

Colorado

State Supplementation

Mandatory Minimum Supplementation

Administration: Colorado Department of Human Services.

Optional State Supplementation

Administration: Colorado Department of Human Services.

Effective date: January 1, 1974.

Statutory basis for payment: Colorado Revised Statutes 26-2, section 202-209, 1973, as amended.

Funding

Administration: 80 percent state funds, 20 percent local funds.

Assistance: 100 percent state funds for the aged; 80 percent state funds, 20 percent local funds for the blind and disabled.

Passalong method: Maintaining total expenditures.

Place of application: County Human Services offices.

Scope of coverage: Optional state supplement provided to all SSI recipients, including children, residing in the specified living arrangements (see Table 1). Persons living in the household of another are included under the living independently standard; state supplement is increased to offset the reduced federal payment. At age 65, a disabled recipient may elect to transfer to the aged category or remain in the disabled category.

Resource limitations: Same as federal. The net current market value of property (after deducting the amount of indebtedness or encumbrances) is considered in determining resources.

Income exclusions: Same as federal.

Recoveries, liens, and assignments: None.

Responsibility of relatives: Spouse for spouse.

Interim assistance: State participates.

Payment levels: See Table 1.

Number of recipients: See Table 2.

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

Living arrangement	Combined federal and state		State supplementation	
	Individual	Couple	Individual	Couple
Living independently or in the home of another ^a	582.00	1,164.00	37.00	347.00
Living in adult foster care	784.00	^b 1,559.00	239.00	^b 742.00
Receiving home care ^c	948.00	...	403.00	...

NOTE: ... = not applicable.

a. State supplement is increased to offset the reduced federal payment for persons living in the home of another.

b. Couples are treated as two individuals the month after leaving an independent living arrangement.

c. Represents maximum allowance. Lesser amounts may be paid according to the amount of home care needed.

DEFINITIONS:

Living independently or in the home of another. Includes recipients who reside in a federal Code A or B living arrangement, meet the state eligibility requirements, and do not qualify for other state arrangements.

Living in adult foster care. Includes recipients who reside in a federal Code A living arrangement and are residing in an approved supervised living facility known as an adult foster home.

Receiving home care. Includes recipients who receive care in their own home from qualified personnel and who would otherwise be in a nursing home if this care were unavailable.

Table 2.
Number of persons receiving optional state supplementation, January 2002

Living arrangement	Total	Aged	Blind	Disabled	
				Adults	Children ^a
All recipients	34,982	20,420	27	13,782	753
Living independently or in the home of another	29,238	17,548	15	11,278	397
Adult foster care	116	25	0	91	0
Home care	5,628	2,847	12	2,413	356

a. Includes blind children.

State Assistance for Special Needs

Administration

Colorado Department of Social Services.

Special Needs Circumstances

Funeral expenses: If cost of funeral home or cemetery does not exceed \$2,500, the benefit maximum is \$1,500. If cost exceeds \$2,500, no assistance is provided.

Other: County social services boards may choose to provide optional supplementation for other special needs circumstances.

Medicaid

Eligibility

Criteria: SSI program guidelines (Title XVI).

Determined by: Social Security Administration.

Medically Needy Program

State does not provide a program for the medically needy.

Unpaid Medical Expenses

The Social Security Administration obtains this information.

Montana

State Supplementation

Mandatory Minimum Supplementation

Administration: Social Security Administration.

Optional State Supplementation

Administration: Social Security Administration.

Effective date: July 1, 1974.

Statutory basis for payment: Montana Code Annotated 52-1-104.

Funding

Administration: State funds.

Assistance: State funds.

Passalong method: Maintaining payment levels.

Place of application: Developmental Disabilities and Adult Protective Services District Offices, Child and Family Services Division of the Department of Public Health and Human Services, and other designated contracting agencies.

Scope of coverage: Optional state supplement provided to persons residing in specified living arrangements (see Table 1). All disabled children, including the blind, who are eligible for SSI and reside in a certified foster home are eligible to receive the state supplement.

Resource limitations: Federal SSI resource limitations apply.

Income exclusions: Federal SSI income exclusions apply.

Recoveries, liens, and assignments: None.

Responsibility of relatives: None.

Interim assistance: State participates.

Payment levels: See Table 1.

Number of recipients: See Table 2.

State Assistance for Special Needs

State does not provide assistance for special needs.

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 Social Security Administration does not obtain this information.

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

Living arrangement	State code	Combined federal and state		State supplementation	
		Individual	Couple	Individual	Couple
Personal care facility	G	639.00	1,010.00	94.00	193.00
Group home for the mentally ill or disabled	H	639.00	1,010.00	94.00	193.00
Community home for the physically or developmentally disabled	I	639.00	1,010.00	94.00	193.00
Child and adult foster care home	J	597.75	927.50	52.75	110.50
Transitional living services for the developmentally disabled	K	571.00	874.00	26.00	57.00

NOTES: All care facilities must be state certified.

Up to \$100 may be retained per month as a personal needs allowance, depending on the facility.

DEFINITIONS:

G: Personal care facility. A facility that provides 24-hour personal care services to five or more persons who are not in need of skilled nursing care. Personal care services include help with eating, walking, dressing, bathing, etc., as well as supervision, local transportation, and protective oversight. These facilities must be licensed by the Department of Public Health and Human Services. Residents must:

- Be 18 years of age or older,
- Be ambulatory,
- Not be incontinent, and
- Not need chemical or physical restraints.

H: Group home for the mentally ill or disabled. Provides residential services to mentally ill persons in the community. Must have current license from the Department of Public Health and Human Services.

I: Community home for the physically or developmentally disabled. Homes for the developmentally disabled provide a family-type residence and related residential services to persons with developmental disabilities. Children can be residents of these homes. Homes for the severely disabled provide a home-like residence for two to eight severely disabled persons. Persons with a primary diagnosis of mental illness are not included in the latter homes. These homes must be licensed by the Department of Public Health and Human Services.

J: Child and adult foster care home. A children's foster home is a licensed home that provides care to a child. An adult foster home is a licensed home licensed by the Department of Public Health and Human Services that provides personal and custodial care to disabled adults or aged persons.

K: Transitional living services for the developmentally disabled. This program provides an intermediate step between the group home and independent living. It consists of persons living in congregate apartments with some staff supervision. Staff provide assistance in such areas of daily living as cooking, shopping, and cleaning.

Table 2.
Number of persons receiving optional state supplementation, January 2002

Living arrangement	State code	Total	Aged	Blind	Disabled	
					Adults	Children
All recipients		924	27	10	780	107
Personal care facility	G	65	18	1	46	0
Group home for the mentally ill or disabled	H	42	0	0	32	10
Community home for the physically or developmentally disabled	I	571	8	7	545	11
Child and adult foster care home	J	195	1	1	107	86
Transitional living services for the developmentally disabled	K	51	0	1	50	0

North Dakota

State Supplementation

Mandatory Minimum Supplementation

No recipients.

Optional State Supplementation

Administration: State-administered through county social service offices. Payments are made under the vendor payment program known as Aid to the Aged, Blind, and Disabled.

Effective date: July 1993.

Statutory basis for payment: North Dakota Century Code, chapter 50-24.5.

Funding

Administration: State funds.

Assistance: State and county funds.

Passalong method: Maintaining payment levels.

Place of application: County social service offices.

Scope of coverage: Coverage for residential and in-home options for aged, blind, and disabled SSI recipients is limited to adults in licensed basic care facilities or licensed foster homes and to those receiving in-home services enabling the recipient to remain at home.

Resource limitations: Federal Medicaid resource limitations used, except a more restrictive disqualifying transfer provision and more restrictive disqualifying penalties apply.

Income exclusions: Cost of guardianship fee of up to 5 percent of the monthly gross income. Sixty-five dollars plus one-half of the remaining monthly gross earned income. Personal needs allowance of \$60.

Recoveries, liens, and assignments: State law provides for recovery of supplementation from the estates of former recipients and deceased spouses of deceased former recipients. No liens or assignments are required.

Responsibility of relatives: Limited to spouse for spouse (follows Medicaid rules).

Interim assistance: State does not participate.

Payment levels: Combined federal and state supplementation for persons in licensed basic care facilities is \$1,921.80 for individuals and \$4,660.60 for couples. State supplementation is \$1,376.80 for individuals and \$3,026.60 for couples. Couples residing in licensed basic care facilities are treated as two individuals. The Basic Care Assistance Program pays a maximum of \$64.06 per day. The state pays the difference between the basic rate and the SSI payment, or any other income received by a recipient. This is based on a 30-day month at the maximum rate.

Number of recipients: In January 2002, 465 people received optional state supplementation. Of those, 439 were aged and 26 were disabled.

State Assistance for Special Needs

Administration

County social service boards.

Special Needs Circumstances

At option of individual counties.

Transportation costs, meals, and lodging: Twenty-one cents per mile for obtaining medical services if recipient uses own car. The cost of meals (up to \$20 per day) and lodging (up to \$35 per day), if verified as related to obtaining approved health services, may be granted if the individual is away from home for 24 hours or more.

Medicaid

Eligibility

Criteria: State guidelines.

Determined by: State.

Medically Needy Program

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

Unpaid Medical Expenses

The Social Security Administration does not obtain this information.

South Dakota

State Supplementation

Mandatory Minimum Supplementation

Administration: Social Security Administration.

Optional State Supplementation

Administration: Department of Social Services. State-administered in local offices for assisted living and foster care home arrangements; state-administered in state offices for independent arrangements.

Effective date: February 1, 1975.

Statutory basis for payment: South Dakota Codified Laws Annotated 28-5A-1.

Funding

Administration: State funds.

Assistance: State funds.

Passalong method: Maintaining payment levels.

Place of application: Local offices of state Department of Social Services for individuals in assisted living facilities or in adult foster care homes. State uses

information from the Social Security Administration to identify recipients who are living independently and have no other income.

Scope of coverage: Optional state supplement provided to SSI recipients who live independently and have no other source of income and to those who live in assisted living facilities or in adult foster care homes and who have net income less than the supplementation levels. Blind and disabled children who meet the income and resource limitations and live in assisted living facilities or adult foster care homes are eligible for optional supplementation.

Resource limitations: Same as federal.

Income exclusions: State disregards \$30 of the federal SSI payment to recipients in assisted living facilities or foster care homes.

Recoveries, liens, and assignments: None.

Responsibility of relatives: None.

Interim assistance: State does not participate.

Payment levels: See Table 1.

Number of recipients: In January 2002, 3,601 people received optional state supplementation. Of those, 3,333 were living independently, 257 were living in an assisted living facility, and 11 were living in adult foster care.

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

Living arrangement	Combined federal and state		State supplementation	
	Individual	Couple	Individual	Couple
Living independently ^a	560.00	832.00	15.00	15.00
Living in an assisted living facility ^b	1,019.00	c	474.00	c
Living in an adult foster care home ^b	795.00	c	250.00	c

a. Limited to SSI recipients with no other source of income.

b. Lesser amounts may be paid depending on cost of care in the facility. State provides an income disregard of \$30 per month of the federal SSI payment.

c. Couples residing in these living arrangements are treated as individuals one month after leaving an independent living arrangement.

DEFINITIONS:

Living independently. Includes all recipients residing in a federal Code A or C living arrangement who are eligible for state supplementation and are not included under another state living arrangement.

Living in an assisted living facility or adult foster care home. Includes recipients residing in facilities or homes that meet state licensing or certification requirements and provide personal care environments (i.e., one that provides personal care and services in addition to food, shelter, and laundry to recipients who do not need skilled nursing care). Residents in personal care environments must be able to participate and cooperate in performing their normal activities of daily living even though they need some assistance.

State Assistance for Special Needs

State does not provide assistance for special needs.

Medicaid

Eligibility

Criteria: SSI program guidelines (Title XVI).

Determined by: Social Security Administration.

Medically Needy Program

State does not provide a program for the medically needy.

Unpaid Medical Expenses

The Social Security Administration obtains this information.

Utah

State Supplementation

Mandatory Minimum Supplementation

No recipients.

Optional State Supplementation

Administration: Social Security Administration.

Effective date: July 1, 1978.

Statutory basis for payment: Appropriation Act for the Department of Social Services, 1978/1979.

Funding

Administration: State funds.

Assistance: State funds.

Passalong method: Maintaining payment levels.

Place of application: Social Security Administration field offices.

Scope of coverage: Optional state supplement provided to SSI recipients, including children, who are living alone or with others.

Resource limitations: Federal SSI resource limitations apply.

Income exclusions: Federal SSI income exclusions apply.

Recoveries, liens, and assignments: None.

Responsibility of relatives: None.

Interim assistance: State participates.

Payment levels: See Table 1.

Number of recipients: See Table 2.

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

Living arrangement	State code	Combined federal and state		State supplementation	
		Individual	Couple	Individual	Couple
Living alone or with others	A	545.00	821.60	...	4.60
Living in the household of another	B	366.47	554.40	3.13	9.73

NOTE: ... = not applicable.

DEFINITIONS:

A: Living alone or with others. Includes recipients residing in a federal Code A living arrangement.

B: Living in the household of another. Includes recipients residing in a federal Code B living arrangement.

Table 2.
Number of persons receiving optional state supplementation, January 2002

Living arrangement	State code	Total	Aged	Blind	Disabled	
					Adults	Children
All recipients		1,540	350	10	990	190
Living alone or with others	A	690	270	0	420	0
Living in the household of another	B	850	80	10	570	190

State Assistance for Special Needs

State does not provide assistance for special needs.

Medicaid

Eligibility

Criteria: SSI program guidelines (Title XVI).

Determined by: State.

Medically Needy Program

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

Unpaid Medical Expenses

The Social Security Administration does not obtain this information.

Wyoming

State Supplementation

Mandatory Minimum Supplementation

Administration: Department of Family Services, Economic Assistance.

Optional State Supplementation

Administration: Department of Family Services, Economic Assistance.

Effective date: July 1, 1977.

Statutory basis for payment: Wyoming Statutes 42-2-103.

Funding

Administration: State funds.

Assistance: State funds.

Passalong method: Maintaining payment levels.

Place of application: No application required. State uses computerized information from the Social Security Administration to identify eligible recipients.

Scope of coverage: Optional state supplement provided to aged, blind, and disabled persons who receive SSI as the sole source of their income and live independently or in the household of another. Blind and disabled children may be eligible for supplementation.

Resource limitations: Same as federal.

Income exclusions: Same as federal.

Recoveries, liens, and assignments: None.

Responsibility of relatives: None.

Interim assistance: State does not participate.

Payment levels: See Table 1.

Number of recipients: In January 2002, 2,749 people received optional state supplementation.

State Assistance for Special Needs

State does not provide assistance for special needs.

Medicaid

Eligibility

Criteria: SSI program guidelines (Title XVI).

Determined by: Social Security Administration.

Medically Needy Program

State does not provide a program for the medically needy.

Unpaid Medical Expenses

The Social Security Administration 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 independently	554.90	842.12	9.90	25.12
Living in the household of another	376.75	575.03	13.41	30.36

DEFINITIONS:

Living independently. Includes only SSI recipients who reside in a federal Code A living arrangement and have no federal countable income.

Living in the household of another. Includes only SSI recipients who reside in a federal Code B living arrangement and have no federal countable income.