

## APPENDIX B

Summary of selected features of State supplementation, the interim assistance reimbursement program, and Medicaid, January 1998

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Number of States <sup>1</sup>	Programs
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**STATE SUPPLEMENTATION**

**Number of States providing mandatory/optional supplementation**

35	Both mandatory and optional supplementation
5	Mandatory supplementation only
9	Optional supplementation only (no recipients in mandatory supplementation)
2	No supplementation

**Mandatory supplementation, type of administration selected by States**

21	Federal administration
19	State administration
9	No recipients to supplement
2	No mandatory supplementation program

**Optional supplementation, type of administration selected by States**

11	Federal administration
28	State administration
5	Federal/State administration
7	No optional supplementation program

**INTERIM ASSISTANCE REIMBURSEMENT PROGRAM**

39	Participate in program
10	Do not participate in program
2	Not applicable, no supplementation

**MEDICAID PROGRAM**

1	County determination of eligibility, State criteria
33	Federal determination of eligibility, title XVI criteria
17	State determination of eligibility
7	Title XVI criteria
10	State criteria

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<sup>1</sup> Includes the District of Columbia.