

2. The state covers the	following classifications:	
	a. All individuals age 65 or older.	
	. All individuals who have blindness.	
	. All individuals who have a disability.	
	💹 d. Individuals in domiciliary facilities or other group living arrangements who are age 65 or older.	
	💹 e. Individuals in domiciliary facilities or other group living arrangements who have blindness.	
	🗑 f. Individuals in domiciliary facilities or other group living arrangements who have a disability.	
	g, Individuals receiving a federally-administered optional state supplement that meets the conditions specified in sections C. and D.	
	h. Individuals in additional classifications specified by the Secretary.	
	I. Reasonable groups of individuals receiving a state-administered optional state supplement that meets the conditions specified in sections C. and D.	
C. Optional St	ate Supplement Program	
		Collapse
1 The optional state su	applement program is administered:	
1. The optional state so	a. Solely by the federal government. The state has an agreement with the Social Security Administration under section 1616 of the Act regarding the administration of optional state supplementary payments.	
	b. By a combination of federal and state administration. The state has an agreement with the Social Security Administration under section 1616 of the Act regarding the administration of state supplementary payments for other classifications of individuals are administered by the state.	optional
	c. Solely by the state.	
2. Payments under the	optional state supplement program are:	
	a. Based on need and paid in cash on a regular basis;	
	b. Equal to the difference between the individual's countable income and the income standard used to determine eligibility for supplement; and	
	c. Available to all individuals in each population selected in section B.	
D. Income Sta	ndard of Optional State Supplement Program	
		Collapse
The income standard	for the optional state supplement:	
	a. Varies by political subdivision.	
	O No	
	b. Varies by payment classification. O Yes	
	○ No	
	The payment classifications used are:	
	i. All individuals age 65 or older, regardless of living arrangement.	
	ii. All individuals who have blindness, regardless of living arrangement.	
	iii. All individuals who have a disability, regardless of living arrangement.	
	iv. Independent living.	
	v. Living in household of another.	
	vi. Independent living and receiving non-medical care outside the home.	
	vii. Living in household of another and receiving non-medical care outside the home.	
	wiii. Living in a domiciliary facility or other group living arrangement.	

Income Standard

Individual Couple \$1594.90 \$1594.90

ix. Other payment classification.

Name of Classification Description:

DOMICILIARY CARE LEVEL I:

Maximum of five (5) residents
A residential facility that provides twenty-four hour living accommodations including care and services for up to five residents. The care and services for

Domiciliary Care Level I are the same Domiciliary Care level II.

Individual \$1594.90 \$1594.90

Name of Classification Description: DOMICILIARY CARE LEVEL II:

Six (6) or more residents

A residential facility that provides twenty-four hour living accommodations, including care and services, for 6 or more residents. The care and services for Domiciliary Care Level II are the same Domiciliary Care level I.

Individual Couple \$1702.90 \$1702.90

E. Additional Information (optional)

PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in endering the Program integrity efforts, improve performance and accountability accoun