

Alaska

State Supplementation

Mandatory State Supplementation

Administration: Department of Health and Social Services, Division of Public Assistance.

Optional State Supplementation

Administration: Department of Health and Social Services, Division of Public Assistance.

Effective date: January 1, 1974.

Statutory basis for payment: Alaska Statutes 47.25.430, as amended by State Legislative Amendments 1993, chapter 29.

Funding

Administration: State funds.

Assistance: State funds.

Passalong method: Maintaining payment levels.

Place of application: Local offices of the state Department of Health and Social Services, Division of Public Assistance.

Scope of coverage: Optional state supplement provided to needy aged, blind, and disabled persons except those in the Alaska Pioneers' Home, in any nonmedical public institution, or in public or private institutions for mental disorders. Children under age 18 are not eligible for optional supplementation.

Resource limitations: Same as federal.

Income exclusions: Same as federal; in-kind income is also excluded.

Recoveries, liens, and assignments: None.

Responsibility of relatives: Child for aged parent.

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 | 907.00 | 1,345.00 | 362.00 | 528.00 |
| Living independently with an ineligible spouse | 1,066.00 | ... | 521.00 | ... |
| Living in the household of another | 731.34 | 1,087.67 | 368.00 | 543.00 |
| Living in the household of another with an ineligible spouse | 827.34 | ... | 464.00 | ... |
| Living in a Medicaid facility | 75.00 | 150.00 | 45.00 | 90.00 |

NOTE: ... = not applicable.

DEFINITIONS:

Living independently. Includes eligible persons who:

- Live alone in their own household, whether or not receiving in-kind support and maintenance;
- Live alone or with a minor child, spouse, or anyone else whose income is deemed available to them;
- Live in an adult residential care facility, medical institution, or adult foster care home;
- Live in a household in which all members receive federal or state public assistance;
- Live in the household of another and pay at least a prorated share of the household expenses; or
- Live in the household of another where the eligible person or deemor has an ownership interest in the home or is liable to the landlord for any part of the rent.

Living in the household of another. Includes eligible persons who live in another's household for a full calendar month, except for temporary absences, and receive both food and shelter from that person.

Living in a Medicaid facility. Includes eligible persons who reside for a full calendar month in a skilled nursing facility or an intermediate care facility that is certified and licensed by the Alaska Department of Health and Social Services to provide long-term care.

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

| Living arrangement | Total | Aged | Blind | Disabled |
|--------------------------------------------------------------|--------|-------|-------|----------|
| All recipients | 14,640 | 4,731 | 89 | 9,820 |
| Living independently | 13,496 | 4,439 | 84 | 8,973 |
| Living independently with an ineligible spouse | 624 | 137 | 5 | 482 |
| Living in the household of another | 432 | 126 | 0 | 306 |
| Living in the household of another with an ineligible spouse | 9 | 1 | 0 | 8 |
| Living in a Medicaid facility | 79 | 28 | 0 | 51 |

NOTE: Includes certain grandfathered, non-SSI recipients who meet state eligibility criteria. Excludes children, who are not eligible for 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: State.

Medically Needy Program

State does not provide a program for the medically needy.

Unpaid Medical Expenses

The Social Security Administration does not obtain this information.

Idaho

State Supplementation

Mandatory Minimum Supplementation

Administration: Department of Health and Welfare.

Optional State Supplementation

Administration: Department of Health and Welfare.

Effective date: January 1, 1974.

Statutory basis for payment: Idaho State Code 56-207, 56-208, 56-209a.

Funding

Administration: State funds.

Assistance: State funds.

Passalong method: Maintaining payment levels.

Place of application: Local offices of the Department of Health and Welfare.

Scope of coverage: Optional state supplement provided to 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.

Resource limitations: Same as federal.

Income exclusions: Same as federal; also all in-kind support and maintenance.

Recoveries, liens, and assignments: None.

Responsibility of relatives: Husband and wife mutually; parent for minor child.

Interim assistance: State does not participate.

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 household of another ^a | 597.00 | 837.00 | 52.00 | 20.00 |
| Living with an essential person ^b | 838.00 | ... | 20.00 | ... |
| Room and board facility | 742.00 | ^c 817.00 | 197.00 | c |
| Residential and assisted living facility | 742.00 | c | 197.00 | c |
| Certified family home | | | | |
| Level I | 884.00 | c | 339.00 | c |
| Level II | 951.00 | c | 406.00 | c |
| Level III | 1,019.00 | c | 474.00 | c |
| Semi-independent group residential facility | 742.00 | c | 197.00 | c |
| Assisted living facility or certified family home | d | ... | d | ... |

NOTE: ... = not applicable.

- a. State supplement is increased to offset the reduced federal payment for persons living in the household of another.
- b. The same supplement is given for living with an essential person to individuals and couples.
- c. Couples are treated as two individuals the month after leaving an independent living arrangement.
- d. The state guarantees an income of \$520.00 for this living arrangement, including the federal SSI payment. Individuals receiving the maximum SSI payment do not receive a state supplement.

(Continued)

**Table 1.
Continued**

DEFINITIONS:

Living independently or in the household of another. Includes recipients living in their own household (i.e., house, apartment, hotel, rooming house, or room and board facility) or in the household of another. Also includes blind or disabled children living with their parents and individuals paying room and board to a relative.

Living with an essential person. Includes recipients living in their own household or in the household of another with a person of their choice whose presence in the household is essential to the recipients' well-being and who renders specific services of a kind that would have to be provided for the recipients if they lived alone.

Room and board facility. A facility in which a person purchases food, shelter, and household maintenance requirements from one vendor. Such a facility is not required to be licensed as a shelter home.

Residential and assisted living facility or certified family home. One or more buildings constitutes a facility or residence, however named, that is operated on either a profit or nonprofit basis, for the purpose of providing 24-hour care for three or more adults who need personal care or assistance and supervision essential for sustaining activities of daily living or for the protection of the individual.

Certified family home. A family home in which an adult chooses to live who is not able to reside in his or her own home and who requires care or help in daily living, protection, security, and encouragement toward independence.

Semi-independent group residential facility. A facility having one or more living areas under a common management in which an opportunity to learn independent living skills is provided under individualized service plans to not less than three nor more than eight developmentally disabled or mentally ill persons not requiring direct supervision.

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

| Living arrangement | Total | Aged | Blind | Disabled | |
|-----------------------------------------------------------------------------------------|--------|-------|-------|----------|----------|
| | | | | Adults | Children |
| All recipients | 10,795 | 2,068 | 20 | 6,285 | 2,422 |
| Living independently or in the household of another, or living with an essential person | 10,197 | 1,953 | 19 | 5,937 | 2,288 |
| Room and board facility | 480 | 92 | 1 | 279 | 108 |
| Residential and assisted living facility or certified family home | 60 | 11 | 0 | 36 | 13 |
| Certified family home | 11 | 3 | 0 | 6 | 2 |
| Semi-independent group residential facility | 47 | 9 | 0 | 27 | 11 |
| Assisted living facility or certified family home | 0 | 0 | 0 | 0 | 0 |

State Assistance for Special Needs**Administration**

Department of Health and Welfare.

Special Needs Circumstances

Restaurant meals: Eating-out allowance of up to \$50 per month if physically unable to prepare meals.

Maintenance for guide dog: Allowance for care and maintenance of guide dog of up to \$17 per month.

Medicaid**Eligibility**

Criteria: SSI program guidelines (Title XVI).

Determined by: State.

Medically Needy Program

State does not provide a program for the medically needy.

Unpaid Medical Expenses

The Social Security Administration does not obtain this information.

Oregon

State Supplementation

Mandatory Minimum Supplementation

Administration: Department of Human Services, Adult and Family Services Division, Senior and Disabled Services Division (state-administered in local offices).

Optional State Supplementation

Administration: Department of Human Services, Adult and Family Services Division, Senior and Disabled Services Division (state-administered in local offices).

Effective date: January 1, 1974.

Statutory basis for payment: Oregon Revised Statutes 411.120.

Funding

Administration: State funds.

Assistance: State funds.

Passalong method: Maintaining total expenditures.

Place of application: Local offices of the Adult and Family Services Division or the Senior and Disabled Services Division.

Scope of coverage: Optional state supplement provided to SSI recipients residing in the specified living arrangements (see Table 1). Blind children are eligible and disabled children are ineligible for state supplementation.

Resource limitations: Federal SSI limitations used, except that the transfer of a home may render a person ineligible for a state supplement for up to 30 months, based on the amount of uncompensated value.

Income exclusions: Federal SSI earned income exclusions used. No unearned income is excluded.

Recoveries, liens, and assignments: Assistance paid constitutes an unsecured prior claim against property or any interest therein belonging to the estate of a recipient except such portion as is being occupied as a home by the spouse, minor dependent child, or parent of deceased recipient. Senior and Disabled

Services Division may compromise claim by accepting other security or may waive payment when enforcement would be inequitable and would tend to defeat the purpose of public assistance law.

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

Department of Human Resources, Adult and Family Services Division or Senior and Disabled Services Division.

Special Needs Circumstances

Clothing for employment: Essential clothing may be provided for a recipient to begin employment if the recipient has been accepted for a job.

Corrective shoes: Necessary corrective, orthopedic, or extra-sturdy shoes recommended by the recipient's physician.

Special diet: Payment for a special diet will be allowed if need has been established by a physician and the recipient maintains housekeeping quarters and is receiving a standard food allowance.

Restaurant meals: Restaurant meals are allowed in addition to the standard supplemental payments when recipient is unable to prepare meals because of physical or mental disability.

Laundry allowances: Laundry allowances are provided when the recipient has no available laundry facilities of any kind or is so disabled that he or she cannot do his or her own laundry and there is no other person living in the home who can do it.

Telephone allowances: Telephone allowances may be provided when the recipient lives alone and is housebound, lives in a situation so remote that a telephone is essential, or needs a telephone to maintain a job.

Maintenance for guide dogs: Payment for food will be made for guide dogs provided to the recipient by the Oregon Commission for the Blind.

Moving expenses: Moving costs will be provided if moving is essential to provide nonhazardous housing for the recipient or if the recipient has been evicted for reasons not attributable to his or her neglect or his or her failure to pay rent or house payments.

Household equipment costs: Certain items of household equipment may be purchased or repaired if the recipient is unable to obtain them without cost; a one-time payment of chattel mortgages or sales contracts may be made to prevent repossession if the cost of replacing an essential item exceeds the balance due on the contract.

Shelter exceptions: Additional payment is made for shelter expenses in situations in which the recipient has special needs that make it impractical or impossible to rent or continue to purchase adequate housing with current benefit payment.

Transportation expenses: Certain transportation expenses may be provided to meet specific needs of recipients.

Medicaid

Eligibility

Criteria: SSI program guidelines (Title XVI).

Determined by: State.

Medically Needy Program

Prescription drugs and mental health services only.

Unpaid Medical Expenses

The Social Security Administration does not obtain 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 | | | | |
| Aged and disabled | 546.70 | 817.00 | 1.70 | ... |
| Blind | 571.70 | 842.60 | 26.70 | 25.60 |
| Living with an ineligible spouse | | | | |
| Aged and disabled | 546.70 | ... | 1.70 | ... |
| Blind | 571.70 | ... | 26.70 | ... |
| Living in the household of another | | | | |
| Aged and disabled | 365.04 | 544.67 | 1.70 | ... |
| Blind | 390.04 | 570.27 | 26.70 | 25.60 |
| Living in an adult foster care or residential care facility ^{a,b} | | | | |
| Aged and disabled | 546.70 | 1,013.40 | 1.70 | 196.40 |
| Blind | 571.70 | 1,063.40 | 26.70 | 246.40 |
| Living in a room and board facility ^b | | | | |
| Aged and disabled | 546.70 | 1,013.40 | 1.70 | 196.40 |
| Blind | 571.70 | 1,063.40 | 26.70 | 246.40 |

NOTE: ... = not applicable.

a. Additional costs covered by special service funds.

b. Persons with other sources of income are allowed to keep \$90 as a personal needs allowance.

DEFINITIONS:

Living independently. Includes recipients living alone in their own household.

Living with an ineligible spouse. Includes recipients living with their ineligible spouse.

Living in the household of another. Includes recipients who live in the household of another.

Living in an adult foster care facility. Includes recipients living in homes or other facilities that include board and room and 24-hour care and services for five or fewer elderly or disabled persons who are aged 18 or older.

Living in a residential care facility. Includes recipients living in facilities of one or more buildings on contiguous property that provide 24-hour care and services to six or more people aged 16 or older.

Living in a room and board facility. Includes persons living in facilities that provide meals and housing in exchange for financial or other compensation.

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

| Living arrangement | Total | Aged | Blind | Disabled |
|-------------------------------------------------------------|--------|-------|-------|----------|
| All recipients | 24,009 | 3,084 | 558 | 20,367 |
| Living independently | 20,059 | 1,738 | 381 | 17,940 |
| Living with an ineligible spouse | 0 | 0 | 0 | 0 |
| Living in the household of another | 1,341 | 573 | 68 | 700 |
| Living in an adult foster care or residential care facility | 2,609 | 773 | 109 | 1,727 |
| Living in a room and board facility | 0 | 0 | 0 | 0 |

Washington

State Supplementation

Mandatory Minimum Supplementation

Administration: Social Security Administration.

Optional State Supplementation

Administration: State Department of Social and Health Services administers payments to SSI recipients in Medicaid facilities. All other state supplements are administered by the Social Security Administration.

Effective date: January 1, 1974.

Statutory basis for payment: State law in Revised Code of Washington 74.04.600-74.04.630 and state policy in Washington Administrative Code 388-474.

Funding

Administration: State funds.

Assistance: State funds.

Passalong method: Maintaining total expenditures.

Place of application: Social Security Administration field offices.

Scope of coverage: Optional state supplement provided to needy aged, blind, and disabled persons, including children, except for individuals converted from former state assistance programs who have more than one essential person, eligible couples with one or more essential persons, and residents of public emergency shelters for the homeless.

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

Administration

Department of Social and Health Services, Economic Services Administration, Division of Assistance Programs.

Special Needs Circumstances

Guide dog: Food for service animal at the rate of \$33.66 per month.

Other utility charges

Telephone: Amount varies according to need and location.

Laundry: \$11.13 per month.

Meals

Restaurant meals: \$187.09 per month; \$6.04 per day.

Home-delivered meals: The amount charged by the agency delivering the service.

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.

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

| Living arrangement | State code | Combined federal and state | | State supplementation | |
|--------------------------------------------------------------|------------|----------------------------|--------|-----------------------|--------|
| | | Individual | Couple | Individual | Couple |
| Living independently ^a | A | | | | |
| Area 1 | | 570.90 | 836.90 | 25.90 | 19.90 |
| Area 2 | | 550.45 | 817.00 | 5.45 | ... |
| Living with an ineligible spouse ^b | B | | | | |
| Area 1 | | 711.10 | ... | 166.10 | ... |
| Area 2 | | 681.15 | ... | 136.15 | ... |
| Living in the household of another | C | 367.05 | 548.87 | 3.71 | 4.20 |
| Living in the household of another with an ineligible spouse | F | 465.00 | ... | 101.66 | ... |
| Living in a Medicaid facility ^c | ... | 41.62 | 83.24 | 11.62 | 23.24 |

NOTES: Area 1 includes King, Kitsap, Pierce, Snohomish, and Thurston counties. Area 2 includes all other counties.

... = not applicable.

- a. Includes persons in congregate care group facilities.
- b. Applies only to cases converted from former state assistance programs.
- c. State administers payments.

DEFINITIONS:

A: Living independently. Applies to recipients residing in a federal Code A or C living arrangement unless they are living with an ineligible spouse or temporarily residing in a medical institution.

B: Living with an ineligible spouse. Applies to recipients who are living independently with a spouse who does not qualify for SSI payments.

C: Living in the household of another. Applies to recipients residing in a federal Code B living arrangement unless they are living with an ineligible spouse or temporarily residing in a medical institution.

F: Living in the household of another with an ineligible spouse. Includes recipients residing in a federal Code B living arrangement who have an ineligible spouse.

Living in a Medicaid facility. Includes recipients residing in a federal Code D 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 | | 97,850 | 12,710 | 870 | 69,330 | 14,940 |
| Living independently | A | 91,760 | 11,850 | 760 | 64,430 | 14,720 |
| Living with an ineligible spouse | B | 4,650 | 580 | 90 | 3,980 | 0 |
| Living in the household of another | C | 1,440 | 280 | 20 | 920 | 220 |
| Living in the household of another with an ineligible spouse | F | 0 | 0 | 0 | 0 | 0 |
| Living in a Medicaid facility ^a | ... | b | b | b | b | b |

NOTE: ... = not applicable.

- a. State administers payments.
- b. Data are not available.