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.

Total expenditures: The Social Security Administration reported expenditures of $589,200 for calendar year 2008 in federally 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.

Table 1.

Optional state supplementation payment levels, January 2009 (in dollars)

Living arrangement	State code	Combined federal and state		State supplementation	
		Individual	Couple	Individual	Couple
Living independently	A				
Aged		710.40	1,085.46	36.40	74.46
Blind		783.30	1,385.60	109.30	a 374.60
Living in the household of another	B				
Aged		473.61	723.64	24.27	49.64
Blind		663.30	1,205.94	213.96	b 531.94
Domiciliary care (aged and blind)	C	1,065.00	1,892.00	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 $150.07.

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 2009

Living arrangement	State code	Total	Aged	Blind	
				Adults	Children
All recipients		a 9,723	9,031	469	123
Living independently	A	8,482	7,926	408	115
Living in the household of another	B	773	713	52	7
Domiciliary care	C	402	392	9	1

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

a.   Includes 100 recipients not distributed by eligibility or living arrangement.