

APA: Adult Public Assistance

What is Adult Public Assistance (APA)?

APA is the state administered financial support given to needy aged, blind and disabled persons. Blind and disabled children under 18 are not eligible for this benefit. People who receive APA are automatically eligible for Medicaid. The entire Adult Public Assistance Manual is included in the Appendix of this manual for your reference.

What is the eligibility criteria for APA, Aid to the Disabled?

An applicant must:

- 1) be aged, blind or disabled
- 2) not be engaging in SGA
- 3) meet the resource/asset test
- 4) meet the needs standard test

Who is Eligible for APA?

People can be eligible for APA in three ways:

- 1) SSI recipient
- 2) SSDI recipient who meets the need standard and passes the resource/asset test
- 3) One who has a “state only” disability determination, meets the resource/asset test and the need standard test

Concurrent beneficiaries receive APA

To receive APA, one has to apply with the Division of Public Assistance. When a person applies for APA, s/he is automatically considered for Medicaid.

Interim Assistance:

While the Social Security disability determination is being made, applicants may be eligible for Interim Assistance. The payment is \$280 a month. Medicaid does not come with it. The individual does not have to pay it back if found not to be disabled. However, if found to be disabled, once a lump sum disability award is made from SSDI or SSI, APA will recoup funds disbursed in interim assistance.

If one who applies for APA does not elect to receive interim assistance and is determined to be disabled, s/he would be eligible for back payments of the full APA amount (possibly more than \$280) to the date of application.

How much APA do people get?

The amount of APA people receive depends on marital status, the living situation and total countable income. For example, the maximum amount of Adult Public Assistance any single person living independently can get is \$362.

First, one must meet the “**need standard**” (see appendix). The need standard is how APA determines if you are in “need” of APA. If one’s total countable income is below the “need standard”, s/he would be eligible for an APA payment.

The “**payment standard**” is the highest amount of total countable income one can have and still receive benefits. APA’s payment standard includes any SSI payment. APA begins with the payment standard and then deducts one’s total countable income to arrive at the APA payment.

To determine total countable income, APA uses the same formula and income exclusions as SSI: **general income exclusion** (\$20) and the **earned income exclusion** (\$65 plus one-half of any remaining earned income) to determine countable unearned and countable unearned income, to then arrive at Total Countable Income.

Formula for calculating APA:

$$\begin{array}{l} \text{Payment standard} \\ - \text{ Total Countable Income plus SSI payment amount } \\ = \text{ APA payment} \end{array}$$

If someone’s TCI falls below the need standard, but above the payment standard, s/he will be eligible for \$1 of APA, and will receive Medicaid benefits. This is a result of a Legislative change in 1993 that mandated the maximum APA supplement would never exceed \$362 for a single person living independently. Because the SSDI/SSI Cost of Living Allowance (COLA) goes up every year, APA continues to raise the need standard, even though they can not increase the payment standard.

