Couple
Living independently	1,036.00	1,539.00	362.00	528.00
Living independently with an ineligible spouse	1,195.00	...	521.00	...
Living in the household of another	817.34	1,217.00	368.00	543.00
Living in the household of another with an ineligible spouse	913.34	...	464.00	...
Assisted living home	774.00	1,211.00	100.00	200.00
Assisted living home with an ineligible spouse	774.00	...	100.00	...
Medicaid facility	75.00	150.00	45.00	90.00

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 2010**

Living arrangement	Total	Aged	Blind	Disabled
All recipients	16,818	4,997	82	11,739
Living independently	14,833	4,568	75	10,190
Living in the household of another	733	135	0	598
Assisted living home	1,172	276	7	889
Medicaid facility	80	18	0	62

SOURCE: State information.

NOTE: Includes some non-SSI recipients who meet state eligibility criteria, but do not meet federal SSI eligibility guidelines.

# Idaho

## 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.

**Statutory basis for payment:** Idaho State Code 56-207, 56-208, 56-209a.

#### 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. 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; in-kind support and maintenance is also excluded unless received as wages.

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

**Financial responsibility of relatives:** Spouse for spouse; parent or stepparent for minor child.

**Interim assistance:** State does not participate.

**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. The maximum payment amount for individuals and couples living independently is \$53.

**Payment levels:** See Table 1.

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

**Total expenditures:** The state reported expenditures of \$8,544,929 for calendar year 2009 in state-administered payments to SSI recipients.

**Table 1.**  
**Optional state supplementation payment levels, January 2010 (in dollars)**

Living arrangement	Combined federal and state		State supplementation	
	Individual	Couple	Individual	Couple
Living independently or in the household of another <sup>a</sup>	727.00	1,031.00	53.00	20.00
Living with an essential person	1,064.00	. . .	52.00	. . .
Room and board facility	872.00	b	198.00	b
Assisted living facility or certified family home				
Level I	1,013.00	b	339.00	b
Level II	1,080.00	b	406.00	b
Level III	1,147.00	b	473.00	b
Semi-independent group residential facility	872.00	b	198.00	b

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

NOTE: . . . = not applicable.

a. State supplement is increased to offset the reduced federal payment for persons living in the household of another. The payment amount is capped at \$53 for individuals and couples living independently.

b. Couples are treated as two individuals starting with the month after leaving an independent living arrangement.

**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.

**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.

**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.

**Table 2.**  
**Number of persons receiving optional state supplementation, January 2010**

Living arrangement	Total	Aged	Blind	Disabled	
				Adults	Children
All recipients	15,072	2,321	43	11,463	1,245
Living independently or in the household of another, or living with an essential person	14,506	2,277	42	10,998	1,189
Room and board facility	493	34	1	402	56
Assisted living facility or certified family home	58	9	0	49	0
Semi-independent group residential facility	15	1	0	14	0

SOURCE: State information.

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**State Assistance for Special Needs**

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**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 service animals:** Allowance for care and maintenance of service animals of up to \$17 per month.

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**Medicaid**

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**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.

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## Oregon

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### **State Supplementation**

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#### **Mandatory Minimum Supplementation**

No recipients.

#### **Optional State Supplementation**

The state does not provide optional supplementation.

**Interim assistance:** State participates.

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

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#### **Administration**

State Department of Human Services, Seniors, and People with Disabilities.

#### **Special Needs Circumstances**

**Community-based care:** Eligible for payment for room and board during the month of admission at the initial placement. Room and board payments may be paid to the community-based facility during the temporary absence.

**Special diet:** An ongoing payment for a special diet will be allowed if need has been established by a physician and the recipient would be in an imminent life-threatening situation without the diet.

**Restaurant meals:** Ongoing payments to recipients living in their own home who are unable to prepare their own meals.

**Laundry allowances:** Recipients are eligible for an ongoing laundry allowance if they have excessive costs for coin-operated laundry facilities.

**Telephone allowances:** Telephone allowances may be provided when the recipient is unable to leave their residence without assistance due to a documented medical condition.

**Food for guide dogs and special assistive animals:** Payment for food will be made for trained guide dogs or special assistive animals.

**Home repairs:** The repairs must be needed to remove a physical hazard to the health and safety of the recipient.

**Property taxes:** Recipients who are homeowners or homebuyers are allowed a special need of one year of

delinquent real property taxes, penalties, and interest if needed to prevent imminent foreclosure.

**Moving costs:** The Department will authorize payment for the cost of moving a recipient's household effects if moving is essential to provide nonhazardous housing, the recipient has been evicted for reasons other than his or her own neglect, or the move is a result of domestic violence.

**Accommodation allowance:** A temporary accommodation allowance may be authorized when the recipient leaves his or her home or rental property and enters a hospital, state psychiatric institution, nursing facility, or community-based care facility. Additionally, a recipient may receive an accommodation allowance if the recipient's shelter cost exceeds the shelter standard and the recipient has a documented increase in costs.

**Prescription co-pay coverage:** An individual who pays \$10 or more per month for prescription co-pays may qualify for this payment.

**Transportation services:** An individual who incurs a cost for transportation services that are not covered by another source (such as their medical insurance or waived service plans) may qualify for this payment. These payments are for transportation services to non-medical activities. Transportation services do not include purchase of vehicle, vehicle maintenance or repair, reimbursement for travel expenses or mileage, or transportation services that may be obtained through other means. The maximum payment is \$25 per month.

**Spousal facility allowance:** Spouses who each receive SSI and services in a community-based care facility are eligible for a payment that equals the difference between the OSIPM standard for a one-person need group and the individual's total countable income. If one spouse has income above the OSIPM standard, the excess income is applied to the other spouse's countable income.

### **Medicaid**

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#### **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.

## Washington

### State Supplementation

#### Mandatory Minimum Supplementation

**Administration:** State administration.

#### Optional State Supplementation

**Administration:** State Department of Social and Health Services.

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

**Statutory basis for payment:** State law in Revised Code of Washington 74.04.600-74.04.630 and state policy in Washington Administrative Code 388-474.

#### Funding

*Administration:* State funds.

*Assistance:* State funds.

**Passalong method:** Maintaining total expenditures.

**Place of application:** Social Security Administration field offices.

**Scope of coverage:** Optional state supplement provided to all needy aged, blind, and disabled persons, including children and recipients with an ineligible spouse.

**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.

**Payment levels:** See Table 1.

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

**Total expenditures:** The state reported expenditures of \$29,030,208.20 for calendar year 2009 in state-administered payments to SSI recipients.

### State Assistance for Special Needs

#### Administration

State Department of Social and Health Services, Economic Services Administration, Division of Employment and Assistance Programs.

#### Special Needs Circumstances

**Guide dog:** Food for service animal at the rate of \$33.66 per month.

#### Other utility charges

*Telephone:* Amount varies according to need and location.

*Laundry:* \$11.13 per month.

#### Meals

*Restaurant meals:* \$187.09 per month; \$6.04 per day.

*Home-delivered meals:* The amount charged by the agency delivering the service.

### 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 obtains this information.

**Table 1.**  
**Optional state supplementation payment levels, January 2010 (in dollars)**

Living arrangement	Combined federal and state		State supplementation	
	Individual	Couple	Individual	Couple
Living independently <sup>a</sup>	720.00	1,103.00	46.00	92.00
Living with an ineligible spouse <sup>b</sup>	720.00	...	46.00	...
Living in the household of another	495.34	766.00	46.00	92.00
Living in the household of another with an ineligible spouse	495.34	...	46.00	...
Medicaid facility	57.28	107.36	27.28	47.36

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

NOTE: ... = not applicable.

a. Includes persons in congregate care group facilities.

b. Applies only to cases converted from former state assistance programs.

**DEFINITIONS:**

**Living independently.** Applies to recipients residing in a federal Code A or C living arrangement unless they are living with an ineligible spouse or temporarily residing in a medical institution.

**Living with an ineligible spouse.** Applies to recipients who are living independently with a spouse who does not qualify for SSI payments.

**Living in the household of another.** Applies to recipients residing in a federal Code B living arrangement unless they are living with an ineligible spouse or temporarily residing in a medical institution.

**Living in the household of another with an ineligible spouse.** Includes recipients residing in a federal Code B living arrangement who have an ineligible spouse.

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

**Table 2.**  
**Number of persons receiving optional state supplementation, January 2010**

Living arrangement	Total	Aged	Blind	Disabled
All recipients	35,014	15,621	853	18,540
Living independently	28,958	14,397	787	13,774
Living with an ineligible spouse	3,694	652	47	2,995
Living in the household of another	2,237	498	18	1,721
Living in the household of another with an ineligible spouse	52	34	0	18
Medicaid facility	39	13	1	25
Other	34	27	0	7

SOURCE: State information.