

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.

Total expenditures: The Social Security Administration reported expenditures of \$2,565,363,000 for calendar year 2010 in federally administered payments to SSI recipients.

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.A
Optional state supplementation payment levels, January 2011 (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		845.00	1,407.20	171.00	396.20
Blind		908.00	^a 1,554.20	234.00	543.20
Nonmedical out-of-home care	B	1,086.00	2,172.00	412.00	1,161.00
Living independently without cooking facilities	C				
Aged and disabled		929.00	1,575.20	255.00	564.20
Living in the household of another	D				
Aged and disabled		639.66	1,075.33	190.32	401.33
Blind		718.32	^b 1,222.33	268.98	548.33
Disabled minor in home of parent or relative by blood or marriage	E	739.00	...	65.00	...
Nonmedical out-of-home care, living in the household of another	F	856.34	1,719.66	407.00	1,045.66
Disabled minor in the household of another	G	517.30	...	67.96	...
Medicaid facility	J	50.00	100.00	20.00	40.00

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

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 \$1,498.20.

b. Payment level for a couple in which only one member is blind is \$1,166.33.

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 disabled children age 18 or older who live with parents or meet the shared living criteria;
- Are blind and live independently with or without cooking and food storage facilities; or
- Are patients in a private medical licensed facility where Title XIX does not pay more than 50 percent of the cost of care.

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 a parent or legal guardian,
- Disabled and residing in a state-licensed NMOHC facility,
- Disabled and residing in the home of a legal guardian who is not a relative,
- Disabled and residing in the home of a relative who is not a parent, or
- Blind or disabled and residing in a "certified family home" approved by a licensed home finding agency ("certified family home placement").

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, including transients.

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 living 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 or relative by blood or marriage but are in a federal Code B living arrangement.

J: Medicaid facility. Includes recipients who reside in a federal Code D living arrangement, and is also used to supplement Section 1619 cases.

Table 1.B
Optional state supplementation payment levels, July 2011 (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		830.40	1,407.20	156.40	396.20
Blind		885.40	^a 1,554.20	211.40	543.20
Nonmedical out-of-home care	B	1,086.00	2,172.00	412.00	1,161.00
Living independently without cooking facilities	C				
Aged and disabled		914.40	1,575.20	240.40	564.20
Living in the household of another	D				
Aged and disabled		609.17	1,075.33	159.83	401.33
Blind		664.17	^b 1,222.33	214.83	548.33
Disabled minor in home of parent or relative by blood or marriage	E	737.40	...	63.40	...
Nonmedical out-of-home care, living in the household of another	F	856.34	1,719.66	407.00	1,045.66
Disabled minor in the household of another	G	516.17	...	66.83	...
Medicaid facility	J	50.00	100.00	20.00	40.00

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

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 \$1,498.20.

b. Payment level for a couple in which only one member is blind is \$1,166.33.

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 disabled children age 18 or older who live with parents or meet the shared living criteria;
- Are blind and live independently with or without cooking and food storage facilities; or
- Are patients in a private medical licensed facility where Title XIX does not pay more than 50 percent of the cost of care.

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 a parent or legal guardian,
- Disabled and residing in a state-licensed NMOHC facility,
- Disabled and residing in the home of a legal guardian who is not a relative,
- Disabled and residing in the home of a relative who is not a parent, or
- Blind or disabled and residing in a "certified family home" approved by a licensed home finding agency ("certified family home placement").

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, including transients.

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 living 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 or relative by blood or marriage but are in a federal Code B living arrangement.

J: Medicaid facility. Includes recipients who reside in a federal Code D living arrangement, and is also used to supplement Section 1619 cases.

Table 2.
Number of persons receiving optional state supplementation, January 2011

Living arrangement	State code	Total	Aged	Blind	Disabled	
					Adults	Children
All recipients		1,257,811	356,636	16,842	718,457	165,876
Living independently with cooking facilities	A	959,879	300,388	15,156	598,128	46,207
Nonmedical out-of-home care	B	52,757	4,367	466	41,395	6,529
Living independently without cooking facilities	C	37,044	3,162	0	33,396	486
Living in the household of another	D	86,520	44,210	1,021	35,767	5,522
Disabled minor in home of parent or relative by blood or marriage	E	101,283	101,283
Nonmedical out-of-home care, living in the household of another	F	1,305	247	23	918	117
Disabled minor in the household of another	G	3,687	3,687
Medicaid facility	J	15,336	4,262	176	8,853	2,045

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

NOTE: ... = not applicable.