

# Alaska

## State Supplementation

### Mandatory State Supplementation

No recipients.

### 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 47.25.430-47.25.615.

#### Funding

*Administration:* State funds.

*Assistance:* State funds.

**Passalong method:** Maintaining total expenditures.

**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 all needy aged, blind, and disabled persons, including certain grandfathered persons who would receive SSI payments except for their income level but excluding persons in the Alaska Pioneer Homes, 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:** Federal SSI regulations apply.

**Income exclusions:** Federal SSI regulations apply; in-kind income is also excluded.

**Recoveries, liens, and assignments:** None.

**Financial responsibility of relatives:** Child for aged parent.

**Interim assistance:** State participates.

**Payment calculation method:** A standard applies that is established by the state for the total SSI payment. The federal SSI payment and any countable income are deducted from the state standard. The remainder is the state supplementation. For non-SSI recipients, any countable income is subtracted from the state standard.

**Payment levels:** See Table 1.

**Number of recipients:** See Table 2.

**Total expenditures<sup>1</sup>:** The state reported expenditures of \$55,946,103 for calendar year 2010 in state-administered payments to SSI recipients.

## 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.

1. Includes payments made to some non-SSI recipients who meet state eligibility criteria, but do not meet federal SSI eligibility guidelines.

**Table 1.**  
**Optional state supplementation payment levels, January 2011 (in dollars)**

Living arrangement	Combined federal and state		State supplementation	
	Individual	Couple	Individual	Couple
Living independently	1,036.00	1,539.00	362.00	528.00
Living independently with an ineligible spouse	1,195.00	...	521.00	...
Living in the household of another	817.34	1,217.00	368.00	543.00
Living in the household of another with an ineligible spouse	913.34	...	464.00	...
Assisted living home	774.00	1,211.00	100.00	200.00
Assisted living home with an ineligible spouse	774.00	...	100.00	...
Medicaid facility	75.00	150.00	45.00	90.00

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

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 whose income is deemed available to them;
- 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 devisor 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 reside in another's household for a full calendar month, except for temporary absences, and receive both food and shelter from that person.

**Assisted living home.** Includes eligible persons who reside in an assisted living home for a full calendar month.

**Medicaid facility.** Includes recipients 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 2011**

Living arrangement	Total	Aged	Blind	Disabled
All recipients	17,630	5,096	75	12,459
Living independently	15,565	4,674	69	10,822
Living in the household of another	769	139	1	629
Assisted living home	1,226	264	5	957
Medicaid facility	70	19	0	51

SOURCE: State information.

NOTE: Includes some non-SSI recipients who meet state eligibility criteria, but do not meet federal SSI eligibility guidelines.

## Idaho

### State Supplementation

#### Mandatory Minimum Supplementation

**Administration:** State Department of Health and Welfare.

#### Optional State Supplementation

**Administration:** State 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 state Department of Health and Welfare.

**Scope of coverage:** Optional state supplement provided to all SSI recipients, including children, residing in the specified living arrangements. 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:** Federal SSI regulations apply.

**Income exclusions:** Federal SSI regulations apply; in-kind support and maintenance is also excluded unless received as wages.

**Recoveries, liens, and assignments:** None.

**Financial responsibility of relatives:** Spouse for spouse; parent or stepparent for minor child.

**Interim assistance:** State does not participate.

**Payment calculation method:** A standard applies that is established by the state for the total SSI payment. The federal SSI payment and any countable income are deducted from the state standard. The remainder is the state supplementation. The maximum payment amount for individuals and couples living independently is \$53.

**Payment levels:** See Table 1.

**Number of recipients:** See Table 2.

**Total expenditures:** The state reported expenditures of \$8,607,546 for calendar year 2010 in state-administered payments to SSI recipients.

### State Assistance for Special Needs

#### Administration

State 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 service animals:** Allowance for care and maintenance of service animals 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.

**Table 1.**  
**Optional state supplementation payment levels, January 2011 (in dollars)**

Living arrangement	Combined federal and state		State supplementation	
	Individual	Couple	Individual	Couple
Living independently or in the household of another <sup>a</sup>	727.00	1,031.00	53.00	20.00
Living with an essential person	1,064.00	. . .	52.00	. . .
Room and board facility	872.00	b	198.00	b
Assisted living facility or certified family home				
Level I	1,013.00	b	339.00	b
Level II	1,080.00	b	406.00	b
Level III	1,147.00	b	473.00	b
Semi-independent group residential facility	872.00	b	198.00	b

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

NOTE: . . . = not applicable.

a. State supplement is increased to offset the reduced federal payment for persons living in the household of another. The payment amount is capped at \$53 for individuals and couples living independently.

b. Couples are treated as two individuals starting with the month after leaving an independent living arrangement.

**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.

**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.

**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 2011**

Living arrangement	Total	Aged	Blind	Disabled	
				Adults	Children
All recipients	14,251	2,104	78	10,884	1,185
Living independently or in the household of another, or living with an essential person	13,809	2,064	77	10,526	1,141
Room and board facility	407	35	1	328	44
Assisted living facility or certified family home	21	4	--	17	--
Semi-independent group residential facility	14	1	--	13	--

SOURCE: State information.

NOTE: -- = not available.

# Oregon

meeting requirements for specific special need item receive supplementation.

**Resource limitations:** Federal SSI limitations.

**Income exclusions:** Federal SSI earned and unearned income exclusions used.

**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. The Department of Human Services 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.

**Financial responsibility of relatives:** None.

**Interim assistance:** State does not participate.

**Payment calculation method:** Varies.

**Payment levels:** See Table 1.

**Number of recipients:** See Table 2.

**Total expenditures<sup>1</sup>:** The state reported expenditures of \$2,146,873 for calendar year 2010 in state-administered payments to SSI recipients.

1. Represents preliminary unreconciled counts.

## State Supplementation

### Mandatory Minimum Supplementation

No recipients.

### Optional State Supplementation

**Administration:** State Department of Human Services, Seniors, and People with Disabilities Division (state-administered in local offices).

**Effective date:** January 1, 1974.

**Statutory basis for payment:** Oregon Revised Statutes 411.141.

#### Funding

*Administration:* State funds.

*Assistance:* State funds.

**Passalong method:** Maintaining total expenditures.

**Place of application:** Local offices of the Department of Human Services and local offices of county and local government.

**Scope of coverage:** State-administered payments provided to some SSI recipients or to an individual who would be eligible for SSI except for income. Individuals

**Table 1.**

### Optional state supplementation payment levels, January 2011 (in dollars)

Living arrangement	Combined federal and state		State supplementation	
	Individual	Couple	Individual	Couple
Living independently	a	a	a	a
Living in the household of another	a	a	a	a
Adult foster care or residential care facility	a	a	a	a
Medicaid facility	a	a	a	a

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

a. State supplementation is based on state-approved allowances given for individual needs.

#### DEFINITIONS:

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

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

**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.

**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.

**Medicaid facility.** Includes recipients residing in a federal code D living arrangement.

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

Living arrangement	Total	Aged	Blind	Disabled
All recipients <sup>a</sup>	1,848	--	--	--
Living independently	--	--	--	--
Living in the household of another	--	--	--	--
Adult foster care or residential care facility	--	--	--	--
Medicaid facility	--	--	--	--

SOURCE: State information.

NOTE: -- = not available.

a. Represents preliminary unreconciled count.

## **State Assistance for Special Needs**

### **Administration**

State Department of Human Services, Seniors, and People with Disabilities.

### **Special Needs Circumstances**

**Community-based care:** Eligible for payment for room and board during the month of admission at the initial placement. Room and board payments may be paid to the community-based facility during the temporary absence.

**Special diet:** An ongoing payment for a special diet will be allowed if need has been established by a physician and the recipient would be in an imminent life-threatening situation without the diet.

**Restaurant meals:** Ongoing payments to recipients living in their own home who are unable to prepare their own meals.

**Laundry allowances:** Recipients are eligible for an ongoing laundry allowance if they have excessive costs for coin-operated laundry facilities.

**Telephone allowances:** Telephone allowances may be provided when the recipient is unable to leave their residence without assistance due to a documented medical condition.

**Food for guide dogs and special assistive animals:** Payment for food will be made for trained guide dogs or special assistive animals.

**Home repairs:** The repairs must be needed to remove a physical hazard to the health and safety of the recipient.

**Property taxes:** Recipients who are homeowners or homebuyers are allowed a special need of one year of delinquent real property taxes, penalties, and interest if needed to prevent imminent foreclosure.

**Moving costs:** The Department will authorize payment for the cost of moving a recipient's household effects if moving is essential to provide nonhazardous housing, the recipient has been evicted for reasons other than his or her own neglect, or the move is a result of domestic violence.

**Accommodation allowance:** A temporary accommodation allowance may be authorized when the recipient leaves his or her home or rental property and enters a hospital, state psychiatric institution, nursing facility, or community-based care facility. Additionally, a recipient may receive an accommodation allowance if the recipient's shelter cost exceeds the shelter standard and the recipient has a documented increase in costs.

**Prescription co-pay coverage:** An individual who pays \$10 or more per month for prescription co-pays may qualify for this payment.

**Emergency assistance:** An individual who lacks sufficient income for basic needs such as food, housing or shelter may be authorized temporary payments in certain situations if the individual experiences an unexpected cost, loss of income or resources.

**Transportation services:** An individual who incurs a cost for transportation services that are not covered by another source (such as their medical insurance or waived service plans) may qualify for this payment. These payments are for transportation services to non-medical activities. Transportation services do not include purchase of vehicle, vehicle maintenance or repair, reimbursement for travel expenses or mileage, or transportation services that may be obtained through other means. The maximum payment is \$50 per month.

**Spousal facility allowance:** Spouses who each receive SSI and services in a community-based care facility are eligible for a payment that equals the difference between the OSIPM standard for a one-person need group and the individual's total countable income. If one spouse has income above the OSIPM standard, the excess income is applied to the other spouse's countable income.

## ***Medicaid***

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### ***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.

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## Washington

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### ***State Supplementation***

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#### ***Mandatory Minimum Supplementation***

**Administration:** State administration.

#### ***Optional State Supplementation***

**Administration:** State Department of Social and Health Services, Economic Services Administration (ESA), Division of Developmental Disabilities (DDD), and Children's Administration (CA).

**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 aged, blind, and disabled persons with developmental disabilities, including children and recipients with an ineligible spouse.

**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.

**Payment levels:** See Table 1.

**Number of recipients:** See Table 2.

**Total expenditures:** The state reported expenditures of \$28,931,188 for calendar year 2010 in state-administered payments to SSI recipients.

### ***State Assistance for Special Needs***

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#### ***Administration***

State Department of Social and Health Services, Economic Services Administration, Division of Employment and 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***

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#### ***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, January 2011 (in dollars)**

Living arrangement	Combined federal and state		State supplementation	
	Individual	Couple	Individual	Couple
Living independently <sup>a</sup>	720.00	1,103.00	46.00	92.00
Living with an ineligible spouse <sup>b</sup>	720.00	. . .	46.00	. . .
Living in the household of another	495.34	766.00	46.00	92.00
Living in the household of another with an ineligible spouse	495.34	. . .	46.00	. . .
Medicaid facility	57.28	107.36	27.28	47.36

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

NOTE: . . . = not applicable.

a. Includes persons in congregate care group facilities.

b. Applies only to cases converted from former state assistance programs.

DEFINITIONS:

**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.

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

**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.

**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.

**Medicaid facility.** Includes recipients residing in a federal Code D living arrangement.

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

Living arrangement	Total	Aged	Blind	Disabled
All recipients	33,308	15,923	856	16,529
Living independently	28,910	14,695	798	13,417
Living with an ineligible spouse	3,700	657	39	3,004
Living in the household of another	570	487	17	66
Living in the household of another with an ineligible spouse	46	27	0	19
Medicaid facility	45	24	1	20
Other	37	33	1	3

SOURCE: State information.