MISSOURI 1/1/00

OPTIONAL STATE SUPPLEMENTATION

STATUTORY BASIS FOR PAYMENT

Supplemental aid to the blind: Revised Missouri Statutes, Section 209. All other supplementation: Revised Missouri

Statutes, Section 208.030, Subchapter 5.

EFFECTIVE DATE January 1, 1974.

ADMINISTRATION 1 Department of Social Services; Division of Family Service (DFS).

PASSALONG In compliance by the method of maintaining all payment levels.

SCOPE OF COVERAGE Optional State supplement provided to any person who:

1) is aged, blind, or disabled, and over age 18,

2) does not reside in a Medicaid facility,

3) does reside in a licensed residential care facility or a licensed intermediate care/skilled nursing home, and

4) has insufficient cash income to cover costs of care in the

facility.

Blind persons over age 18 living on their own are also provided a supplement.

RECOVERIES, None.

LIENS, AND **ASSIGNMENTS**

RELATIVE RESPONSIBILITY

INCOME There are no income disregards for the aged or disabled.

DISREGARDS Disregards for the blind include the first \$65 plus one-half of the

remainder of earned income.

RESOURCE Aged/disabled - \$999.99 individual/\$2,000 couple.

Spouse for spouse.

LIMITATIONS Blind - \$2,000 individual/\$4,000 couple.

PLACE OF

APPLICATION

Offices of the Division of Family Services .

FUNDING Assistance: State funds.

Administration: State funds.

INTERIM

ASSISTANCE

State participates.

¹ Mandatory minimum supplementation is administered by the same agency as optional supplementation.

1/1/00 MISSOURI

PAYMENT LEVELS 1

	Combined Federal/State		State supplementation	
Living arrangements	<u>Individual</u>	<u>Couple</u>	<u>Individual</u>	<u>Couple</u>
Licensed residential care facility I	\$666.00	\$1,077.00	\$154.00	\$308.00
Licensed residential care facility II	800.00	1,345.00	288.00	576.00
Licensed intermediate care or skilled nursing home ²	895.00	1,535.00	383.00	766.00
Aid to the blind	(3)	(4)	391.00	782.00

STATE ASSISTANCE FOR SPECIAL NEEDS

State has elected not to provide assistance for special needs.

MEDICAID

ELIGIBILITY:

CRITERION State guidelines.

DETERMINED BY State.

MEDICALLY NEEDY

PROGRAM

No program for the aged, blind, or disabled medically needy.

UNPAID MEDICAL EXPENSES

The Social Security Administration does not obtain this

information.

¹ Unless otherwise stated, payment levels apply equally to aged, blind, and disabled.

Recipients in licensed nursing homes are entitled to an additional \$25 per month to meet their personal needs. If the recipient is already receiving a personal needs allowance from another State or Federal agency, this payment will not be made by DFS.

³ Only those recipients who receive less than \$512 monthly in SSI payments and less than \$554 monthly from other sources qualify for this supplement. The State supplement is reduced dollar-for-dollar by the SSI payment.