Kentucky

State Supplementation

Mandatory Minimum Supplementation

No recipients.

Optional State Supplementation

Administration: State Cabinet for Health and Family Services, Department for Community Based Services.

Effective date: January 1, 1974.

Statutory basis for payment: Kentucky Revised Statutes 205.245 and budget approval by state legislature.

Funding

Administration: State funds. Assistance: State funds.

Passalong method: Maintaining payment levels.

Place of application: Local offices of the state Cabinet for Health and Family Services, Department for Community Based Services.

Scope of coverage: Optional state supplement provided to every aged, blind, and disabled person who needs care in a personal care facility other than a Medicaid facility or in a family care home licensed under the health licensure act or needs the services of a caretaker in the home and who has insufficient income to obtain this care. Children are eligible for the optional supplement of caretaker services in the home. The minimum age requirement is 16 for a personal care home and 18 for a family care home.

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 2005 (in dollars)

	Combined federal and state		State supplementation	
Living arrangement	Individual	Couple	Individual	Couple
Personal care facility	1,019.00	а	440.00	а
Family care home	751.00	а	172.00	а
Caretaker in home	641.00	984.00	62.00	115.00

a. Couples are treated as two individuals starting with the month after leaving an independent living arrangement. DEFINITIONS:

Personal care facility. Includes recipients who are ambulatory or mobile nonambulatory and able to manage most of the activities of daily life. Facilities provide supervision, basic health and health-related services, personal care, and social or recreational activities.

Family care home. Includes recipients in residential accommodations limited to two or three persons who are not related to the licensee. Residents of these homes must be ambulatory or mobile nonambulatory and be able to manage most of the activities of daily life. They cannot have an illness, injury, or disability requiring constant medical care.

Caretaker in home. Includes recipients who are eligible to receive caretaker services in their homes. These services are provided at regular intervals to prevent institutionalization.

Table 2.
Number of persons receiving optional state supplementation, January 2005

Living arrangement	Total	Aged	Blind	Disabled
All recipients	4,396	1,607	23	2,766
Personal care facility	3,335			
Family care home	193			
Caretaker in home	868			

NOTE: -- = not available.

State Assistance for Special Needs

State provides 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 obtains this information.