

ARTICLE 7. STATE SUPPLEMENTAL ASSISTANCE FOR PERSONAL NEEDS

Rule 1. Eligibility Requirements

405 IAC 7-1-1 Eligibility; benefit calculation

Authority: IC 12-8-6-5; IC 12-15-1-10

Affected: IC 12-15-7-2; IC 12-15-7-6; IC 12-15-32-6.5

Sec. 1. (a) An individual is eligible for supplemental assistance for personal needs if the following criteria are met:

(1) The individual is receiving Medicaid and is residing in a Medicaid certified health care facility.

(2) The individual is receiving the reduced benefit amount paid by the Supplemental Security Income (SSI) program under 20 CFR 416.414 to SSI recipients who are in medical care facilities throughout a calendar month.

(3) The individual qualifies for a benefit based on his or her income as required in subsection (b).

(b) The monthly benefit amount for supplemental assistance for personal needs is calculated by subtracting the following from the personal needs allowance specified in IC 12-15-7-2 or IC 12-15-32-6.5:

(1) The amount of the reduced SSI benefit paid to an SSI recipient who is in a medical care facility throughout a calendar month.

(2) The amount of the recipient's other countable income as used in the posteligibility calculation under 405 IAC 2-3-17 or 405 IAC 2-3-21.

(c) The amount remaining in subsection (b)(2) is the amount of the supplemental assistance for personal needs benefit payment, except that a remaining amount of fifty cents (\$.50), but not more than one dollar (\$1) will result in a benefit of one dollar (\$1), and a remaining amount of less than fifty cents (\$.50) will result in a determination of ineligibility for supplemental assistance for personal needs. Other remaining amounts that include fifty cents (\$.50) or more will be rounded up to the next dollar, and those that include amounts of less than fifty cents (\$.50) will be rounded down to the next dollar amount.

(d) The effective date of supplemental assistance for personal needs is the later of the following:

(1) The month in which the individual's SSI is reduced to the amount allowed for SSI beneficiaries in health care facilities.

(2) The month after the individual's Medicaid eligibility has been authorized with a posteligibility budget under 405 IAC 2-3-17 or 405 IAC 2-3-21.

(e) A recipient of supplemental assistance for personal needs becomes ineligible beginning the month following the month in which the criteria in subsection (a) are no longer met. A recipient of supplemental assistance for personal needs who dies is entitled to the benefit for the month of death. (*Office of the Secretary of Family and Social Services; 405 IAC 7-1-1; filed Apr 16, 2003, 10:55 a.m.: 26 IR 2869*)

Rule 2. Benefit Issuance

405 IAC 7-2-1 Benefit issuance; representative payee

Authority: IC 12-8-6-5; IC 12-15-1-10

Affected: IC 12-15-7-2; IC 12-15-7-6; IC 12-15-32-6.5

Sec. 1. (a) A benefit check shall be issued not later than five (5) calendar days after the first day of each benefit month in the name of the eligible individual or to a representative payee authorized in accordance with subsection (d).

(b) Lost or stolen checks shall be reissued not later than fifteen (15) days after the recipient or representative payee submits to the local office of family and children the proper affidavit prescribed by Indiana and signed by the payee confirming that the check was not received.

(c) Benefit checks that are returned in the mail will be reissued in accordance with the procedures of the state auditor's office, not later than fifteen (15) days after written documentation from the payee of the correct and current address of the payee.

(d) An individual who signs the representative payee agreement for state supplemental assistance for personal needs will be permitted to receive the benefit check on behalf of the recipient if the recipient does not object. A representative payee must use the benefit check solely for the personal needs of the recipient. If, at any time, proof is submitted to the satisfaction of the local office of family and children that a representative payee is not fulfilling his or her obligations under the agreement to provide for the personal needs of the recipient, the local office of family and children may require that another individual be selected as the representative payee. (*Office of the Secretary of Family and Social Services; 405 IAC 7-2-1; filed Apr 16, 2003, 10:55 a.m.: 26 IR*

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