Vermont

State Supplementation

Mandatory Minimum Supplementation

No recipients.

Optional State Supplementation

Administration: Social Security Administration.

Effective date: January 1, 1974.

Statutory basis for payment: Vermont Statutes Annotated, title 33, chapter 13, Aid to Aged, Blind, and

Disabled.

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 all SSI-eligible aged, blind, and disabled

individuals, including children.

Resource limitations: Federal SSI regulations apply. **Income exclusions:** Federal SSI regulations apply.

 $\label{eq:coveries} \begin{tabular}{ll} Recoveries, liens, and assignments: $None.$ \\ \hline Financial responsibility of relatives: $None.$ \\ \hline \end{tabular}$

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)

	State	Combined federal and state		State supplementation	
Living arrangement	code	Individual	Couple	Individual	Couple
Living independently	A and B	631.04	967.88	52.04	98.88
Assistive community care, Level III	С	627.38	965.77	48.38	96.77
Living in the household of another	E	425.30	627.65	39.30	48.31
Residential care home, Level IV	G	802.94	1,431.06	223.94	562.06
Custodial care family home	Н	677.69	1,201.82	98.69	332.82
Medicaid facility	I	47.66	95.33	17.66	35.33

DEFINITIONS:

A and B: Living independently. Includes eligible recipients who are not in any other state living arrangement. Includes children who are living with parents, recipients residing in private Title XIX facilities where Medicaid is not paying more than 50 percent of the cost of care, and recipients residing in publicly operated emergency shelters throughout a month.

C: Assistive community care, Level III. Includes any individual who resides in a Level III residential care home that is certified by the Department of Aging and Independent Living to provide assistive community care services.

E: Living in the household of another. Includes recipients residing in a federal Code B living arrangement who are not otherwise exempted from state supplementation.

G: Residential care home, Level IV. Includes recipients living in Level IV community homes identified by the state.

H: Custodial care family home. Includes recipients who reside in a federal Code A living arrangement, live in another's home, pay room and board, and receive one or more custodial services. Custodial care includes providing basic room and board, plus such services as help with feeding, dressing, bathing, moving under normal circumstances, and occasional tray service and supervision for the recipients' protection. To qualify as a home under this arrangement, these services must be provided by a resident of the home and cannot be provided to more than two persons in the home. Custodial care or supervision provided by a spouse is not included under this arrangement.

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

Table 2.

Number of persons receiving optional state supplementation, January 2005

	State				Disabled	
Living arrangement	code	Total	Aged	Blind	Adults	Children
All recipients		12,625	1,192	84	9,232	2,117
Living independently Assistive community	A and B	11,123	1,088	66	8,048	1,921
care, Level III Living in the household	С	240	49	4	185	2
of another Residential care home,	E	199	14	1	141	43
Level IV Custodial care family	G	137	18	1	114	4
home Medicaid facility	H I	840 86	12 11	12 0	674 70	142 5

State Assistance for Special Needs

Administration

Agency of Human Services, Department of Prevention, Assistance, and Transition and Department for Children and Families.

Special Needs Circumstances

Emergency assistance is provided, under certain conditions, for court-ordered evictions, natural disasters (e.g., fire, flood, or hurricane), emergency medical care, funeral costs, and emergency fuel 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.