

Massachusetts

State Supplementation

Mandatory Minimum Supplementation

Administration: Social Security Administration.

Optional State Supplementation

Administration: Social Security Administration.

Effective date: January 1, 1974.

Statutory basis for payment: General Laws of the Commonwealth of Massachusetts, chapter 118A, section 1.

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 every aged, blind, and disabled SSI recipient, including children, and recipients in private medical facilities where the Medicaid program provides 50 percent or less of the cost of care.

Resource limitations: Federal SSI regulations apply.

Income exclusions: Federal SSI regulations apply.

Recoveries, liens, and assignments: None.

Financial 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, January 2004 (in dollars)

Living arrangement	State code	Combined federal and state		State supplementation	
		Individual	Couple ^a	Individual	Couple ^a
Living independently	A				
Aged		692.82	1,047.72	128.82	201.72
Blind		713.74	1,427.48	149.74	581.48
Disabled		678.39	1,026.06	114.39	180.06
Shared living expenses	B				
Aged		603.26	1,047.72	39.26	201.72
Blind		713.74	1,427.48	149.74	581.48
Disabled		594.40	1,026.06	30.40	180.06
Living in the household of another	C				
Aged		480.36	779.80	104.36	215.80
Blind		713.74	1,427.48	337.74	863.48
Disabled		463.58	758.18	87.58	194.18
Licensed rest home	E				
Aged and disabled		857.00	1,714.00	293.00	868.00
Blind		713.74	1,427.48	149.74	581.48
Medicaid facility	F	65.00	130.00	35.00	70.00
Assisted living facility	G	1,018.00	1,527.00	454.00	681.00

(Continued)

Table 1.
Continued

NOTE: Blind individuals aged 65 or older are entitled to the highest payment category for which they qualify.

a. The amounts given apply when both members of a couple belong to the same eligibility category. When members belong to different eligibility categories, the two respective individual benefits are added to obtain the couple's benefit.

DEFINITIONS:

A: Living independently. Includes recipients who live:

- Alone;
- Only with an eligible spouse;
- With an eligible spouse and with ineligible children who do not receive income maintenance payments; or
- With an ineligible spouse or ineligible children none of whom receive income maintenance payments. Also includes recipients residing in a federal Code C living arrangement who do not live with any persons receiving income maintenance payments. Persons not meeting these criteria may be included if they are residing in a federal Code A or C living arrangement and pay at least two-thirds of the household expenses. Recipients living in public congregate housing developments are also included.

B: Shared living expenses. Includes recipients who reside in a federal Code A or C living arrangement and do not meet the criteria for state living arrangement A or E. It therefore includes recipients who reside in group care facilities such as halfway houses, private medical facilities where Medicaid is paying 50 percent or less of the cost of care, foster homes, commercial boarding homes, or in other facilities that do not meet the criteria for state living arrangement A or E. It also includes:

- Recipients who reside in households where they do not pay at least two-thirds of the household expenses and one or more household members receive an income maintenance payment; and
- Transients, the homeless, and residents of public emergency shelters.

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

E: Licensed rest home. Includes recipients residing in a licensed rest home that has a provider agreement with the state.

F: Medicaid facility. Includes recipients residing in a federal Code D living arrangement.

G: Assisted living facility. Includes recipients residing in nonpublic subsidized assisted living facilities that have been registered with the state.

Table 2.
Number of persons receiving optional state supplementation, January 2004

Living arrangement	State code	Total	Aged	Blind	Disabled	
					Adults	Children
All recipients		168,042	44,648	4,019	96,875	22,500
Living independently	A	77,748	26,387	1,446	43,890	6,025
Shared living expenses	B	73,022	11,991	1,887	44,363	14,781
Living in the household of another	C	11,222	2,950	529	6,397	1,346
Licensed rest home	E	1,890	1,120	18	751	1
Medicaid facility	F	2,906	1,197	10	1,352	347
Assisted living facility	G	1,254	1,003	129	122	0

State Assistance for Special Needs**Administration**

State Department of Transitional Assistance and Commission for the Blind.

Special Needs Circumstances

Vendor payments in lieu of cash payments.

Disaster benefits: Replacement of specific items of furniture, household equipment, supplies, food, and clothing for SSI recipients when these items were lost because of a natural disaster or fire. (Amounts exempted in determining SSI eligibility.)

Burial expenses: Payment of funeral and burial expenses for SSI recipients shall not exceed \$1,100, and the total expense shall not exceed \$1,500. When a resource exists, it is deductible from the total expense

(maximum \$1,500), and the payment by the department must not exceed \$1,100 of the balance.

Rest home subsidies: When cost exceeds the total available income, excluding personal needs allowance, the state will pay difference up to established maximum rates.

Moving expenses: The cost of moving within the state for SSI recipients may be paid once in a 12-month period if:

- Present living quarters have been certified as substandard,
- Moving to new quarters is necessary because of health problems or lack of safety in old neighborhood,
- Recipient is moving into federal or state subsidized housing, or
- Recipient is forced to move for other reasons.

Total payment not to exceed \$150.

Homemaker and housekeeper services: The Department of Elder Affairs performs homemaker and housekeeping services for recipients aged 60 or older.

The Department of Transitional Assistance provides these services for recipients under age 60.

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 obtains this information.