2024 SSI Payment Levels in Massachusetts

Living Arrangement A - FULL COST OF LIVING				
	BENEFIT TYPE	FEDERAL BENEFIT	STATE SUPPLEMENT *	<u>TOTAL</u>
	Aged	\$943.00	\$128.82	\$1071.82
INDIVIDUAL	Disabled	\$943.00	\$114.39	\$1057.39
	Blind	\$943.00	\$149.74	\$1092.74
MEMBER OF A COUPLE	Aged	\$707.50	\$100.86	\$808.36
	Disabled	\$707.50	\$ 90.03	\$797.53
	Blind	\$707.50	\$385.24	\$1092.74

Living Arrangement B - SHARED LIVING				
	BENEFIT TYPE	FEDERAL BENEFIT	STATE SUPPLEMENT *	<u>TOTAL</u>
INDIVIDUAL	Aged	\$943.00	\$ 39.26	\$982.26
	Disabled	\$943.00	\$ 30.40	\$973.40
	Blind	\$943.00	\$149.74	\$1092.74
MEMBER OF A COUPLE	Aged	\$707.50	\$100.86	\$808.36
	Disabled	\$707.50	\$90.03	\$797.53
	Blind	\$707.50	\$385.24	\$1092.74

Living Arrangement C - HOUSEHOLD OF ANOTHER				
	BENEFIT TYPE	FEDERAL BENEFIT	STATE SUPPLEMENT *	<u>TOTAL</u>
	Aged	\$628.67	\$104.36	\$733.03
INDIVIDUAL	Disabled	\$628.67	\$87.58	\$716.25
	Blind	\$628.67	\$464.07	\$1092.74
MEMBER OF A COUPLE	Aged	\$471.67	\$107.90	\$579.57
	Disabled	\$471.67	\$ 97.09	\$568.76
	Blind	\$471.67	\$621.07	\$1092.74

Living Arrangement E - LICENSED REST HOME				
	BENEFIT TYPE	FEDERAL BENEFIT	STATE SUPPLEMENT *	<u>TOTAL</u>
	Aged	\$943.00	\$293.00	\$1236.00
INDIVIDUAL	Disabled	\$943.00	\$293.00	\$1236.00
	Blind	\$943.00	\$149.74	\$1092.74
MEMBER OF A COUPLE	Aged	\$707.50	\$528.50	\$1236.00
	Disabled	\$707.50	\$528.50	\$1236.00
	Blind	\$707.50	\$385.24	\$1092.74

Living Arrangement F - RESIDENT OF A TITLE XIX FACILITY WHERE MEDICAID PAYS MORE THAN 50 % OF COST OF CARE				
	BENEFIT TYPE	FEDERAL BENEFIT	STATE SUPPLEMENT *	<u>TOTAL</u>
	Aged	\$30.00	\$42.80	\$72.80
INDIVIDUAL	Disabled	\$30.00	\$42.80	\$72.80
	Blind	\$30.00	\$42.80	\$72.80
	Aged	\$30.00	\$42.80	\$72.80
MEMBER OF A COUPLE	Disabled	\$30.00	\$42.80	\$72.80
	Blind	\$30.00	\$42.80	\$72.80

Living Arrangement G - ASSISTED LIVING				
	BENEFIT TYPE	FEDERAL BENEFIT	STATE SUPPLEMENT *	<u>TOTAL</u>
	Aged	\$943.00	\$454.00	\$1397.00
INDIVIDUAL	Disabled	\$943.00	\$454.00	\$1397.00
	Blind	\$943.00	\$454.00	\$1397.00
	Aged	\$707.50	\$340.50	\$1048.00
MEMBER OF A COUPLE	Disabled	\$707.50	\$340.50	\$1048.00
	Blind	\$707.50	\$340.50	\$1048.00

^{*} Effective 4/1/12, Massachusetts assumed state administration of the SSI state supplement. This means that the state determines the state supplement amount and provides the payment separately. For more information see http://www.mass.gov/eohhs/consumer/basic-needs/financial/ssp.html

2024 SSI and SSDI Threshold Amounts

SSI Resource Limit	\$2000.00 (individual) \$3000 (couple)
SSI Federal Benefit Rate	\$943.00 (individual) \$1415.00 (elig. couple)
Non-SSI Child Allocation (deeming)	\$472.00
SSI Student Earned Income Exclusion	\$2,290.00/month up to \$9230.00/year
Value of 1/3 Reduction (reduction in FBR applied when individual/couple lives throughout a month in another person's household and receives both food and shelter from others living in the household)	\$314.00 (individual) \$472.00 (elg. couple)
Substantial Gainful Activity - Disabled	\$1550.00/month
Substantial Gainful Activity - Blind	\$2590.00/month
SSDI Trial Work Month Threshold	\$1110.00
Cost of 1 Quarter of Coverage for Earning Insured Status	\$1730.00 (\$6920/year for 4 QC)
Maximum Monthly Social Security: worker Retiring at full retirement age	\$3822.00
Maximum Taxable Earnings (amount of earnings subject to FICA taxes to fund Social Security Retirement, Disability and Survivors benefits)	\$168,600
Medicare Part B Premium	Std premium is \$174.70 Higher for income over \$103,000. See Medicare.gov for details.