

Arizona

State Supplementation

Mandatory Minimum Supplementation

Administration: Arizona Department of Economic Security; Aging Adult Administration and Family Assistance Administration.

Optional State Supplementation

Administration: Arizona Department of Economic Security; Aging Adult Administration and Family Assistance Administration.

Effective date: May 9, 1974.

Statutory basis for payment: Arizona Revised Statutes 46:252.

Funding

Administration: State funds.

Assistance: State funds.

Passalong method: Maintaining payment levels.

Place of application: Area Agencies on Aging, Catholic Social Services, other designated contracting agencies, and local offices of state Department of

Economic Security. County Health Department Long-Term Care Unit and city Human Resources Departments arrange home interviews (if needed) or refer to appropriate agencies.

Scope of coverage: Optional state supplement provided to all SSI recipients who require assistance with housekeeping. Children under age 18 are not eligible for optional supplementation.

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 calculation method: The state supplementation is added to the federal payment. Countable income is deducted first from the federal payment. Any income that remains to be counted after the federal payment has been reduced to zero is then deducted from the state supplementary payment.

Payment levels: See Table 1.

Number of recipients: See Table 2.

Table 1.
Optional state supplementation payment levels, January 2007 (in dollars)

Living arrangement	Combined federal and state		State supplementation	
	Individual	Couple	Individual	Couple
Requires housekeeping services ^a	693.00	1,004.00	70.00	70.00

SOURCES: Social Security Administration, Office of Income Security Programs; state information.

a. Services may be provided in lieu of cash grants. Services and cash benefits are the same for individuals and couples.

DEFINITION:

Requires housekeeping services. A determination that the person is functionally impaired in sufficient degree as to require help with housekeeping, laundry, essential shopping, errands, and meal preparation.

Table 2.
Number of persons receiving optional state supplementation, Fiscal Year 2006

Living arrangement	Total	Aged	Blind	Disabled
All recipients	370	--	--	--
Requires housekeeping services	--	--	--	--

SOURCE: State information.

NOTES: Data for 2007 were not available.

-- = not available.

State Assistance for Special Needs

Administration

Arizona Department of Economic Security.

Special Needs Circumstances

Visiting nurse services: Up to \$160 in vendor payments per month for any aged SSI recipient who is 65 years or older when medical findings substantiate need.

Home health services: Up to \$160 in vendor payments per month for any aged SSI recipient who is 65 years or older when medical findings substantiate need.

Medicaid

Medical assistance is provided through a Title XIX authorized demonstration program—the Arizona Health

Care Cost Containment System (AHCCCS)—which is more limited in scope than Medicaid.

Eligibility

Criteria: SSI program guidelines (Title XVI).

Determined by: Social Security Administration.

Medically Needy Program

Arizona Department of Health Services provides funds for the medically needy.

Unpaid Medical Expenses

The Social Security Administration does not obtain this information.

California

State Supplementation

Mandatory Minimum Supplementation

Administration: Social Security Administration.

Optional State Supplementation

Administration: Social Security Administration.

Effective date: January 1, 1974.

Statutory basis for payment: Welfare and Institutions Code, section 12000ff.

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 every aged, blind, and disabled SSI recipient, including children.

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 calculation method: The state supplementation is added to the federal payment. Countable income is deducted first from the federal payment. Any income that remains to be counted after

the federal payment has been reduced to zero is then deducted from the state supplementary payment.

Payment levels: See Table 1.

Number of recipients: See Table 2.

State Assistance for Special Needs

Administration

Health and Human Services Agency, Department of Social Services.

Special Needs Circumstances

Maintenance for guide dog: Eligible recipients with guide, signal, or other service dogs receive \$50 per month in state aid to pay for dog food and other costs associated with the dog's maintenance.

In-home supportive services: Supportive services (i.e., certain domestic and personal care services) are provided to eligible aged, blind, and disabled persons who cannot perform the services themselves and who cannot safely remain in their own home unless such services are provided.

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.

Table 1.
Optional state supplementation payment levels, January 2007 (in dollars)

Living arrangement	State code	Combined federal and state		State supplementation	
		Individual	Couple	Individual	Couple
Living independently with cooking facilities	A				
Aged and disabled		856.00	1,502.00	233.00	568.00
Blind		921.00	^a 1,729.00	298.00	795.00
Nonmedical out-of-home care	B	1,035.00	2,070.00	412.00	1,136.00
Living independently without cooking facilities	C				
Aged and disabled		940.00	1,670.00	317.00	736.00
Living in the household of another	D				
Aged and disabled		649.34	1,218.33	234.00	595.66
Blind		730.34	^b 1,445.33	315.00	822.66
Disabled minor in home of parent or relative by blood or marriage	E	742.00	...	119.00	...
Nonmedical out-of-home care, living in the household of another	F	822.34	1,668.33	407.00	1,045.66
Disabled minor in the household of another	G	523.34	...	108.00	...
Medicaid facility	J	50.00	100.00	20.00	40.00

SOURCE: Social Security Administration, Office of Income Security Programs.

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

... = not applicable.

a. Payment level for a couple in which only one member is blind is \$1,644.

b. Payment level for a couple in which only one member is blind is \$1,359.33.

DEFINITIONS:

A: Living independently with cooking facilities. Includes recipients who:

- Live in their own household and have cooking and food storage facilities or are provided with meals as part of the living arrangement,
- Are patients in private medical facilities licensed by the state but not certified under Title XIX,
- Are blind children under age 18 who live with parents, or
- Are blind and live independently with or without cooking and food storage facilities.

B: Nonmedical out-of-home care (NMOHC). Includes adult recipients who reside in a federal Code A living arrangement and who receive care and supervision while residing either in the home of a relative, legal guardian, or conservator or in a state-licensed NMOHC facility.

Includes children who are:

- Blind and residing in a state-licensed NMOHC facility,
- Blind and residing in the home of a relative who is not his or her parent or legal guardian or conservator,
- Disabled and residing in a state-licensed NMOHC facility,
- Disabled and residing in the home of a legal guardian or conservator who is not his or her relative,
- Disabled and residing in the home of a relative who is not his or her parent, or
- Blind or disabled and residing in a "certified family home."

C: Living independently without cooking facilities (aged and disabled). Includes aged or disabled recipients or couples who are not provided with meals and do not have access to adequate cooking and food storage facilities as part of their living arrangement.

D: Living in the household of another. Includes recipients residing in a federal Code B living arrangement who do not qualify for any other state arrangement.

E: Disabled minor in home of parent or relative by blood or marriage. Includes disabled children under age 18 who reside with a parent.

F: Nonmedical out-of-home care, living in the household of another. Includes recipients who meet the state criteria for nonmedical out-of-home care payments and are in a federal Code B living arrangement.

G: Disabled minor in the household of another. Includes disabled children under age 18 who reside with a parent but are in a federal Code B living arrangement.

J: Medicaid facility. Includes recipients who reside in a federal Code D living arrangement.

Table 2.
Number of persons receiving optional state supplementation, January 2007

Living arrangement	State code	Total	Aged	Blind	Disabled	
					Adults	Children
All recipients		^a 1,208,770	355,366	18,354	692,937	142,106
Living independently with cooking facilities	A	923,867	299,899	16,493	572,430	35,045
Nonmedical out-of-home care	B	55,902	5,097	513	43,770	6,522
Living independently without cooking facilities	C	37,751	3,621	1	33,689	440
Living in the household of another	D	80,342	42,329	1,126	32,830	4,057
Disabled minor in home of parent or relative by blood or marriage	E	90,604	0	0	0	90,604
Nonmedical out-of-home care, living in the household of another	F	1,696	385	33	1,131	147
Disabled minor in the household of another	G	3,123	3,123
Medicaid facility	J	15,478	4,035	188	9,087	2,168

SOURCE: Social Security Administration, Supplemental Security Record, 100 percent data.

NOTE: ... = not applicable.

a. Includes 7 recipients whose type of living arrangement was not properly coded.

Hawaii

State Supplementation

Mandatory Minimum Supplementation

No recipients.

Optional State Supplementation

Administration: Social Security Administration.

Effective date: January 1, 1974.

Statutory basis for payment: Hawaii Revised Statutes, section 346-53(C)(1) and (2).

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 SSI recipients, including children. Payment amounts for eligible children in domiciliary care are determined on an individual basis. Recipients in medical facilities who are eligible for federal payments under section 1611(e)(1)(E) of the Social Security Act receive state optional supplementation (Code A payment level) for up to 2 months.

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 calculation method: The state supplementation is added to the federal payment. Countable income is deducted first from the federal payment. Any income that remains to be counted after the federal payment has been reduced to zero is then deducted from the state supplementary payment.

Payment levels: See Table 1.

Number of recipients: See Table 2.

Table 1.

Optional state supplementation payment levels, January 2007 (in dollars)

Living arrangement	State code	Combined federal and state		State supplementation	
		Individual	Couple	Individual	Couple
Foster care home	B	1,244.90	2,489.80	621.90	1,555.80
Domiciliary care facility, Level I	H	1,244.90	2,489.80	621.90	1,555.80
Domiciliary care facility, Level II	I	1,352.90	2,705.80	729.90	1,771.80

SOURCE: Social Security Administration, Office of Income Security Programs.

DEFINITIONS:

B: Foster care home. Includes recipients who are certified by the state as residents of a foster care home.

H and I: Domiciliary care facility. Includes recipients (including children) living in a private, nonmedical facility (established and maintained for the purpose of providing personal care and services to aged, infirm, or handicapped persons) and certified by the state. Level I is licensed by the state for fewer than six residents, and Level II is licensed for six or more residents.

Table 2.
Number of persons receiving optional state supplementation, January 2007

Living arrangement	State code	Total	Aged	Blind	Disabled	
					Adults	Children
All recipients		2,374	677	26	1,605	66
Foster care home	B	761	435	4	320	2
Domiciliary care facility, Level I	H	1,558	217	21	1,256	64
Domiciliary care facility, Level II	I	55	25	1	29	0

SOURCE: Social Security Administration, Supplemental Security Record, 100 percent data.

State Assistance for Special Needs

Administration

State Department of Human Services.

Special Needs Circumstances

Housing and utility deposit: One-time payment made to SSI recipients with total monthly income under \$418.

Repair or replacement of stove or refrigerator: Payments made to SSI recipients with total monthly income under \$418.

Emergency assistance due to natural disaster: Payments made to SSI recipients with total monthly income under \$418.

Special care payments: Payments of \$100 a month are provided to SSI recipients residing in a domiciliary care home who have been certified for an intermediate care facility (ICF) or skilled nursing facility but have not been placed in one because of a lack of bed space. In

addition to meeting other requirements, these recipients must be wheelchair bound, incontinent, or in need of non-oral medication.

Medicaid

Eligibility

Criteria: State guidelines.

Determined by: State.

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.

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 calculation method: The state supplementation is added to the federal payment. Countable income is deducted first from the federal payment. Any income that remains to be counted after the federal payment has been reduced to zero is then deducted from the state supplementary payment.

Payment levels: See Table 1.

Number of recipients: See Table 2.

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.

Table 1.
Optional state supplementation payment levels, January 2007 (in dollars)

Living arrangement	State code	Combined federal and state		State supplementation	
		Individual	Couple	Individual	Couple
Living independently	A				
Aged		659.40	1,008.46	36.40	74.46
Blind		732.30	1,308.60	109.30	^a 374.60
Living in the household of another	B				
Aged		439.61	672.31	24.27	49.64
Blind		629.30	1,154.61	213.96	^b 531.94
Domiciliary care (aged and blind)	C	1,014.00	1,815.00	391.00	881.00

SOURCE: Social Security Administration, Office of Income Security Programs.

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.

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 (aged and blind). 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 and who are unrelated to the proprietor.

Table 2.
Number of persons receiving optional state supplementation, January 2007

Living arrangement	State code	Total	Aged	Blind	
				Adults	Children
All recipients		^a 9,283	8,541	492	135
Living independently	A	8,136	7,521	439	127
Living in the household of another	B	729	673	45	7
Domiciliary care	C	356	347	8	1

SOURCE: Social Security Administration, Supplemental Security Record, 100 percent data.

a. Includes 62 recipients not distributed by type of living arrangement and 115 recipients whose eligibility category was not properly coded.