OPTIONAL STATE SUPPLEMENTATION

STATUTORY BASIS FOR PAYMENT	Colorado Revised Statutes (CRS) 26-2, Section 202-209, 1973 as amended.
EFFECTIVE DATE	January 1, 1974.
ADMINISTRATION ¹	State Department of Human Services (State-supervised with local administration).
PASSALONG	In compliance by the method of total expenditures.
SCOPE OF COVERAGE	Optional State supplement provided to SSI recipients in living arrangements listed under "Payment Levels." Persons living in the household of another are included under the living independently standard; State supplement is increased to offset the reduced Federal payment. At age 65, a disabled recipient may elect to transfer to the aged category or remain in the disabled category. Blind and disabled children are eligible for State supplementation.
RECOVERIES, LIENS, AND ASSIGNMENTS	None.
RELATIVE RESPONSIBILITY	Spouse for spouse.
INCOME DISREGARDS	No disregards in addition to the Federal income disregards.
RESOURCE LIMITATIONS	Resources are considered property. Current market value of property is used in determining resources and only net value of property (after deducting the amount of indebtedness or encumbrances) is considered. Basic resource limitation is \$2,000 for an individual and \$3,000 for a couple or the same as SSI.
PLACE OF APPLICATION	County Human Services offices.

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

COLORADO

FUNDING	Assistance: Administration:	80 perc funds f	rcent State funds cent State funds for the blind and cent State funds	s, 20 percent l 1 disabled.	ocal
INTERIM ASSISTANCE	State participate	es.			
PAYMENT LEVELS 1					
	Con	nbined F	ederal/State	State supple	ementation
Living arrangements	Indi	<u>ividual</u>	<u>Couple</u>	<u>Individual</u>	<u>Couple</u>
Living independently: Aged Blind and disabled		548.00 512.00	\$1,096.00 1,024.00	\$36.00 	² \$327.00 255.00
Adult foster care ³		742.00		230.00	
Home care: ⁴ Aged Blind and disabled Individual with essenti spouse:		944.00 908.00		432.00 396.00	
Blind and disabled		769.00		257.00	

¹ Unless otherwise stated, payment levels apply equally to aged, blind, and disabled. Persons in Medicaid facilities who have other sources of income are allowed to keep \$50.00 per month as a personal need allowance.

² Combined Federal/State payment level also applies to persons living in the home of another. State supplement is increased to offset the reduced Federal payment for this living arrangement.

³ Couples residing in these living arrangements are treated as individuals the month after leaving an independent living arrangement.

⁴ Represents maximum allowance. Lesser amounts may be paid according to the amount of home care needed.

STATE ASSISTANCE FOR SPECIAL NEEDS

ADMINISTRATION	State Department of Social Services ¹
SPECIAL NEEDS CIRCUMSTANCES	Funeral expenses. If costs of funeral home/cemetery do not exceed \$2,500, the benefit maximum is \$1,500. If costs exceed \$2,500, no assistance is provided.

MEDICAID

CRITERION	SSI program guidelines (title XVI).
DETERMINED BY	Social Security Administration.
MEDICALLY NEEDY PROGRAM	No program for the aged, blind, and disabled medically needy.
UNPAID MEDICAL EXPENSES	The Social Security Administration obtains this information.

¹ At their option, county social services boards may provide optional supplementation for other special need circumstances.

MONTANA

OPTIONAL STATE SUPPLEMENTATION

STATUTORY BASIS FOR PAYMENT	Montana codes annotated 52-1-104.
EFFECTIVE DATE	July 1, 1974.
ADMINISTRATION ¹	Social Security Administration.
PASSALONG	In compliance by the method of maintaining all payment levels.
SCOPE OF COVERAGE	Optional State supplement provided to persons residing in State certified care facilities listed under "Payment Levels." All disabled children, including the blind, who are eligible for SSI and reside in a certified foster home are eligible to receive the State supplement.
RECOVERIES, LIENS, AND ASSIGNMENTS	None.
RELATIVE RESPONSIBILITY	None.
INCOME DISREGARDS	No disregards in addition to the Federal income disregards.
RESOURCE LIMITATIONS	Federal SSI resource limitations apply.
PLACE OF APPLICATION	Social Security Administration field offices.
FUNDING	Assistance: State funds. Administration: State funds.
INTERIM ASSISTANCE	State participates.

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

PAYMENT LEVELS 1

		Combined Fe	deral/State	State supple	mentation
<u>Code</u>	Living arrangements	<u>Individual</u>	<u>Couple</u>	Individual	<u>Couple</u>
G	Personal care facilities	\$606.00	\$962.00	\$94.00	\$193.00
Η	Group home for the mentally ill or disabled	606.00	962.00	94.00	193.00
Ι	Community home for physically or developmentally disabled	606.00	962.00	94.00	193.00
J	Child and adult foster care	564.75	879.50	52.75	110.50
K	Transitional living services for developmentally disabled	538.00	826.00	26.00	57.00

STATE ASSISTANCE FOR SPECIAL NEEDS

State does not provide assistance for special needs.

MEDICAID

CRITERION	SSI program guidelines (title XVI).
DETERMINED BY	Social Security Administration.
MEDICALLY NEEDY PROGRAM	Program for the aged, blind, and 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. All care facilities must be State certified. Developmentally disabled persons in transitional living facilities are allowed to retain at least \$40, as a personal needs allowance. All other persons eligible for a State supplement in State certified facilities are allowed to retain up to \$40, as a personal needs allowance.

NORTH DAKOTA

OPTIONAL STATE SUPPLEMENTATION¹

STATUTORY BASIS FOR PAYMENT	North Dakota Century Code Chapter 50-24.
EFFECTIVE DATE	January 1, 1974, county based; September 1, 1994 Expanded Spec; January 1, 1995 Basic Care Program.
ADMINISTRATION ²	State-administered through county social service boards.
PASSALONG	In compliance by the method of maintaining all payment levels.
SCOPE OF COVERAGE	Residential and in-home options for the aged, blind, and disabled SSI recipients coverage is limited to persons in licensed basic care facilities, licensed foster homes, or in-home services enabling the recipient to remain at home.
RECOVERIES, LIENS, AND ASSIGNMENTS	State law provides for recovery of supplementation from the estates of former recipients.
RELATIVE RESPONSIBILITY	At option of individual counties.
INCOME DISREGARDS	Cost of guardianship fee of up to 5% of the monthly gross income. Sixty-five dollars plus one-half of the remaining monthly gross earned income. Personal needs allowance of \$45.00.
RESOURCE LIMITATIONS	Federal Medicaid resource limitations apply.
PLACE OF APPLICATION	County social service boards.
FUNDING	Assistance: State funds. Administration: State funds.
INTERIM ASSISTANCE	State does not participate.

¹ State supplementation program known as Aid to the Aged, Blind and Disabled.

² Mandatory minimum supplementation is administered by the same agency as optional supplementation.

PAYMENT LEVELS ^{1 2}

Living arrangement	Combined Federal/State		State Supple	State Supplementation	
	<u>Individual</u>	<u>Couple</u>	<u>Individual</u>	<u>Couple</u>	
Licensed basic care					
Facility ^{3 4}	\$1,628.00	\$3,001.80	\$1,116.40	\$2,232.80	

STATE ASSISTANCE FOR SPECIAL NEEDS

ADMINISTRATION	County social service boards.
SPECIAL NEED CIRCUMSTANCES	At option of individual counties.
TRANSPORTATION COSTS, MEALS AND LODGING	Twenty-one cent per mile for obtaining medical services if recipient used own car. The cost of meals (\$20 per day) and lodging (up to \$35.00 per day) if verified as related to obtaining approved health services may be granted if the individual is away from home for 24 hours or more.

MEDICAID

ELIGIBILITY:

CRITERION	State guidelines.
DETERMINED BY	State.
MEDICALLY NEEDY PROGRAM	Program for the aged, blind, and disabled medically needy.
UNPAID MEDICAL EXPENSES	The Social Security Administration does not obtain this information.

¹ Basic Care Assistance Program pays a maximum of \$54.83 per day.

² In-home services pay \$30.00 a day or a maximum of \$900.00 monthly.

³ Couples residing in these living arrangements are treated as two individuals. ⁴ The State page the difference between the basis rate and the SSI payment on

⁴ The State pays the difference between the basic rate and the SSI payment, or any other income received by a recipient.

SOUTH DAKOTA

OPTIONAL STATE SUPPLEMENTATION¹

STATUTORY BASIS FOR PAYMENT	South Dakota Common Law 28-5A-1.
EFFECTIVE DATE	February 1, 1975.
ADMINISTRATION ²	Department of Social Services. State-administered in local offices for assisted living and foster-care home arrangements; State-administered in State office for independent arrangements.
PASSALONG	In compliance by the method of maintaining all payment levels.
SCOPE OF COVERAGE	Optional State supplement provided to SSI recipients who: 1) live independently and have no other source of income; or 2) have net incomes less than the supplementation levels and live in assisted living facilities or in adult foster-care homes. Blind and disabled children who meet the income and resource limitations and live in assisted living facilities or adult foster-care homes are eligible for optional supplementation.
RECOVERIES, LIENS, AND ASSIGNMENTS	None.
RELATIVE RESPONSIBILITY	None.
INCOME DISREGARDS	State disregards \$30 of the Federal SSI payment to recipients in assisted living facilities or foster-care homes.
RESOURCE LIMITATIONS	Federal SSI resource limitations apply.
PLACE OF APPLICATION	Local offices of State Department of Social Services for individuals in assisted living facilities or in adult foster-care homes. State uses information from the Social Security Administration to identify recipients who are living independently with no other income.
FUNDING	Assistance: State funds. Administration: State funds.

¹ The Social Security Administration was unable to receive verification from the state for the information included on pages 98 and 99.

² Mandatory minimum supplementation is administered by the Social Security Administration.

INTERIM ASSISTANCE

State does not participate.

PAYMENT LEVELS 1

		Combined F	ederal/State	State supple	ementation
Code Living arrang	<u>gements</u>	<u>Individual</u>	<u>Couple</u>	<u>Individual</u>	<u>Couple</u>
Living indep	endently	\$527.00	\$784.00	² \$15.00	³ \$15.00
Assisted livin	ng facility ^{3 4}	946.00		434.00	
Adult foster	care ⁴⁵	742.00		230.00	

STATE ASSISTANCE FOR SPECIAL NEEDS

State does not provide assistance for special needs.

MEDICAID

ELIGIBILITY:

CRITERION	SSI program guidelines (title XVI).
DETERMINED BY	Social Security Administration.
MEDICALLY NEEDY PROGRAM	No program for the aged, blind, or disabled medically needy.
UNPAID MEDICAL EXPENSES	The Social Security Administration obtains this information.

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

² Limited to SSI recipients with no other source of income.

³ Lesser amounts may be paid depending on cost of care in the facility. State provides an income disregard of \$30 per month of the Federal SSI payment.

⁴ Couples residing in these living arrangements are treated as individuals one month after leaving an independent living arrangement.

OPTIONAL STATE SUPPLEMENTATION

STATUTORY BASIS FOR PAYMENT	Appropriation Act for the Department of Social Services, 1978/79.
EFFECTIVE DATE	July 1, 1978.
ADMINISTRATION	Social Security Administration.
PASSALONG	In compliance by the method of maintaining all payment levels.
SCOPE OF COVERAGE	Optional State supplement provided to SSI recipients who are living alone or with others. Blind and disabled children are eligible for optional supplementation.
RECOVERIES, LIENS, AND ASSIGNMENTS	None.
RELATIVE RESPONSIBILITY	None.
INCOME DISREGARDS	No disregards in addition to the Federal income disregards.
RESOURCE LIMITATIONS	Federal SSI resource limitations apply.
PLACE OF APPLICATION	Social Security Administration field offices.
FUNDING	Assistance: State funds. Administration: State funds.
INTERIM ASSISTANCE	State participates.

UTAH

PAYMENT LEVELS 1

	Combined Fee	leral/State	State supple	mentation
Living arrangements	<u>Individual</u>	<u>Couple</u>	Individual	<u>Couple</u>
Living alone or with others	\$512.00	\$773.60		\$4.60
Living in the household of another	344.47	522.40	\$3.13	9.73
	Living alone or with others	Living arrangementsIndividualLiving alone or with others\$512.00	Living alone or with others \$512.00 \$773.60	Living arrangementsIndividualCoupleIndividualLiving alone or with others\$512.00\$773.60

STATE ASSISTANCE FOR SPECIAL NEEDS

State does not provide assistance for special needs.

MEDICAID

CRITERION	SSI program guidelines (title XVI).
DETERMINED BY	State.
MEDICALLY NEEDY PROGRAM	Program for the aged, blind, and 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.

WYOMING

OPTIONAL STATE SUPPLEMENTATION

STATUTORY BASIS FOR PAYMENT	Wyoming Statute 42-2-103.
EFFECTIVE DATE	July 1, 1977.
ADMINISTRATION ¹	Department of Family Services, Programs and Policy Division.
PASSALONG	In compliance by the method of maintaining all payment levels.
SCOPE OF COVERAGE	A State supplement is provided to aged, blind, and disabled persons who receive SSI as the sole source of their income, living independently or in household of another. Blind and disabled children may be eligible for supplementation.
RECOVERIES, LIENS, AND ASSIGNMENTS	None
RELATIVE RESPONSIBILITY	None.
INCOME DISREGARDS	No disregards in addition to Federal income disregards.
RESOURCE LIMITATIONS	Federal SSI resource limitations apply.
PLACE OF APPLICATION	No application required. State uses computerized information from the Social Security Administration to identify eligible recipients.
FUNDING	Assistance: State funds. Administration: State funds.
INTERIM ASSISTANCE	State does not participate.

¹ Mandatory minimum supplementation is administered by the same agency as optional supplementation. **118**

PAYMENT LEVELS 1

		Combined Fede	eral/State	State supplem	ientation
<u>Code</u>	Living arrangements	<u>Individual</u>	<u>Couple</u>	<u>Individual</u>	<u>Couple</u>
	Living independently	\$521.90	\$794.12	\$9.90	\$25.12
	Living in the household of another	354.75	543.03	13.41	30.36

STATE ASSISTANCE FOR SPECIAL NEEDS

State does not provide assistance for special needs.

MEDICAID

CRITERION	SSI program guidelines (title XVI).
DETERMINED BY	Social Security Administration.
MEDICALLY NEEDY PROGRAM	No program for the aged, blind, or disabled medically needy.
UNPAID MEDICAL EXPENSES	The Social Security Administration obtains this information.

¹ Unless otherwise stated, payment levels apply equally to aged, blind, and disabled. Persons in Medicaid facilities who have other income are allowed to keep \$30 per month as a personal need allowance.