



Missouri Department of Health and Senior Services
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Director



Michael L. Parson
Governor

April 8, 2021

To: All Residential Care Facility and Assisted Living Facility Providers

From: Shelly Williamson, Administrator
Section for Long-Term Care Regulation (SLCR)

Re: Social Security Personal Needs Allowance and Personal Needs Allowance for MO HealthNet Participants in RCFs and ALFs

Periodically, SLCR will receive questions regarding the different types of personal needs allowance for residents. This memo is to address one of the common questions we receive from providers.

The Social Security Administration requires representative payees set aside a minimum of \$30 each month to be used for the beneficiary's personal needs or saved on his/her behalf. If the beneficiary's Federal Supplemental Security Income (SSI) benefit is \$30 (since Medicaid pays more than 50% of the cost of care in the institution), the \$30 must be used for the beneficiary's personal needs.

MO HealthNet Division's Supplemental Nursing Care (SNC) program is available to eligible residents of licensed residential care facilities (RCF) and assisted living facilities (ALF). The SNC program provides an actual cash payment to the resident of up to \$156 per month for RCF residents and \$292 per month for ALF residents. SNC recipients also get a \$50 personal needs allowance monthly. The SNC payment is to supplement the resident who otherwise may not be able to financially cover the cost of living in the RCF/ALF.

SLCR has contacted the Social Security Administration and Family Support Division (FSD) to determine if the resident is required to receive both of the personal needs allowances. According to the Social Security Administration, "When Social Security does payee audits our concern is that the resident is receiving \$30 per month from their Social Security or Supplemental Security Income benefits. Any requirement to pay additional funds would be based on state requirements."

According to FSD, nursing home residents covered under the SNC program are expected to use **all** of his/her available income to pay the nursing home, minus a personal needs allowance of \$50 and any health insurance premiums the resident owes.

In order to meet the intent of both of these requirements, allowing residents to receive the appropriate amount of personal allowance due to them, representative payees must be able to provide documentation to show that the resident received a minimum of \$30 each month in personal spending money. FSD, likewise, would want to ensure that each facility has ensured that each resident has received the appropriate amount of personal spending allowance each month. For example, currently, if a facility can show that a resident has received a minimum of \$50 each month from their "resident account", it would satisfy both the SS requirement for the resident to receive \$30 and the DFS requirement that the individual recipients receive their \$50 personal needs allowance.

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