

# Maine

## ***State Supplementation***

### ***Mandatory Minimum Supplementation***

**Administration:** State Department of Health and Human Services.

### ***Optional State Supplementation***

**Administration:** State Department of Health and 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 payment levels.

**Place of application:** Local offices of the state Department of Health and 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:** Federal SSI regulations apply.

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

**Financial responsibility of relatives:** None.

**Interim assistance:** State participates.

**Payment levels:** See Table 1.

**Number of recipients:** See Table 2.

## ***State Assistance for Special Needs***

### ***Administration***

State Department of Health and 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 state Department of Human Services obtains this information.

**Table 1.**  
**Optional state supplementation payment levels, January 2005 (in dollars)**

Living arrangement	Combined federal and state		State supplementation	
	Individual	Couple	Individual	Couple
Living alone or with others	589.00	884.00	10.00	15.00
Living in the household of another	394.00	591.34	8.00	12.00
Foster home	628.00	1,142.00	49.00	273.00
Flat-rate boarding home	796.00	1,459.00	217.00	590.00
Cost-reimbursement boarding home	813.00	1,505.00	234.00	636.00
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 1611(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.

**Foster home.** Includes recipients residing in an adult foster home.

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

**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.

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

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

Living arrangement	Total	Aged	Blind	Disabled
All recipients	34,296	--	--	--
Living alone or with others	32,597	--	--	--
Living in the household of another	62	--	--	--
Foster home	272	--	--	--
Flat-rate boarding home	19	--	--	--
Cost-reimbursement boarding home	33	--	--	--
Medicaid facility	1,313	--	--	--

NOTE: -- = not available.