

2007 SSI Payment Levels in Massachusetts

Living Arrangement A - FULL COST OF LIVING

	BENEFIT TYPE	FEDERAL BENEFIT	STATE SUPPLEMENT	<u>TOTAL</u>
INDIVIDUAL	Aged	\$623.00	\$128.82	\$751.82
	Disabled	\$623.00	\$114.39	\$737.39
	Blind	\$623.00	\$149.74	\$772.74
MEMBER OF A COUPLE	Aged	\$467.00	\$100.86	\$567.86
	Disabled	\$467.00	\$ 90.03	\$557.03
	Blind	\$467.00	\$305.74	\$772.74

Living Arrangement B - SHARED LIVING

	BENEFIT TYPE	FEDERAL BENEFIT	STATE SUPPLEMENT	<u>TOTAL</u>
INDIVIDUAL	Aged	\$623.00	\$ 39.26	\$662.26
	Disabled	\$623.00	\$ 30.40	\$653.40
	Blind	\$623.00	\$149.74	\$772.74
MEMBER OF A COUPLE	Aged	\$467.00	\$100.86	\$567.86
	Disabled	\$467.00	\$ 90.03	\$557.03
	Blind	\$467.00	\$305.74	\$772.74

Living Arrangement C - HOUSEHOLD OF ANOTHER

	BENEFIT TYPE	FEDERAL BENEFIT	STATE SUPPLEMENT	<u>TOTAL</u>
INDIVIDUAL	Aged	\$415.34	\$104.36	\$519.70
	Disabled	\$415.34	\$ 87.58	\$502.92
	Blind	\$415.34	\$357.40	\$772.74
MEMBER OF A COUPLE	Aged	\$311.34	\$107.90	\$419.24
	Disabled	\$311.34	\$ 97.09	\$408.43
	Blind	\$311.34	\$461.40	\$772.74

Living Arrangement E - LICENSED REST HOME

	BENEFIT TYPE	FEDERAL BENEFIT	STATE SUPPLEMENT	<u>TOTAL</u>
INDIVIDUAL	Aged	\$623.00	\$293.00	\$916
	Disabled	\$623.00	\$293.00	\$916
	Blind	\$623.00	\$149.74	\$772.74
MEMBER OF A COUPLE	Aged	\$467.00	\$449.00	\$916
	Disabled	\$467.00	\$449.00	\$916
	Blind	\$467.00	\$305.70	\$772.74

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>
INDIVIDUAL	Aged	\$30.00	\$35.00	\$65.00
	Disabled	\$30.00	\$35.00	\$65.00
	Blind	\$30.00	\$35.00	\$65.00
MEMBER OF A COUPLE	Aged	\$30.00	\$35.00	\$65.00
	Disabled	\$30.00	\$35.00	\$65.00
	Blind	\$30.00	\$35.00	\$65.00

Living Arrangement G - ASSISTED LIVING

	BENEFIT TYPE	FEDERAL BENEFIT	STATE SUPPLEMENT	<u>TOTAL</u>
INDIVIDUAL	Aged	\$623.00	\$454.00	\$1077
	Disabled	\$623.00	\$454.00	\$1077
	Blind	\$623.00	\$454.00	\$1077
MEMBER OF A COUPLE	Aged	\$467.00	\$340.50	\$807.50
	Disabled	\$467.00	\$340.50	\$807.50
	Blind	\$467.00	\$40.50	\$807.50

2007 SSI and SSDI Threshold Amounts

SSI Resource Limit - Individual	\$2000.00
SSI Resource Limit - Couple	\$3000.00
SSI Child Allocation	\$311.00
SSI Student Earned Income Exclusion	\$1510.00/month up to \$6100.00/year
1619(b) Thresholds (individualized threshold available if actual medical expenses are higher than average Medicaid expenditure)	\$33,533 gross/yr. (disabled) \$34,382 gross/yr. (blind)
Substantial Gainful Activity - Disabled	\$900.00/month
Substantial Gainful Activity - Blind	\$1500.00/month
SSDI Trial Work Month	\$640.00
SSDI Cost of 1 Quarter of Coverage	\$1000.00 (\$4000/year for 4 QC)
Maximum Monthly Social Security Retirement Benefit	\$2116.00
Medicare Part B Premium	\$93.50/month if income less than \$80,000 (premiums higher for higher incomes)