OPTIONAL STATE SUPPLEMENTATION

STATUTORY BASIS

FOR PAYMENT

New Jersey Statutes Annotated, 44:7-86.

EFFECTIVE DATE January 1, 1974.

ADMINISTRATION ¹ Social Security Administration.

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

SCOPE OF COVERAGE

Optional supplement provided for every aged, blind, and disabled recipient except those in publicly operated community residences or facilities where Medicaid pays less than 50 percent of the cost of

care. Supplementation provided to recipients in approved

residential facilities. 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.

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

PAYMENT LE	VELS 2
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		Combined Federal/State		State supplementation	
<u>Code</u>	Living arrangements	<u>Individual</u>	<u>Couple</u>	<u>Individual</u>	<u>Couple</u>
A	Congregate care ³	\$650.05	\$1,281.36	\$150.05	\$530.36
В	Living alone or with others	531.25	776.36	31.25	25.36
C	Living alone with an ineligible spouse ⁴	772.36	N/A	272.36	N/A
C	Living with essential person ⁵	776.36	N/A	26.36	N/A
D	Living in household of another	377.65	593.76	44.31	93.09
G	Medicaid facility	40.00	80.00	10.00	20.00

STATE ASSISTANCE FOR SPECIAL NEEDS

tment of Human Se	ervices. Division (of Family Development.
ı	tment of Human S	tment of Human Services, Division o

SPECIAL NEED CIRCUMSTANCES

Emergency assistance for catastrophic events and burial and funeral payments. Eligibility for payments based on meeting requirements for mandatory minimum or optional State supplementary payments.

MEDICAID

ELIGIBILITY:

CRITERION SSI program standards (title XVI).

DETERMINED BY Social Security Administration.

MEDICALLY NEEDY PROGRAM

Program for the aged, blind, and disabled medically needy.

UNPAID MEDICAL EXPENSES

 $The \ Social \ Security \ Administration \ obtains \ this \ information.$

² Unless otherwise stated, payment levels apply equally to aged, blind, and disabled.

³ State supplement includes a \$67.50 personal needs allowance per person per month.

⁴ Federal criteria are used in determining an ineligible spouse. Applies to recipients who live either with only their ineligible spouse or with only their ineligible spouse and foster child(ren).

Payment levels for essential person apply only to cases converted from former State assistance programs.