

Nevada

State Supplementation

Mandatory Minimum Supplementation

No recipients.

Optional State Supplementation

Administration: Social Security Administration.

Effective date: January 1, 1974.

Statutory basis for payment: Nevada Revised Statutes, title 38, Public Welfare.

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 aged and blind recipients, including children, except those in medical institutions not licensed by Medicaid and those in medical institutions for whom Medicaid pays over 50 percent of the cost of their care. State does not have an assistance program for disabled persons.

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	Individual	Couple
Living independently	A				
Aged		600.40	920.46	36.40	74.46
Blind		673.30	^a 1,220.60	109.30	^a 374.60
Living in the household of another	B				
Aged		400.27	613.64	24.27	49.64
Blind		589.96	^b 1,095.94	213.96	^b 531.94
Domiciliary care (aged and blind)	C	914.00	1,727.00	350.00	881.00

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

a. Payment level when both members are blind; when one member is aged, payment level is reduced by \$150.07.

b. Payment level when both members are blind; when one member is aged, payment level is reduced by \$241.15.

DEFINITIONS:

A: Living independently. Includes aged and blind recipients who live in their own household or are in certified private medical facilities where Medicaid does not pay more than 50 percent of the cost of care. Also includes blind children under age 18 living in their parents' household.

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

C: Domiciliary care. Includes aged and blind recipients who live in private nonmedical facilities or in residential facilities serving 16 or fewer persons that provide personal care and services to aged, infirm, or handicapped adults who are unrelated to the proprietor.

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

Living arrangement	State code	Total	Aged	Blind	Disabled
All recipients		^a 8140	7,360	490	...
Living independently	A	^a 7140	6,390	470	...
Living in the household of another	B	^a 610	590	10	...
Domiciliary care	C	390	380	10	...

NOTE: ... = not applicable.

a. Includes recipients not distributed by eligibility category.

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.