

Maine

State Supplementation

Mandatory Minimum Supplementation

Administration: Department of Human Services.

Optional State Supplementation

Administration: Department of Human Services.

Effective date: July 1, 1974.

Statutory basis for payment: Maine Revised Statutes, title 22, subtitle 3, part 1-A, chapter 855-A.

Funding

Administration: State funds.

Assistance: State funds.

Passalong method: Maintaining total expenditures.

Place of application: Local offices of the Department of Human Services.

Scope of coverage: Optional state supplement provided to all aged, blind, and disabled SSI recipients, including children. In addition, a small number of persons not eligible for SSI are eligible for a state supplement.

Resource limitations: Same as federal.

Income exclusions: Federal SSI income exclusions used for all living arrangements. In addition, for those living alone, with others, or in the household of another, the state disregards an additional \$55 for individuals and \$80 for couples.

Recoveries, liens, and assignments: None.

Responsibility of relatives: None.

Interim assistance: State participates.

Payment levels: See Table 1.

Number of recipients: In January 2002, 34,977 people were receiving optional state supplementation. Of those, 6,342 were aged, 119 were blind, and 28,536 were

disabled. Their distribution by living arrangements is as follows:

<u>Living arrangement</u>	<u>Number</u>
Living alone or with others	31,624
Living in the household of another	491
Living in a foster home	521
Living in a flat-rate boarding home	46
Living in a cost-reimbursement boarding home	2,067
Living in a Medicaid facility	228

State Assistance for Special Needs

Administration

Department of Human Services.

Special Needs Circumstances

Licensed boarding home subsidies: When costs of care exceed total of SSI and state supplementary payments, state will pay the difference up to established maximum rates.

Medicaid

Eligibility

Criteria: SSI program guidelines (Title XVI).

Determined by: Social Security Administration.

Medically Needy Program

State provides a program for the aged, blind, and disabled medically needy.

Unpaid Medical Expenses

The Department of Human Services obtains this information.

Table 1.
Optional state supplementation payment levels (in dollars)

Living arrangement	Combined federal and state		State supplementation	
	Individual	Couple	Individual	Couple
Living alone or with others	555.00	832.00	10.00	15.00
Living in the household of another	371.34	556.67	8.00	12.00
Living in a foster home	594.00	1,090.00	49.00	273.00
Living in a flat-rate boarding home	762.00	1,407.00	217.00	590.00
Living in a cost-reimbursement boarding home	764.00	1,438.00	219.00	621.00
Living in a Medicaid facility	40.00	80.00	10.00	20.00

DEFINITIONS:

Living alone or with others. Includes the following types of recipients:

- Individual living in his or her own household with no other person except an ineligible spouse;
- Couples living in their own household;
- Persons in a medical facility where Medicaid does not pay more than 50 percent of the cost of their care;
- Person in an institution (excluding inmates of public institutions) on the basis of their eligibility under section 611(e)(1)(E) of the Social Security Act for all or part of a month provided that Medicaid does not pay more than 50 percent of the cost of their care;
- Persons in a private-pay facility or private-pay portion of a licensed boarding home; or
- Individuals or couples living with other persons but not considered to be living in the household of another.

Living in the household of another. Includes eligible persons who:

- Live in a household other than their own throughout a month with at least one other person who is not their child, their spouse, or an ineligible person whose income is deemed to them; and
- Receive food and shelter from within that household.

Living in a foster home. Includes recipients residing in an adult foster home.

Living in a flat-rate boarding home. Includes recipients residing in a boarding home which is licensed by and has a provider agreement with the state for reimbursement at a flat rate.

Living in a cost-reimbursement boarding home. Includes recipients residing in a boarding home that is licensed by and has a provider agreement with the state for reimbursement based on cost.

Living in a Medicaid facility. Includes eligible persons who live in a public or private medical institution throughout a month and Medicaid is paying more than 50 percent of the cost of their care.