

Guide to Reading the State Summaries

This guide explains the program features detailed in the summaries for the 50 states and the District of Columbia. Three of the major state assistance programs are:

- State supplementation (mandatory and optional) of federal Supplemental Security Income payments,
- State assistance for special needs, and
- Medicaid.

To facilitate comparisons across states, a separate section includes four tables that summarize:

- The number of persons receiving optional supplementation,
- Selected features of state supplementation programs,
- Selected features of medical programs affecting SSI recipients and the needy, and
- State threshold amounts for blind and disabled individuals to maintain Medicaid eligibility under section 1619(b) provisions of the Social Security Act.

With the exception of Kansas, Missouri, and Rhode Island, all states and the District of Columbia have provided current data for this publication. The state summaries contain information on the program features discussed below.

State Supplementation

Mandatory Minimum Supplementation

The states provide mandatory minimum supplementation only to recipients who were converted to the Supplemental Security Income (SSI) program from the former state assistance programs when the SSI program began. Mandatory minimum state supplementary payments are required by Public Law 93-66 to maintain the December 1973 payment levels that these recipients received under the former state assistance programs. States are required to provide this supplementation to maintain their eligibility for Title XIX (Medicaid) federal matching funds. The governmental unit responsible for administering these payments may be either a state or local agency or the Social Security Administration.

Optional State Supplementation

Some states provide optional monthly supplements to help persons meet needs not fully covered by federal SSI payments. The state determines whether it will make a payment, to whom, and in what amount. These supplements, paid on a regular monthly basis, are intended to cover such items as food, shelter, clothing, utilities, and other daily and special necessities determined by the individual states. Some states provide optional supplementary payments to all persons eligible for SSI benefits. Others may limit payments to certain SSI recipients such as the blind or residents of domiciliary care facilities, or they may extend payments to persons who are ineligible for SSI because their income is too high.

Administration. The governmental unit responsible for administering these payments may be a state or local agency or the Social Security Administration (SSA). Under state administration, the state must absorb both program benefits and administrative costs. Under federal administration, the state must reimburse SSA for the cost of the program benefits and, as of October 1, 2006, must pay \$9.69 in administrative costs for each benefit paid. As of October 1, 2006, the rate was adjusted for inflation as calculated by the change in the consumer price index (CPI) between June 2005 and June 2006, rounded to the nearest whole cent. The Commissioner may select a different rate for a state, taking into account the complexity of administering the state's supplementary payment program.

Effective date. The date when the state instituted or revised its optional supplementation program.

Statutory basis for payment. The state law(s) authorizing the supplementary payments.

Funding. The source of funds for supplementary payments and administrative costs. In states requiring financial participation from local governments, the portions contributed by the state and the locality are indicated.

Passalong method. To maintain eligibility for Medicaid reimbursement, any state making supplementary payments after June 30, 1977, must continue making payments and must pass along the cost-of-living increase to the federal benefit rate (FBR). Two methods are available to ensure that cost-of-living increases are passed on to the recipients: the

payment levels method and the total expenditure method.

Under the payment levels method, the state's supplemental payment for any of the living arrangement categories cannot be below its adjusted March 1983 payment levels. The adjusted level is the state's March 1983 payment level minus the portion of the July 1983 increase in the FBR that was not attributable to the increase in the cost of living (that portion was \$10.30 per individual and \$15.40 per couple); the essential person increment may be reduced by \$5.50.

Under the total expenditure method, state expenditures for supplementary payments in the current calendar year must at least equal expenditures in the preceding calendar year. If expenditures fall short in the current year, the state must increase expenditures in the next calendar year by an amount at least equal to the shortfall.

Place of application. The office(s) accepting applications for supplementary payments.

Scope of coverage. The categories of persons the state has elected to supplement. States with state-administered programs establish their own eligibility conditions and payment categories. States with federally administered programs must adhere to SSI eligibility criteria in all aspects but are allowed to establish additional income exclusions and payment categories.

Resource limitations. The resource limitations and exclusions for federally administered state supplementation are the same as for federal SSI payments: countable resources must be worth \$2,000 or less for an individual, or \$3,000 or less for a couple. Countable resources are properties—real or personal—that count toward the resource limits. Recognizing that not everything an individual owns is available for his or her support and maintenance, the law provides for excluding certain resources in determining eligibility for SSI. Excluded resources include (but are not limited to):

- The house an individual lives in;
- A car, if it is used to provide necessary transportation;
- Household goods (if needed for maintenance, use, and occupancy of the home) and personal effects;
- Life insurance policies with a total face value of \$1,500 or less per person;
- Burial plots or spaces for the individual or his or her immediate family;

- A burial fund of up to \$1,500 each for the burial expenses of the individual and his or her spouse; and
- Property essential to self-support, including property used in a trade or business or on the job if the individual works for someone else.

States with state-administered supplementation can establish their own resource limitations and exclusions for optional state supplementary payments.

Income exclusions. An exclusion is the amount of a recipient's income that is not counted against the state supplementary payment.

In general, an SSI recipient's income from sources other than SSI is counted against the SSI payment amount. Some income, however, is excluded from being counted. The federal program excludes \$20 per month of earned or unearned income; in addition, \$65 per month of earned income plus one-half of the remaining earnings is excluded. Some types of income are entirely excluded, such as certain home energy and support and maintenance assistance, food stamps, most federally funded housing assistance, state assistance based on need, one-third of child support payments, and income received infrequently or irregularly.

States that choose federal administration must exclude at least the amounts excluded by the federal program and may exclude more. Countable income is deducted first from the federal payment. Any income that remains to be counted after the federal payment is reduced to zero is deducted from the state supplementary payment.

States with state-administered programs can establish their own income exclusions of any amount and type. In most states, the supplementary payment is added to the federal amount, and countable income is deducted first from the federal payment, as in states with federal administration. In a few states, however, the supplement takes the form of a state-guaranteed income amount that exceeds the federal benefit.

Recoveries, liens, and assignments. Provisions of state supplementation plans governing recovery of assistance payments and assumption of a recipient's property by the agency. As a condition of providing assistance, a state may require that a lien be placed on a recipient's property. Such a requirement does not affect a person's eligibility or payment status for federal SSI benefits or federally administered state supplementary payments.

Financial responsibility of relatives. State supplementation provisions that govern the responsibility of relatives (other than parent for child and spouse for spouse) for providing economic support and returning overpayments.

Interim assistance reimbursement (IAR). The Social Security Administration may reimburse a state that has provided basic needs assistance to an individual during the period in which either the person's application for SSI was pending or his or her SSI benefits were suspended or terminated. The individual's retroactive SSI payment is sent to the state as reimbursement if:

- The state has an agreement with SSA to participate in the IAR program;
- The individual has given SSA written authorization to have his or her retroactive payment sent to the state as reimbursement; and
- The individual is found eligible for SSI payments or has had his or her benefits reinstated for the same period of suspension or termination.

Payment calculation method. The state determines the method by which it calculates payments and what, if anything, will affect the payment.

Payment levels. The maximum state supplementary payments and the combined maximum federal and state payments that can be awarded to recipients without countable income are presented, by state-designated living arrangements, in Table 1 in each state summary. Unless otherwise stated, payment levels apply equally to aged, blind, and disabled recipients. The federal benefit rates that are included in the combined payment levels became effective January 2007 (unless otherwise stated) and are given in the table below.

In states where the SSI payments are federally administered, each living arrangement is described according to the following federal living arrange-

ments. The state may also have other living arrangements. States that administer the SSI payment have the option to supplement and determine their own definitions of living arrangements.

Federal Code A. Includes eligible persons who:

- Live in their own household whether or not they are receiving in-kind support and maintenance;
- Live in a foster or family care situation;
- Have no permanent living arrangement (for example, a transient);
- Live in an institution (except inmates of public institutions) for all or part of a month, provided that Medicaid does not pay more than 50 percent of the cost of their care; or
- Live alone with a child, spouse, or persons whose income may be deemed to the eligible person.

It also includes eligible persons for whom Codes B, C, and D do not apply.

Federal Code B. 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.

The Code A payment standard is reduced by one-third for people in federal Code B living arrangements.

Federal Code C. Includes eligible children under age 18 who live in the same household as their parents (that is, deeming applies). The payment standard is the same as in Code A.

Federal benefit rates, January 2007 (in dollars)

Living arrangements	Individual	Couple	Essential person ^a
Living independently	623.00	934.00	312.00
Living in the household of another ^b	415.34	622.67	207.67
Living in a Medicaid facility ^c	30.00	60.00	...

NOTE: ... = not applicable.

- This represents the additional amount included in a recipient's check to cover the needs of a household member who provides essential care and services to the recipient and whose needs were previously taken into account in determining the recipient's assistance payment under a state plan approved under titles I, X, XIV, or XVI of the Social Security Act.
- If the recipient lives in another person's household for a full calendar month and receives both food and shelter from that person, the federal benefit rate (amounts for living independently) is reduced by one-third.
- Includes eligible persons who live in a public or private medical institution throughout a month and Medicaid is paying more than 50 percent of the cost of their care. It also includes eligible children under age 18 who live in a public or private medical institution throughout a month and Medicaid, or a combination of Medicaid and private insurance, is paying more than 50 percent of the cost of care.

Federal Code D. Includes eligible persons who live in a public or private medical institution throughout a month and Medicaid is paying more than 50 percent of the cost of their care. It also includes eligible children under age 18 who live in a public or private medical institution throughout a month and Medicaid, or a combination of Medicaid and private insurance, is paying more than 50 percent of the cost of care.

Number of recipients. The number of recipients receiving optional payments from the state is displayed in Table 2 in each state summary. This number may include persons who are ineligible for federal SSI payments but meet state eligibility criteria.

Total expenditures. The total amount of expenditures for SSI recipients reported by state-administered states who participate in the Optional Supplementation Program. The expenditures reflect previous year counts and were not reported by all state-administered states.

State Assistance for Special Needs

This assistance is for emergency or special conditions not covered by monthly SSI or optional state supplementary payments. Disaster benefits, burial expenses, additional subsidies for institutional care, and moving expenses are included in this category.

Administration. The governmental unit responsible for administering these payments is indicated.

Special needs circumstances. The special needs circumstances (recurring and nonrecurring) for which assistance can be approved are defined. Where available, eligibility requirements and payment limitations are described.

Medicaid

All states have federally assisted medical assistance (Medicaid) programs.

Eligibility

States may grant Medicaid eligibility to all SSI recipients or apply state guidelines in determining eligibility.

Either the SSI program guidelines or the state guidelines may be used to determine eligibility. State guidelines may not be more restrictive than the state's January 1972 medical assistance standards. The governmental unit responsible for determining eligibility is indicated.

Medically Needy Program

The presence or absence of a medically needy program for SSI-related populations is indicated. Statute permits states to choose either no medically needy program, a restricted program, Temporary Assistance for Needy Families (TANF), or a program for the TANF-related and one or more of the SSI-related categories (that is, aged, blind, or disabled). States determine eligibility for this program.

Unpaid Medical Expenses

Under Medicaid statute, a state must pay unpaid medical expenses incurred for services covered under its Medicaid state plan for up to 3 months before an individual is found eligible for SSI, if the individual would have been eligible had he or she applied then. The entry indicates whether SSA has a contractual agreement with the state to inquire about the unpaid medical expenses of SSI claimants.

Summary Tables

Summary Table 1.

Number of persons receiving optional state supplementation, by state and eligibility category, January 2007

State	Total	Aged	Blind	Disabled	
				Adults	Children
Alabama ^a	319	116	5	198	b
Alaska ^a	15,768	4,982	84	10,702	c
Arizona ^{d, e}	370	--	--	--	c
Arkansas ^f	...	...	...	...	...
California	^g 1,208,770	355,366	18,354	692,937	142,106
Colorado	15,495	12,980	0	2,515	0
Connecticut	15,469	4,683	94	10,692	h
Delaware ⁱ	^g 684	44	11	566	57
District of Columbia ⁱ	^g 1,471	132	9	1,243	86
Florida ^a	13,769	5,793	5	7,971	b
Georgia ^f	2,392	...	...	...	...
Hawaii	2,374	677	26	1,605	66
Idaho	13,028	2,286	36	9,562	1,144
Illinois	27,979	6,072	90	21,817	b
Indiana	3,427	932	18	2,477	c
Iowa	15,338	--	--	--	--
Kansas	--	--	--	--	--
Kentucky	4,330	1,513	18	2,799	b
Louisiana	4,265	1,206	43	3,016	b
Maine ^d	36,557	--	--	--	--
Maryland ^d	3,038	--	--	--	c
Massachusetts	171,368	44,487	2,958	97,463	26,460
Michigan	^g 224,800	--	--	--	--
Minnesota	39,972	11,778	262	27,932	b
Mississippi ^f	...	...	...	...	...
Missouri ^e	7,662	4,337	1	3,324	c
Montana	^g 959	21	10	633	291
Nebraska	5,905	1,221	44	4,640	b
Nevada	^g 9,283	8,541	492	j	135
New Hampshire	7,543	1,317	241	5,985	b
New Jersey	151,725	33,115	830	87,387	30,393
New Mexico	112	6	1	105	c
New York	615,569	131,355	2,518	383,160	98,536
North Carolina	24,959	12,476	88	12,395	c
North Dakota ^f	...	...	...	...	...
Ohio ^d	1,863	553	--	--	c
Oklahoma	77,771	18,367	450	47,478	11,476
Oregon	27,122	4,375	506	22,241	h
Pennsylvania	^g 301,141	45,554	645	180,080	74,834
Rhode Island	30,222	3,861	172	20,394	5,795
South Carolina	2,542	1,063	8	1,471	b
South Dakota ^d	3,748	--	--	--	b
Tennessee ^f	...	...	...	...	...
Texas	9,580	2,520	120	6,940	b
Utah	1,868	429	15	1,182	242

(Continued)

Summary Table 1.
Continued

State	Total	Aged	Blind	Disabled	
				Adults	Children
Vermont	13,185	1,100	75	9,526	2,484
Virginia ^d	5,961	--	--	--	c
Washington ^k	30,705	25,799	751	4,100	b
West Virginia ^f	...	...	...	...	...
Wisconsin	98,637	9,040	960	64,251	24,386
Wyoming ^d	2,750	--	--	--	b

SOURCES: Social Security Administration, Supplemental Security Record, 100 percent data; information in the state summaries.

NOTE: -- = not available; . . . = not applicable.

- a. Includes certain grandfathered non-SSI recipients who meet state eligibility criteria.
- b. A separate count for children is not available.
- c. Children under 18 years old are not eligible for optional payment.
- d. Data not available by eligibility category.
- e. Data for fiscal year 2006.
- f. The state does not have an optional supplementation program.
- g. Includes recipients whose type of living arrangement was not coded properly. See state Table 2 for more information.
- h. Only blind children are eligible; a separate count is not available.
- i. Benefits received under a child welfare program.
- j. The state does not offer supplement to disabled recipients.
- k. Includes 55 persons converted from the former state program.

Summary Table 2.**Selected features of state supplementation, by state, January 2007**

State	Administration of—		Method of passalong	Participation in interim assistance reimbursement program
	Mandatory minimum supplementation	Optional state supplementation		
Alabama	No recipients	State	Payment levels	No
Alaska	No recipients	State	Total expenditures	Yes
Arizona	State	State	Payment levels	Yes
Arkansas	Federal	No program	No program	No
California	Federal	Federal	Payment levels	Yes
Colorado	State	State	Total expenditures	Yes
Connecticut	No recipients	State	Payment levels	Yes
Delaware	Federal	Federal/state	Payment levels	Yes
District of Columbia	Federal	Federal/state	Total expenditures	Yes
Florida	No recipients	State	Payment levels	Yes
Georgia	Federal	State	Payment levels	Yes
Hawaii	No recipients	Federal	Total expenditures	Yes
Idaho	State	State	Payment levels	No
Illinois	State	State	Payment levels	Yes
Indiana	No recipients	State	Payment levels	Yes
Iowa	Federal	Federal/state	Payment levels	Yes
Kansas	Federal	No information	Unknown	Yes
Kentucky	No recipients	State	Payment levels	Yes
Louisiana	Federal	State	Payment levels	No
Maine	State	State	Payment levels	Yes
Maryland	Federal	State	Payment levels	Yes
Massachusetts	Federal	Federal	Payment levels	Yes
Michigan	Federal	Federal/state	Payment levels	Yes
Minnesota	No recipients	State	Payment levels	Yes
Mississippi	Federal	No program	No program	No
Missouri	State	State	Payment levels	Yes
Montana	Federal	Federal	Payment levels	Yes
Nebraska	State	State	Total expenditures	Yes
Nevada	No recipients	Federal	Payment levels	Yes
New Hampshire	State	State	Payment levels	Yes
New Jersey	Federal	Federal	Payment levels	Yes
New Mexico	State	State	Payment levels	Yes
New York	Federal	Federal/state	Payment levels	Yes
North Carolina	State	State	Payment levels	Yes
North Dakota	No recipients	No program	No program	No
Ohio	Federal	State	Payment levels	Yes
Oklahoma	State	State	Total expenditures	No
Oregon	State	State	Total expenditures	No
Pennsylvania	Federal	Federal/state	Payment levels	Yes
Rhode Island	No recipients	Federal	Payment levels	Yes
South Carolina	No recipients	State	Payment levels	No
South Dakota	Federal	State	Payment levels	No
Tennessee	Federal	No program	No program	Yes
Texas	No recipients	State	Payment levels	No
Utah	No recipients	Federal	Payment levels	Yes
Vermont	No recipients	Federal	Payment levels	Yes
Virginia	No recipients	State	Total expenditures	Yes
Washington	State	State	Total expenditures	Yes
West Virginia	No program	No program	No program	No
Wisconsin	No recipients	State	Total expenditures	Yes
Wyoming	State	State	Payment levels	No

SOURCE: Based on information in the state summaries.

Summary Table 3.**Selected features of medical programs affecting SSI recipients and the needy, by state, January 2007**

State	Medicaid eligibility		Medically needy program	SSA obtains information on unpaid medical expenses
	Criteria	Determined by—		
Alabama	Federal	Federal	No	No
Alaska	Federal	State	No	No
Arizona	Federal	Federal	Yes	No
Arkansas	Federal	Federal	Yes	Yes
California	Federal	Federal	Yes	No
Colorado	Federal	Federal	No	Yes
Connecticut	State	State	Yes	No
Delaware	Federal	Federal	No	Yes
District of Columbia	Federal	Federal	Yes	Yes
Florida	Federal	Federal	Yes	No
Georgia	Federal	Federal	Yes	No
Hawaii	State	State	Yes	No
Idaho	Federal	State	No	No
Illinois	State	State	Yes	No
Indiana	State	State	No	No
Iowa	Federal	Federal	Yes	Yes
Kansas	Federal	State	Yes	No
Kentucky	Federal	Federal	Yes	Yes
Louisiana	Federal	Federal	Yes	Yes
Maine	Federal	Federal	Yes	No
Maryland	Federal	Federal	Yes	Yes
Massachusetts	Federal	Federal	Yes	Yes
Michigan	Federal	Federal	Yes	No
Minnesota	State	County	Yes	No
Mississippi	Federal	Federal	No	No
Missouri	State	State	No	No
Montana	Federal	Federal	Yes	No
Nebraska	Federal	State	Yes	No
Nevada	Federal	State	No	No
New Hampshire	State	State	Yes	No
New Jersey	Federal	Federal	Yes	Yes
New Mexico	Federal	Federal	No	No
New York	Federal	Federal	Yes	No
North Carolina	Federal	Federal	Yes	No
North Dakota	State	State	Yes	No
Ohio	State	State	No	No
Oklahoma	State	State	Yes	No
Oregon	Federal	State	No	No
Pennsylvania	Federal	Federal	Yes	Yes
Rhode Island	Federal	Federal	Yes	Yes
South Carolina	Federal	Federal	No	No
South Dakota	Federal	Federal	No	Yes
Tennessee	Federal	Federal	Yes	Yes
Texas	Federal	Federal	Yes	Yes
Utah	Federal	State	Yes	No
Vermont	Federal	Federal	Yes	No
Virginia	State	State	Yes	No
Washington	Federal	Federal	Yes	Yes
West Virginia	Federal	Federal	Yes	Yes
Wisconsin	Federal	Federal	Yes	No
Wyoming	Federal	Federal	No	Yes

SOURCE: Based on information in the state summaries.

Summary Table 4.**State threshold amounts for disabled and blind individuals to maintain Medicaid eligibility under section 1619(b) of the Social Security Act, calendar year 2007**

State	Twice state supplementation ^a (dollars)	Base amount ^b (dollars)	State per capita Medicaid expenditure (dollars)	Threshold ^c	
				Amount (dollars)	Rank
<i>Disabled individuals</i>					
Alabama	0	15,972	6,756	22,728	50
Alaska	8,688	24,660	26,025	50,685	2
Arizona	0	15,972	11,429	27,401	34
Arkansas	0	15,972	9,399	25,371	43
California	5,016	20,988	11,932	32,920	14
Colorado	600	16,572	14,626	31,198	21
Connecticut	4,032	20,004	32,403	52,407	1
Delaware	0	15,972	16,310	32,282	15
District of Columbia	0	15,972	21,354	37,326	7
Florida	0	15,972	11,092	27,064	35
Georgia	0	15,972	9,077	25,049	46
Hawaii	0	15,972	12,291	28,263	27
Idaho	768	16,740	17,797	34,537	8
Illinois	0	15,972	15,039	31,011	22
Indiana	0	15,972	16,049	32,021	17
Iowa	0	15,972	11,833	27,805	31
Kansas	0	15,972	13,894	29,866	24
Kentucky	0	15,972	8,799	24,771	47
Louisiana	0	15,972	10,313	26,285	41
Maine	240	16,212	23,849	40,061	5
Maryland	0	15,972	17,942	33,914	10
Massachusetts	2,745	18,717	14,816	33,533	11
Michigan	336	16,308	9,018	25,326	44
Minnesota	1,944	17,916	26,093	44,009	3
Mississippi	0	15,972	7,512	23,484	48
Missouri	0	15,972	12,977	28,949	26
Montana	0	15,972	10,972	26,944	36
Nebraska	0	15,972	11,982	27,954	29
Nevada	216	15,972	10,914	26,886	37
New Hampshire	648	16,620	22,426	39,046	6
New Jersey	750	16,722	14,869	31,591	19
New Mexico	0	15,972	16,044	32,016	18
New York	2,088	18,060	23,711	41,771	4
North Carolina	0	15,972	13,438	29,410	25
North Dakota	0	15,972	17,001	32,973	13
Ohio	0	15,972	16,125	32,097	16
Oklahoma	1,152	17,124	6,308	23,432	49
Oregon	48	16,020	11,983	28,003	28
Pennsylvania	658	16,630	11,205	27,835	30
Rhode Island	1,376	17,348	16,964	34,312	9
South Carolina	0	15,972	10,354	26,326	40
South Dakota	360	16,332	14,155	30,487	23
Tennessee	0	15,972	6,202	22,174	51
Texas	0	15,972	11,803	27,775	32
Utah	0	15,972	10,552	26,524	39

(Continued)

**Summary Table 4.
Continued**

State	Twice state supplementation ^a	Base amount ^b	State per capita Medicaid expenditure	Threshold ^c	
				Amount	Rank
<i>Disabled individuals (cont.)</i>					
Vermont	1,249	17,221	16,277	33,498	12
Virginia	0	15,972	11,605	27,577	33
Washington	1,104	17,076	9,454	26,520	38
West Virginia	0	15,972	9,465	25,437	42
Wisconsin	2,011	17,983	13,340	31,323	20
Wyoming	251	16,223	9,069	25,292	45
<i>Blind individuals</i>					
California	6,576	22,548	11,932	34,480	1
Iowa	528	16,500	11,833	28,333	5
Massachusetts	3,594	19,566	14,816	34,382	2
Nevada	2,623	18,595	10,914	29,509	3
Oregon	641	16,613	11,983	28,596	4

SOURCE: Social Security Administration, Program Operations Manual System (POMS), SI 02302.200, Charted Threshold Amounts.

- a. Twice the annual state supplementation rate, if any, for an individual living independently.
- b. The base amount is the annual amount of earned income it takes to reduce the annual SSI federal plus state benefit to zero. It is calculated as the sum of twice the state individual supplementation rate plus \$15,972; \$15,972 is the amount of earned income it takes in calendar year 2007 to reduce the annual federal benefit to zero, based on the monthly calculation (\$85 plus twice the monthly federal benefit rate of \$623) multiplied by 12.
- c. The threshold is the sum of the base amount and the state per capita Medicaid expenditure.