

OPTIONAL STATE SUPPLEMENTATION

STATUTORY BASIS FOR PAYMENT	Chapter 249, Code of Iowa.
EFFECTIVE DATE	January 1, 1974 (blind), May 1, 1974 (aged and disabled).
ADMINISTRATION¹	Social Security Administration; State Department of Human Services.
PASSALONG	In compliance by the method of total expenditures.
SCOPE OF COVERAGE	Optional State supplement provided to aged, blind, and disabled persons living in the arrangements listed under "Payment Levels." Supplementation is not provided to residents of emergency shelters or medical facilities. Blind children are eligible for optional supplementary payments if living in their own household or with a dependent relative; disabled children are eligible for optional supplementation if living with a dependent relative.
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 district offices for federally administered payments; local offices of State Department of Human Services for State-administered payments.
FUNDING	Assistance: State funds. Administration: State funds.

¹ State Department of Human Services administers supplemental payments for persons receiving residential or in-home health-related care. Social Security Administration administers all other supplemental payments, including mandatory minimum supplementation.

**INTERIM
ASSISTANCE**

State participates.

PAYMENT LEVELS²

Code	<u>Living arrangements</u>	Combined Federal/State		State supplementation	
		<u>Individual</u>	<u>Couple</u>	<u>Individual</u>	<u>Couple</u>
A	Living independently: Blind	\$516.00	\$785.00 ³	\$22.00	\$44.00 ³
B	Living in household of another: Blind	351.34	538.00 ³	22.00	44.00 ³
C	Living with dependent person: Aged and disabled	741.00	988.00	247.00	247.00
	Blind	763.00	1,032.00 ³	269.00	291.00 ³
D	Family life or boarding home, or in the household of another	556.20	1,132.40	62.20	391.40
H	Living with dependent person in household of another: Aged and disabled	576.34	741.00	247.00	247.00
	Blind	598.34	785.00	269.00	291.00
I.	Family life or boarding home (one-third reduction in Federal benefit rate applies)	391.54	885.40	62.20	391.40
	Residential-care	791.06	N/A	297.06 ⁴	N/A
	In-home health care	941.16	1,635.32 ⁵	447.16 ⁶	894.32 ⁵

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

³ Payment level when both members of couple are blind; when one member blind, payment is reduced by \$22.

⁴ Represents maximum amount paid. Amount of State supplement is based on allowable costs of residential care (\$16.64 to \$23.26 per day) plus a personal needs allowance of \$70 per month minus the Federal SSI payment. Payment is State-administered.

⁵ Payment based on both members of a couple needing in-home health-related care. When only one member needs care, payment is reduced by \$447.16. Supplement is State-administered.

⁶ Payment based on actual cost of in-home health-related care up to a maximum of \$447.16 plus basic Federal benefit. Payment is State-administered.

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 NEEDED PROGRAM	Program for the aged, blind, and disabled medically needy.
UNPAID MEDICAL EXPENSES	The Social Security Administration obtains this information.