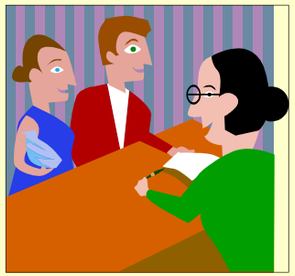
APPLYING FOR THE PERSONAL CARE SUPPLEMENT

Requirements and Preparation



ARMSTRONG COUNTY AREA AGENCY ON AGING
125 QUEEN STREET
KITTANNING, PA 16201

(724)548-3290 OR
1-800-368-1066

BOARD OF COMMISSIONERS
Patricia L. Kirkpatrick
Richard L. Fink
James V. Scahill

3) All applicants must submit a copy of the facility's current certificate of compliance.
4) All applicants must present to the Area Agency on Aging a Medical Evaluation Form (MA 51) completed, signed, and dated by a physician. The signed completed MA 51 should be submitted to the "options" unit at the Agency on Aging as soon as possible. The Agency on Aging cannot assess and verify level of care until it receives a properly completed MA 51.

****

Your application packet consisting of the following completed forms: supplement application, 1610 if appropriate, certificate of compliance, and Medical Evaluation form, should be compiled and submitted to the Agency on Aging as soon as possible.

If you lack only a completed, signed Medical Evaluation form, submit your application packet so that your application can be date stamped, while you proceed with efforts to have your Med. Eval. form completed. This will avoid another circumstance where loss of benefits can occur; however, the application cannot be further processed until the Med. Eval. form is received. Delays in submission of the medical evaluation form cause delays in receipt of benefits.

The Agency on Aging will submit completed application packets to the DPW as soon as the applicant has been assessed AND all necessary properly completed forms are received.

*Applicants who are over SSI (community) limitations will ultimately receive an "SSI Denial Notice" which should not be confused with a determination of eligibility regarding the personal care supplement.

The Armstrong Co. Agency on Aging is funded in part by the Penna. Department of Aging and the County Board of Commissioners.

Supplement Application Checklist

WHEN	WHAT TO DO	DONE
Prior to, or not later than date of adm. to facility.	1.Call SSA to: a. register SSI request— —unless you are a current SSI recipient.	_____
	b.inform of intent to apply for supplement	_____
	c. make an appointment to apply for supplement	_____
	2. Sign Supplement application (PDA761 or PA1D)	_____
	3. arrange for completion of an MA 51 if a valid one does not exist.	_____
Prior to, but not later than, date of admission.	Submit the following to the Agency on Aging:	Date of Subm.
	1. completed/signed sup. app.	_____
	2. sign/submit 1610 unless you are a current SSI recipient.	_____
	3. copy of facility's certificate of compliance	_____

*Remember to follow through with completion of SSA's supplement application procedures at SSA, following your initial contact with them.

		Date of Subm.
Prior to date of adm. on date of adm., or as soon thereafter as possible.	1. Submit completed, signed MA 51 to AAA.	_____

APPLYING FOR THE PERSONAL CARE SUPPLEMENT - -

Explanation and Eligibility:

If you are an individual age 18 or over who is seeking placement in, or already residing in, a personal care boarding home, you may be eligible for supplemental monies to assist with your monthly boarding home costs. Generally speaking, if your gross monthly income is less than about $966.30, your cash assets less than $2,000, and you require the level of care given by a personal care boarding home, you may qualify.

If you are found eligible for a personal care boarding home (or dom care) supplement, the supplement will raise your total monthly income to about $978.30 for residence in a personal care boarding home (or about $973.30 for residence in a dom care home.) Persons who qualify for a supplement also qualify for a Medical Assistance card from the Department of Public Welfare.

As mentioned, in order to receive the personal care boarding home (or dom care) supplement, clients must qualify in two ways:

A. They must qualify financially, and

B. They must have a need for the level of care and supervision provided by a personal care home.

Regulations restrict the transfer of assets done to create eligibility. Ask the SSA or the AAA for more information.

For Armstrong County applicants, the Armstrong County Area Agency on Aging is responsible for verifying the level of care needed via home visitation and assessment, and it is available to advise the applicant of the steps involved in the supplement application process. The Agency on Aging submits its level of care verification and the application packet to the Department of Public Welfare. The DPW will determine eligibility for Medical Assistance coverage, and the Social Security Administration ultimately determines financial eligibility for the personal care supplement and its effective date.

This brochure has been prepared to advise you of some actions that MUST be taken to initiate all applications. THERE ARE SEVERAL IMPORTANT STEPS WHICH MUST BE COMPLETED TIMELY IN ORDER TO ASSURE THAT FINANCIAL BENEFITS CAN BE EFFECTIVE AT THE EARLIEST POSSIBLE DATE.

APPLICATION PROCESS:

The following are some definitions which will enhance your understanding of the application process and this brochure:

Applicant: the resident (or prospective resident) of a personal care boarding home (or Dom Care home) who wishes to apply for the financial supplement.

SSI: The letters SSI represent "Supplemental Security Income" which is a financial supplement available to persons (living in the community) age 65 or over (younger if disabled) who have minimal assets and monthly incomes less than about $601.40. SSI supplements monthly income to achieve a total monthly income of about $611.40.

Personal care supplement - the personal care boarding home (or Dom Care) supplements: (sometimes referred to as the SSI Supplement) funding available only to qualifying residents of certified or licensed facilities whose monthly incomes are lower than about $978.30 a month. The Personal Care supplement increases the resident's monthly income to enable him to compensate the provider for his care.

Living "in the community": living in a private residence and NOT in a facility such as a boarding home.

There are several important steps which must be properly and promptly completed in order to assure that financial benefits can be effective at the earliest possible date:

1A) ALL SUPPLEMENT APPLICANTS - EXCEPT THOSE WHO ARE CURRENT RECIPIENTS OF SSI - MUST PHONE THE SOCIAL SECURITY ADM. (SSA) AT (800)772-1213 OR (724)548-5666 TO REGISTER THEIR REQUEST FOR SSI, AND STATE THEIR INTENT TO APPLY FOR THE PERSONAL CARE SUPPLEMENT. (Also, an appointment date should be made for as soon as possible for completion of the SSA's SSI/ supplement application.) *This telephone contact should be made NO LATER than the day of admission to the facility or benefits may be lost. (When SSA contact is made prior to admission, admission must occur within 30 days of the SSA's eligibility determination.)

1B) Unless they have been receiving SSI in the community, all personal care supplement applicants should date and sign the typed statement on the reverse of a "Public Assistance Agency Information Request" (SSA 1610). This form should be submitted to the Agency on Aging as part of the application. If there has been failure to contact Social Security earlier, the postmark of the submission of this form to the SSA should be the date of financial eligibility for SSI/the supplement (provided a timely application was received.).

2) The supplement application form-either an "application for PCBH supplement" (PA 761) or an "application for Dom Care supplement" (PA-1D) as appropriate for the type of facility - must be submitted by the applicant to the Agency on Aging. This form should be completed and signed by the applicant (and by the facility operator if possible) before, or upon, the date of admission to the facility AND BEFORE its submission to the Agency on Aging. Upon receipt of a properly completed/signed application, the AAA will date stamp it. *In some cases, this date will be the date financial eligibility begins; therefore, it is important to sign and submit this form as soon as possible. Delays can mean loss of benefits.

10/04