## 2005 SSI Payment Levels in Massachusetts (2.7% COLA)

Living Arrangement A - FULL COST OF LIVING				
	BENEFIT TYPE	FEDERAL BENEFIT	STATE SUPPLEMENT	<u>TOTAL</u>
INDIVIDUAL	Aged	\$579.00	\$128.82	\$707.82
	Disabled	\$579.00	\$114.39	\$693.39
	Blind	\$579.00	\$149.74	\$728.74
MEMBER OF A COUPLE	Aged	\$434.50	\$100.86	\$535.36
	Disabled	\$434.50	\$ 90.03	\$524.53
	Blind	\$434.50	\$294.24	\$728.74

Living Arrangement B - SHARED LIVING				
	BENEFIT TYPE	FEDERAL BENEFIT	STATE SUPPLEMENT	TOTAL
INDIVIDUAL	Aged	\$579.00	\$ 39.26	\$618.26
	Disabled	\$579.00	\$ 30.40	\$609.40
	Blind	\$579.00	\$149.74	\$728.74
MEMBER OF A COUPLE	Aged	\$434.50	\$100.86	\$535.36
	Disabled	\$434.50	\$ 90.03	\$524.53
	Blind	\$434.50	\$294.24	\$728.74

Living Arrangement C - HOUSEHOLD OF ANOTHER				
	BENEFIT TYPE	FEDERAL BENEFIT	STATE SUPPLEMENT	<u>TOTAL</u>
INDIVIDUAL	Aged	\$386.00	\$104.36	\$490.36
	Disabled	\$386.00	\$ 87.58	\$473.58
	Blind	\$386.00	\$342.74	\$728.74
MEMBER OF A COUPLE	Aged	\$289.67	\$107.90	\$397.57
	Disabled	\$289.67	\$ 97.09	\$386.76
	Blind	\$289.67	\$439.07	\$728.74

Living Arrangement E - LICENSED REST HOME				
	BENEFIT TYPE	FEDERAL BENEFIT	STATE SUPPLEMENT	<u>TOTAL</u>
INDIVIDUAL	Aged	\$579.00	\$293.00	\$872.00
	Disabled	\$579.00	\$293.00	\$872.00
	Blind	\$579.00	\$149.74	\$728.74
MEMBER OF A COUPLE	Aged	\$434.50	\$437.50	\$872.00
	Disabled	\$434.50	\$437.50	\$872.00
	Blind	\$434.50	\$294.24	\$728.74

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	TOTAL
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	\$579.00	\$454.00	\$1033.00
	Disabled	\$579.00	\$454.00	\$1033.00
	Blind	\$579.00	\$454.00	\$1033.00
MEMBER OF A COUPLE	Aged	\$434.50	\$340.50	\$775.00
	Disabled	\$434.50	\$340.50	\$775.00
	Blind	\$434.50	\$340.50	\$775.00

## 2005 SSI and SSDI Threshold Amounts

SSI Resource Limit - Individual	\$2000.00
SSI Resource Limit - Couple	\$3000.00
SSI Child Allocation	\$ 290.00
SSI Student Earned Income Exclusion	\$1410.00/month up to \$5670.00/year
Substantial Gainful Activity - Disabled	\$830.00/month
Substantial Gainful Activity - Blind	\$1380.00/month
SSDI Trial Work Month	\$590.00
SSDI Cost of 1 Quarter of Coverage	\$920.00 (\$3680/year for 4 QC)
Maximum Monthly Social Security Retirement Benefit (full retirement age)	\$1,939.00
Average Monthly SSDI Benefit	\$895.00
Medicare Part B Premium	\$78.29/month
Representative Payee Payment Limit	lesser of \$32/month or 10% of monthly benefit; \$61/month if DAA beneficiary
1619(b) Threshold for Massachusetts	\$31,786.00