

Missouri

Place of application: Offices of the Division of Family Services.

Scope of coverage: Optional state supplement provided to any person who:

- Is aged, blind, or disabled and over age 18;
- Does not reside in a Medicaid facility;
- Does reside in a licensed residential care facility or a licensed intermediate care or skilled nursing home; and
- Has insufficient cash income to cover costs of care in the facility.

Blind persons over age 18 living on their own are also provided with a supplement.

Resource limitations

Aged and disabled: \$999.99 individual; \$2,000 couple.

Blind: \$2,000 individual; \$4,000 couple.

Income exclusions: There are no income exclusions for the aged or disabled. Disregards for the blind include the first \$65 plus one-half of the remainder of earned income.

Recoveries, liens, and assignments: None.

Responsibility of relatives: Spouse for spouse.

Interim assistance: State participates.

Payment levels: See Table 1.

Number of recipients: See Table 2.

State Supplementation

Mandatory Minimum Supplementation

Administration: Department of Social Services; Division of Family Services.

Optional State Supplementation

Administration: Department of Social Services; Division of Family Services.

Effective date: January 1, 1974.

Statutory basis for payment

Supplemental aid to the blind: Missouri Revised Statutes, section 209.

All other supplementation: Missouri Revised Statutes, section 208.030, subchapter 5.

Funding

Administration: State funds.

Assistance: State funds.

Passalong method: Maintaining payment levels.

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

Living arrangement	Combined federal and state		State supplementation	
	Individual	Couple	Individual	Couple
Licensed residential care facility, Level I	701.00	1,129.00	156.00	312.00
Licensed residential care facility, Level II	837.00	1,401.00	292.00	584.00
Licensed intermediate care or skilled nursing home ^a	935.00	1,597.00	390.00	780.00
Aid to the blind	^b 423.00	^b 846.00

NOTE: ... = not applicable.

a. Recipients in licensed nursing homes are entitled to an additional \$25 per month to meet their personal needs. If the recipient is already receiving a personal needs allowance from another state or federal agency, this payment will not be made by the Division of Family Services.

b. Only recipients who receive less than \$545 monthly in SSI payments and less than \$817 monthly from other sources qualify for this supplement. The state supplement is reduced dollar-for-dollar by the SSI payment.

DEFINITIONS:

Licensed residential care facility, Level I. Residents must meet state income and resource guidelines. Care provided is similar to boarding home care.

Licensed residential care facility, Level II. Residents must meet state income and resource guidelines. Custodial-type care is provided.

Licensed intermediate care or skilled nursing home. Residents must meet state income and resource guidelines. Custodial and medical care are provided.

Table 2.
Number of persons receiving optional state supplementation, January 2002

Living arrangement	Total	Aged	Blind	Disabled
All recipients	8,486	2,940	859	4,687
Licensed residential care facility, Level I	2,017	723	0	1,294
Licensed residential care facility, Level II	5,296	1,993	1	3,302
Licensed intermediate care or skilled nursing home	315	224	0	91
Aid to the blind	858	0	858	0

State Assistance for Special Needs

State does not provide assistance for special needs.

Medicaid

Eligibility

Criteria: State guidelines.

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.