

**OPTIONAL STATE SUPPLEMENTATION**

<b>STATUTORY BASIS FOR PAYMENT</b>	Chapter 51, Laws of 1976.
<b>EFFECTIVE DATE</b>	July 1, 1976.
<b>ADMINISTRATION</b> <sup>1</sup>	County offices of the Department Human Services (State-administered).
<b>PASSALONG</b>	In compliance by the method of maintaining all payment levels.
<b>SCOPE OF COVERAGE</b>	Optional State supplement provided to SSI recipients who reside in a licensed adult residential care home.
<b>RECOVERIES, LIENS, AND ASSIGNMENTS</b>	None.
<b>RELATIVE RESPONSIBILITY</b>	None.
<b>INCOME DISREGARDS</b>	No disregards in addition to the Federal income disregards.
<b>RESOURCE LIMITATIONS</b>	Federal SSI resource limitations apply.
<b>PLACE OF APPLICATION</b>	County offices of the Human Services Department.
<b>FUNDING</b>	Assistance: State funds. Administration: State funds.
<b>INTERIM ASSISTANCE</b>	State provides assistance only to individuals who have SSI applications pending.

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<sup>1</sup> Mandatory minimum supplementation is administered by the same agency as optional supplementation.

**PAYMENT LEVELS <sup>2</sup>**

<u>Living arrangements</u>	Combined Federal/State		State supplementation	
	<u>Individual</u>	<u>Couple</u>	<u>Individual</u>	<u>Couple</u>
Licensed adult residential care home	\$600.00	\$951.00	\$100.00	\$200.00

**STATE ASSISTANCE FOR SPECIAL NEEDS****ADMINISTRATION**

County offices of Human Services Department (State-administered).

**SPECIAL NEED CIRCUMSTANCES**

Burial expenses provided for deceased SSI recipients including disabled recipients who received special monthly benefits under Section 1619(a) of the Social Security Act. Payment of up to \$200 toward funeral expenses if available resources of the deceased are insufficient to cover costs and no other person will assume expenses. No payment is made when resources available from all sources total \$600 or more.

**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 does not obtain this information.

<sup>2</sup> 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 \$30 a month as a personal needs allowance. Persons in intermediate care facilities for mental retardation (ICFMR) working in sheltered workshops can keep up to \$100 a month of their earnings in addition to the \$30 per month.