

**OPTIONAL STATE SUPPLEMENTATION**

<b>STATUTORY BASIS FOR PAYMENT</b>	District of Columbia Laws 2-35, as amended, and 3-23.
<b>EFFECTIVE DATE</b>	January 1, 1974.
<b>ADMINISTRATION<sup>1</sup></b>	Social Security Administration and District Department of Human Services, Income Maintenance Administration.
<b>PASSALONG</b>	In compliance by the method of total expenditures.
<b>SCOPE OF COVERAGE</b>	Optional supplement provided to persons residing in adult foster care homes who are eligible for SSI payments or would be eligible except for income. No statutory minimum age requirement for receiving adult foster care supplementation, but children receive assistance through child welfare services provisions.
<b>RECOVERIES, LIENS, AND ASSIGNMENTS</b>	None, except those cases in which liens were assigned prior to the establishment of the SSI program.
<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>	Department of Human Services, Income Maintenance Administration for adult foster-care home eligibility; Social Security Administration for payment eligibility. <sup>1</sup>
<b>FUNDING</b>	Assistance: District of Columbia funds. Administration: District of Columbia funds.

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<sup>1</sup> For the adult foster care supplement, the District determines eligibility and the Social Security Administration (SSA) administers the payment. For all other supplements, including mandatory minimum supplementation SSA determines eligibility and administers the payment.

**INTERIM ASSISTANCE**

District participates.

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

<u>Code</u>	<u>Living arrangements</u>	<u>Combined Federal/State</u>		<u>State supplementation</u>	
		<u>Individual</u>	<u>Couple</u>	<u>Individual</u>	<u>Couple</u>
A	Adult foster-care home (50 beds or less)	\$761.00	\$1,517.00	\$267.00	\$776.00
B	Adult foster-care home (over 50 beds)	871.00	1,737.00	377.00	996.00
G	Medicaid facility	70.00	140.00	40.00	80.00

**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**

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

**UNPAID MEDICAL EXPENSES**

The Social Security Administration obtains this information.

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<sup>2</sup> Unless otherwise stated, payment levels apply equally to aged, blind, and disabled.