

## Guide to Reading the State Summaries

This guide explains the program features detailed in the summaries for the 50 states and the District of Columbia. Three of the major state assistance programs are:

- State supplementation (mandatory and optional) of federal Supplemental Security Income payments,
- State assistance for special needs, and
- Medicaid.

To facilitate comparisons across states, a separate section includes four tables that summarize:

- The number of persons receiving optional supplementation,
- Selected features of state supplementation programs,
- Selected features of medical programs affecting SSI recipients and the needy, and
- State threshold amounts for blind and disabled individuals to maintain Medicaid eligibility under section 1619(b) provisions of the Social Security Act.

With the exception of New Jersey and Rhode Island, all states and the District of Columbia have provided current data for this publication. The state summaries contain information on the program features discussed below.

### ***State Supplementation***

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

The states provide mandatory minimum supplementation only to recipients who were converted to the Supplemental Security Income (SSI) program from the former state assistance programs when the SSI program began. Mandatory minimum state supplementary payments are required by Public Law 93-66 to maintain the December 1973 payment levels that these recipients received under the former state assistance programs. States are required to provide this supplementation to maintain their eligibility for Title XIX (Medicaid) federal matching funds. The governmental unit responsible for administering these payments may be either a state or local agency or the Social Security Administration.

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

Some states provide optional monthly supplements to help persons meet needs not fully covered by federal SSI payments. The state determines whether it will make a payment, to whom, and in what amount. These supplements, paid on a regular monthly basis, are intended to cover such items as food, shelter, clothing, utilities, and other daily and special necessities determined by the individual states. Some states provide optional supplementary payments to all persons eligible for SSI benefits. Others may limit payments to certain SSI recipients such as the blind or residents of domiciliary care facilities, or they may extend payments to persons who are ineligible for SSI because their income is too high.

**Administration.** The governmental unit responsible for administering these payments may be a state or local agency or the Social Security Administration (SSA). Under state administration, the state must absorb both program benefits and administrative costs. Under federal administration, the state must reimburse SSA for the cost of the program benefits and, as of October 1, 2005, must pay \$9.29 in administrative costs for each benefit paid. As of October 1, 2005, the rate was adjusted for inflation as calculated by the change in the consumer price index (CPI) between June 2004 and June 2005, rounded to the nearest whole cent. The Commissioner may select a different rate for a state, taking into account the complexity of administering the state's supplementary payment program.

**Effective date.** The date when the state instituted or revised its optional supplementation program.

**Statutory basis for payment.** The state law(s) authorizing the supplementary payments.

**Funding.** The source of funds for supplementary payments and administrative costs. In states requiring financial participation from local governments, the portions contributed by the state and the locality are indicated.

**Passalong method.** To maintain eligibility for Medicaid reimbursement, any state making supplementary payments after June 30, 1977, must continue making payments and must pass along the cost-of-living increase to the federal benefit rate (FBR). Two methods are available to ensure that cost-of-living increases are passed on to the recipients: the

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payment levels method and the total expenditure method.

Under the payment levels method, the state's supplemental payment for any of the living arrangement categories cannot be below its adjusted March 1983 payment levels. The adjusted level is the state's March 1983 payment level minus the portion of the July 1983 increase in the FBR that was not attributable to the increase in the cost of living (that portion was \$10.30 per individual and \$15.40 per couple); the essential person increment may be reduced by \$5.50.

Under the total expenditure method, state expenditures for supplementary payments in the current calendar year must at least equal expenditures in the preceding calendar year. If expenditures fall short in the current year, the state must increase expenditures in the next calendar year by an amount at least equal to the shortfall.

**Place of application.** The office(s) accepting applications for supplementary payments.

**Scope of coverage.** The categories of persons the state has elected to supplement. States with state-administered programs establish their own eligibility conditions and payment categories. States with federally administered programs must adhere to SSI eligibility criteria in all aspects but are allowed to establish additional income exclusions and payment categories.

**Resource limitations.** The resource limitations and exclusions for federally administered state supplementation are the same as for federal SSI payments: countable resources must be worth \$2,000 or less for an individual, or \$3,000 or less for a couple. Countable resources are properties—real or personal—that count toward the resource limits. Recognizing that not everything an individual owns is available for his or her support and maintenance, the law provides for excluding certain resources in determining eligibility for SSI. Excluded resources include (but are not limited to):

- The house an individual lives in;
- A car, if it is used to provide necessary transportation;
- Household goods (if needed for maintenance, use, and occupancy of the home) and personal effects;
- Life insurance policies with a total face value of \$1,500 or less per person;
- Burial plots or spaces for the individual or his or her immediate family;
- A burial fund of up to \$1,500 each for the burial expenses of the individual and his or her spouse.

- Property essential to self-support, including property used in a trade or business or on the job if the individual works for someone else.

States with state-administered supplementation can establish their own resource limitations and exclusions for optional state supplementary payments.

**Income exclusions.** An exclusion is the amount of a recipient's income that is not counted against the state supplementary payment.

In general, an SSI recipient's income from sources other than SSI is counted against the SSI payment amount. Some income, however, is excluded from being counted. The federal program excludes \$20 per month of earned or unearned income; in addition, \$65 per month of earned income plus one-half of the remaining earnings is excluded. Some types of income are entirely excluded, such as certain home energy and support and maintenance assistance, food stamps, most federally funded housing assistance, state assistance based on need, one-third of child support payments, and income received infrequently or irregularly.

States that choose federal administration must exclude at least the amounts excluded by the federal program and may exclude more. Countable income is deducted first from the federal payment. Any income that remains to be counted after the federal payment is reduced to zero is deducted from the state supplementary payment.

States with state-administered programs can establish their own income exclusions of any amount and type. In most states, the supplementary payment is added to the federal amount, and countable income is deducted first from the federal payment, as in states with federal administration. In a few states, however, the supplement takes the form of a state-guaranteed income amount that exceeds the federal benefit.

**Recoveries, liens, and assignments.** Provisions of state supplementation plans governing recovery of assistance payments and assumption of a recipient's property by the agency. As a condition of providing assistance, a state may require that a lien be placed on a recipient's property. Such a requirement does not affect a person's eligibility or payment status for federal SSI benefits or federally administered state supplementary payments.

**Financial responsibility of relatives.** State supplementation provisions that govern the responsibility of relatives (other than parent for child and spouse for spouse) for providing economic support and returning overpayments.

**Interim assistance reimbursement (IAR).** The Social Security Administration may reimburse a state

that has provided basic needs assistance to an individual during the period in which either the person's application for SSI was pending or his or her SSI benefits were suspended or terminated. The individual's retroactive SSI payment is sent to the state as reimbursement if:

- The state has an agreement with SSA to participate in the IAR program;
- The individual has given SSA written authorization to have his or her retroactive payment sent to the state as reimbursement; and
- The individual is found eligible for SSI payments or has had his or her benefits reinstated for the same period of suspension or termination.

**Payment calculation method.** The state determines the method by which it calculates payments and what, if anything, will affect the payment.

**Payment levels.** The maximum state supplementary payments and the combined maximum federal and state payments that can be awarded to recipients without countable income are presented, by state-designated living arrangements, in Table 1 in each state summary. Unless otherwise stated, payment levels apply equally to aged, blind, and disabled recipients. The federal benefit rates that are included in the combined payment levels became effective January 2006 (unless otherwise stated) and are given in the table below.

In states where the SSI payments are federally administered, each living arrangement is described according to the following federal living arrangements. The state may also have other living arrange-

ments. States that administer the SSI payment have the option to supplement and determine their own definitions of living arrangements.

*Federal Code A.* Includes eligible persons who:

- Live in their own household whether or not they are receiving in-kind support and maintenance;
- Live in a foster or family care situation;
- Have no permanent living arrangement (for example, a transient);
- Live in an institution (except inmates of public institutions) for all or part of a month, provided that Medicaid does not pay more than 50 percent of the cost of their care; or
- Live alone with a child, spouse, or persons whose income may be deemed to the eligible person.

It also includes eligible persons for whom Codes B, C, and D do not apply.

*Federal Code B.* Includes eligible persons who:

- Live in a household other than their own throughout a month with at least one other person who is not their child, their spouse, or an ineligible person whose income is deemed to them; and
- Receive food and shelter from within that household.

The Code A payment standard is reduced by one-third for people in federal Code B living arrangements.

*Federal Code C.* Includes eligible children under age 18 who live in the same household as their parents (that is, deeming applies). The payment standard is the same as in Code A.

**Federal benefit rates, January 2006 (in dollars)**

Living arrangements	Individual	Couple	Essential person <sup>a</sup>
Living independently	603.00	904.00	302.00
Living in the household of another <sup>b</sup>	402.00	602.67	201.33
Living in a Medicaid facility <sup>c</sup>	30.00	60.00	...

NOTE: ... = not applicable.

- This represents the additional amount included in a recipient's check to cover the needs of a household member who provides essential care and services to the recipient and whose needs were previously taken into account in determining the recipient's assistance payment under a state plan approved under titles I, X, XIV, or XVI of the Social Security Act.
- If the recipient lives in another person's household for a full calendar month and receives both food and shelter from that person, the federal benefit rate (amounts for living independently) is reduced by one-third.
- Includes eligible persons who live in a public or private medical institution throughout a month and Medicaid is paying more than 50 percent of the cost of their care. It also includes eligible children under age 18 who live in a public or private medical institution throughout a month and Medicaid, or a combination of Medicaid and private insurance, is paying more than 50 percent of the cost of care.

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*Federal Code D.* Includes eligible persons who live in a public or private medical institution throughout a month and Medicaid is paying more than 50 percent of the cost of their care. It also includes eligible children under age 18 who live in a public or private medical institution throughout a month and Medicaid, or a combination of Medicaid and private insurance, is paying more than 50 percent of the cost of care.

**Number of recipients.** The number of recipients receiving optional payments from the state is displayed in Table 2 in each state summary. This number may include persons who are ineligible for federal SSI payments but meet state eligibility criteria.

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

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This assistance is for emergency or special conditions not covered by monthly SSI or optional state supplementary payments. Disaster benefits, burial expenses, additional subsidies for institutional care, and moving expenses are included in this category.

**Administration.** The governmental unit responsible for administering these payments is indicated.

**Special needs circumstances.** The special needs circumstances (recurring and nonrecurring) for which assistance can be approved are defined. Where available, eligibility requirements and payment limitations are described.

### ***Medicaid***

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All states have federally assisted medical assistance (Medicaid) programs.

### ***Eligibility***

States may grant Medicaid eligibility to all SSI recipients or apply state guidelines in determining eligibility.

Either the SSI program guidelines or the state guidelines may be used to determine eligibility. State guidelines may not be more restrictive than the state's January 1972 medical assistance standards. The governmental unit responsible for determining eligibility is indicated.

### ***Medically Needy Program***

The presence or absence of a medically needy program for SSI-related populations is indicated. Statute permits states to choose either no medically needy program, a restricted program, Temporary Assistance for Needy Families (TANF), or a program for the TANF-related and one or more of the SSI-related categories (that is, aged, blind, or disabled). States determine eligibility for this program.

### ***Unpaid Medical Expenses***

Under Medicaid statute, a state must pay unpaid medical expenses incurred for services covered under its Medicaid state plan for up to 3 months before an individual is found eligible for SSI, if the individual would have been eligible had he or she applied then. The entry indicates whether SSA has a contractual agreement with the state to inquire about the unpaid medical expenses of SSI claimants.

## Summary Tables

**Summary Table 1.**

**Number of persons receiving optional state supplementation, by state and eligibility category, January 2006**

State	Total	Aged	Blind	Disabled	
				Adults	Children
Alabama <sup>a</sup>	368	133	5	230	b
Alaska <sup>a</sup>	15,380	5,003	76	10,301	c
Arizona <sup>d</sup>	472	--	--	--	c
Arkansas <sup>e</sup>	...	...	...	...	...
California	1,183,824	348,857	18,639	680,337	135,991
Colorado <sup>d</sup>	25,175	23,603	--	--	--
Connecticut	15,965	4,782	93	11,090	f
Delaware	726	48	12	608	58
District of Columbia	1,589	153	11	1,318	107
Florida <sup>a</sup>	14,067	5,943	5	8,119	b
Georgia <sup>e</sup>	...	...	...	...	...
Hawaii	2,393	681	26	1,622	64
Idaho	12,723	2,204	35	9,389	1,095
Illinois	28,946	6,386	99	22,461	b
Indiana <sup>a</sup>	3,513	1,006	19	2,488	c
Iowa	5,741	912	531	4,092	206
Kansas <sup>e</sup>	...	...	...	...	...
Kentucky <sup>a</sup>	4,389	1,554	22	2,813	b
Louisiana	4,458	1,295	48	3,115	b
Maine <sup>d</sup>	34,200	--	--	--	--
Maryland <sup>d</sup>	2,989	--	--	--	c
Massachusetts	167,998	44,239	3,075	96,088	24,596
Michigan	220,775	--	--	--	--
Minnesota	28,466	6,241	136	22,089	b
Mississippi <sup>e</sup>	...	...	...	...	...
Missouri	7,662	4,337	1	3,324	c
Montana	925	20	11	637	257
Nebraska	2,941	680	21	2,240	b
Nevada <sup>g</sup>	8,959	8,213	636	...	...
New Hampshire	7,476	1,331	246	5,899	b
New Jersey	148,581	32,752	850	86,061	28,918
New Mexico	505	56	4	445	c
New York	637,704	134,602	3,056	400,187	99,859
North Carolina	23,823	12,048	99	11,676	c
North Dakota <sup>e</sup>	...	...	...	...	...
Ohio <sup>d</sup>	1,837	--	--	--	c
Oklahoma	78,040	18,568	454	47,489	11,529
Oregon	23,539	3,184	477	19,878	f
Pennsylvania	332,132	47,657	579	213,212	70,684
Rhode Island	29,727	3,864	175	20,182	5,506
South Carolina	2,729	1,158	9	1,562	b
South Dakota <sup>d</sup>	3,639	--	--	--	b
Tennessee <sup>e</sup>	...	...	...	...	...
Texas	13,102	3,371	179	9,552	b
Utah	1,732	399	15	1,099	219

(Continued)

**Summary Table 1.**  
**Continued**

State	Total	Aged	Blind	Disabled	
				Adults	Children
Vermont	12,815	1,113	73	9,341	2,288
Virginia <sup>d</sup>	6,275	--	--	--	c
Washington <sup>h</sup>	30,039	24,931	770	4,269	b
West Virginia <sup>e</sup>	...	...	...	...	...
Wisconsin	97,474	9,529	995	63,901	23,049
Wyoming <sup>d</sup>	2,763	--	--	--	b

SOURCES: Social Security Administration, Supplemental Security Record, 100 percent data; information in the state summaries.

NOTE: -- = not available; . . . = not applicable.

- a. Includes certain grandfathered non-SSI recipients who meet state eligibility criteria.
- b. A separate count for children is not available.
- c. Children under 18 years old are not eligible for optional payment.
- d. Data not available by eligibility category.
- e. The state does not have an optional supplementation program.
- f. Only blind children are eligible; a separate count is not available.
- g. Includes 110 persons not distributed by eligibility category. Disabled persons are not eligible.
- h. Includes 69 persons converted from the former state program.

**Summary Table 2.**

**Selected features of state supplementation, by state, January 2006**

State	Administration of—		Method of passalong	Participation in interim assistance reimbursement program
	Mandatory minimum supplementation	Optional state supplementation		
Alabama	No recipients	State	Payment levels	No
Alaska	No recipients	State	Total expenditures	Yes
Arizona	State	State	Payment levels	Yes
Arkansas	Federal	No program	No program	No
California	Federal	Federal	Payment levels	Yes
Colorado	State	State	Total expenditures	Yes
Connecticut	No recipients	State	Payment levels	Yes
Delaware	Federal	Federal/state	Payment levels	Yes
District of Columbia	Federal	Federal/state	Total expenditures	Yes
Florida	No recipients	State	Payment levels	Yes
Georgia	Federal	No program	No program	Yes
Hawaii	No recipients	Federal	Total expenditures	Yes
Idaho	State	State	Payment levels	No
Illinois	State	State	Payment levels	Yes
Indiana	No recipients	State	Payment levels	Yes
Iowa	Federal	Federal/state	Payment levels	Yes
Kansas	Federal	No program	No program	Yes
Kentucky	No recipients	State	Payment levels	Yes
Louisiana	Federal	State	Payment levels	No
Maine	State	State	Payment levels	Yes
Maryland	Federal	State	Payment levels	Yes
Massachusetts	Federal	Federal	Payment levels	Yes
Michigan	Federal	Federal/state	Payment levels	Yes
Minnesota	No recipients	State	Payment levels	Yes
Mississippi	Federal	No program	No program	No
Missouri	State	State	Payment levels	Yes
Montana	Federal	Federal	Payment levels	Yes
Nebraska	State	State	Total expenditures	Yes
Nevada	No recipients	Federal	Payment levels	Yes
New Hampshire	State	State	Payment levels	Yes
New Jersey	Federal	Federal	Payment levels	Yes
New Mexico	State	State	Payment levels	Yes
New York	Federal	Federal/state	Payment levels	Yes
North Carolina	State	State	Payment levels	Yes
North Dakota	No recipients	No program	No program	No
Ohio	Federal	State	Payment levels	Yes
Oklahoma	State	State	Total expenditures	No
Oregon	State	State	Total expenditures	Yes
Pennsylvania	Federal	Federal/state	Payment levels	Yes
Rhode Island	No recipients	Federal	Payment levels	Yes
South Carolina	No recipients	State	Payment levels	No
South Dakota	Federal	State	Payment levels	No
Tennessee	Federal	No program	No program	Yes
Texas	No recipients	State	Payment levels	No
Utah	No recipients	Federal	Payment levels	Yes
Vermont	No recipients	Federal	Payment levels	Yes
Virginia	No recipients	State	Payment levels	Yes
Washington	State	State	Total expenditures	Yes
West Virginia	No program	No program	No program	No
Wisconsin	No recipients	State	Total expenditures	Yes
Wyoming	State	State	Payment levels	No

SOURCE: Based on information in the state summaries.

**Summary Table 3.****Selected features of medical programs affecting SSI recipients and the needy, by state, January 2006**

State	Medicaid eligibility		Medically needy program	SSA obtains information on unpaid medical expenses
	Criteria	Determined by—		
Alabama	Federal	Federal	No	No
Alaska	Federal	State	No	No
Arizona	Federal	Federal	Yes	No
Arkansas	Federal	Federal	Yes	Yes
California	Federal	Federal	Yes	No
Colorado	Federal	Federal	No	Yes
Connecticut	State	State	Yes	No
Delaware	Federal	Federal	No	Yes
District of Columbia	Federal	Federal	Yes	Yes
Florida	Federal	Federal	Yes	No
Georgia	Federal	Federal	Yes	No
Hawaii	State	State	Yes	No
Idaho	Federal	State	No	No
Illinois	State	State	Yes	No
Indiana	State	State	No	No
Iowa	Federal	Federal	Yes	Yes
Kansas	Federal	State	Yes	No
Kentucky	Federal	Federal	Yes	Yes
Louisiana	Federal	Federal	Yes	Yes
Maine	Federal	Federal	Yes	Yes
Maryland	Federal	Federal	Yes	Yes
Massachusetts	Federal	Federal	Yes	Yes
Michigan	Federal	Federal	Yes	No
Minnesota	State	County	Yes	No
Mississippi	Federal	Federal	No	No
Missouri	State	State	No	No
Montana	Federal	Federal	Yes	No
Nebraska	Federal	State	Yes	No
Nevada	Federal	State	No	No
New Hampshire	State	State	Yes	No
New Jersey	Federal	Federal	Yes	Yes
New Mexico	Federal	Federal	No	No
New York	Federal	Federal	Yes	No
North Carolina	Federal	Federal	Yes	No
North Dakota	State	State	Yes	No
Ohio	State	State	No	No
Oklahoma	State	State	Yes	No
Oregon	Federal	State	No	No
Pennsylvania	Federal	Federal	Yes	Yes
Rhode Island	Federal	Federal	Yes	Yes
South Carolina	Federal	Federal	No	No
South Dakota	Federal	Federal	No	Yes
Tennessee	Federal	Federal	Yes	Yes
Texas	Federal	Federal	Yes	Yes
Utah	Federal	State	Yes	No
Vermont	Federal	Federal	Yes	No
Virginia	State	State	Yes	No
Washington	Federal	Federal	Yes	Yes
West Virginia	Federal	Federal	Yes	Yes
Wisconsin	Federal	Federal	Yes	No
Wyoming	Federal	Federal	No	Yes

SOURCE: Based on information in the state summaries.



**Summary Table 4.****State threshold amounts for disabled and blind individuals to maintain Medicaid eligibility under section 1619(b) of the Social Security Act, calendar year 2006**

State	Twice state supplementation <sup>a</sup> (dollars)	Base amount <sup>b</sup> (dollars)	State per capita Medicaid expenditure (dollars)	Threshold <sup>c</sup>	
				Amount (dollars)	Rank
<i>Disabled individuals</i>					
Alabama	0	15,492	6,558	22,050	51
Alaska	8,688	25,180	24,337	49,517	1
Arizona	0	15,492	10,313	25,805	37
Arkansas	0	15,492	8,834	24,326	44
California	5,016	20,508	11,991	32,499	12
Colorado	600	16,092	14,305	30,397	19
Connecticut	4,032	19,524	27,696	47,220	2
Delaware	0	15,492	16,007	31,499	15
District of Columbia	0	15,492	18,741	34,233	7
Florida	0	15,492	10,623	26,115	39
Georgia	0	15,492	8,704	24,196	45
Hawaii	0	15,492	10,994	26,486	31
Idaho	768	16,260	17,507	33,767	8
Illinois	0	15,492	14,243	29,735	23
Indiana	0	15,492	15,241	30,733	16
Iowa	0	15,492	10,284	25,776	38
Kansas	0	15,492	13,375	28,867	25
Kentucky	0	15,492	8,164	23,656	47
Louisiana	0	15,492	9,590	25,082	41
Maine	240	15,732	22,111	37,843	6
Maryland	0	15,492	17,772	33,264	9
Massachusetts	2,745	18,237	14,562	32,799	11
Michigan	336	15,828	9,413	25,241	40
Minnesota	1,944	17,436	25,423	42,859	3
Mississippi	0	15,492	7,321	22,813	49
Missouri	0	15,492	12,349	27,841	28
Montana	0	15,492	10,485	25,977	36
Nebraska	0	15,492	14,295	29,787	22
Nevada	0	15,492	12,509	28,001	26
New Hampshire	648	16,140	22,613	38,753	5
New Jersey	750	16,242	13,663	29,905	21
New Mexico	0	15,492	14,923	30,415	18
New York	2,088	17,580	22,882	40,462	4
North Carolina	0	15,492	12,416	27,908	27
North Dakota	0	15,492	16,473	31,965	13
Ohio	0	15,492	14,946	30,438	17
Oklahoma	1,152	16,644	5,755	22,399	50
Oregon	41	15,533	12,029	27,562	30
Pennsylvania	658	16,150	10,301	26,451	32
Rhode Island	1,376	16,868	16,353	33,221	10
South Carolina	0	15,492	10,119	25,611	39
South Dakota	360	15,852	13,355	29,207	24
Tennessee	0	15,492	7,133	22,625	48
Texas	0	15,492	11,598	27,090	29
Utah	0	15,492	10,586	26,078	35

(Continued)

**Summary Table 4.**  
**Continued**

State	Twice state supplementation <sup>a</sup>	Base amount <sup>b</sup>	State per capita Medicaid expenditure	Threshold <sup>c</sup>	
				Amount	Rank
<b><i>Disabled individuals (cont.)</i></b>					
Vermont	1,249	16,741	14,913	31,654	14
Virginia	0	15,492	10,864	26,356	33
Washington	1,104	16,596	7,363	23,959	46
West Virginia	0	15,492	8,907	24,399	43
Wisconsin	2,011	17,503	12,456	29,959	20
Wyoming	250	15,742	8,900	24,642	42
<b><i>Blind individuals</i></b>					
California	6,576	22,068	11,967	34,035	1
Iowa	528	16,020	10,284	26,304	5
Massachusetts	3,594	19,086	14,562	33,648	2
Nevada	2,623	18,115	12,509	30,624	3
Oregon	641	16,133	12,029	28,162	4

SOURCE: Social Security Administration, Program Operations Manual System (POMS), SI 02302.200, Charted Threshold Amounts.

- a. Twice the annual state supplementation rate, if any, for an individual living independently.
- b. The base amount is the annual amount of earned income it takes to reduce the annual SSI federal plus state benefit to zero. It is calculated as the sum of twice the state individual supplementation rate plus \$15,492; \$15,492 is the amount of earned income it takes in calendar year 2006 to reduce the annual federal benefit to zero, based on the monthly calculation (\$85 plus twice the monthly federal benefit rate of \$603) multiplied by 12.
- c. The threshold is the sum of the base amount and the state per capita Medicaid expenditure.