

2024 SSI and SSP Maximum Monthly Benefit Levels Chart (reflects the 3.2% federal COLA increase, effective January 1, 2024)

Fed L/A Code	State Supp Code	New York State Living Arrangement	Federal Benefit/ Individual	State Benefit/ Individual	Total Benefit/ Individual <sup>1</sup>	Federal Benefit/ Couple	State Benefit/ Couple	Total Benefit/ Couple <sup>1</sup>
A	A	Living Alone	\$943	\$87	\$1,030	\$1,415	\$104	\$1,519
A, C	B	Living with Others	\$943	\$23	\$966	\$1,415	\$46	\$1,461
B	F	Living in the Household of Another <sup>2</sup>	\$628.67	\$23	\$651.67	\$943.34	\$46	\$989.34
A	C	Congregate Care Level 1- <i>Family Care</i> NYC, Nassau, Rockland, Suffolk and Westchester Counties	\$943	\$266.48	\$1,209.48	\$1,415	\$1003.96	\$2,418.96
A	C	Congregate Care Level 1- <i>Family Care</i> Rest of State	\$943	\$228.48	\$1,171.48	\$1,415	\$927.96	\$2,342.96
A	D	Congregate Care Level 2- <i>Residential Care</i> NYC, Nassau, Rockland, Suffolk and Westchester Counties	\$943	\$435	\$1,378	\$1,415	\$1,341	\$2,756
A	D	Congregate Care Level 2- <i>Residential Care</i> Rest of State	\$943	\$405	\$1,348	\$1,415	\$1,281	\$2,696
A	E	Congregate Care Level 3- <i>Enhanced Residential Care</i>	\$943	\$694	\$1,637	\$1,415	\$1,859	\$3,274
D	Z	Title XIX (Medicaid Certified) Institutions <sup>3</sup>	\$30	\$0 <sup>4</sup>	\$30	N/A	N/A	N/A
A	Z	See Next Page <sup>5</sup>	\$943	\$0	\$943	\$1,415	\$0	\$1,415

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<sup>1</sup> The combined Federal and State SSI benefit provided to eligible individuals and eligible couples with no countable income.

<sup>2</sup> The *Living in the Household of Another's* Category includes recipients whose federal benefit has been reduced by the "value of 1/3 reduction" (VTR) due to the federal determination that they are both: a) Living in someone else's household *and b)* receiving some amount of free or subsidized food and shelter (room and board).

<sup>3</sup> Applies when an SSI recipient is residing in a medical facility, is not expected to return home within 90 days, and Medicaid is paying for at least 50% of the cost of care.

<sup>4</sup> Recipients in nursing homes licensed by DOH receive an additional monthly grant of \$25 issued by OTDA called a State Supplement Personal Needs Allowance (SSPNA). Residents of other medical facilities receive a SSPNA of \$5.

<sup>5</sup> No State supplement is provided: a) when a SSI recipient is residing in a private medical facility and Medicaid is paying for less than 50% of the cost of care, or b) when a recipient resides in certain publicly operated residential facilities that serve fewer than 16 residents, or c) when a recipient resides in a public emergency shelter for 6 calendar months during a 9-month period.

Minimum Personal Needs Allowance	
Congregate Care Level 1	\$181
Congregate Care Level 2	\$208
Congregate Care Level 3	\$249
Limits on Countable Resources	
Individuals	\$2,000
Couples	\$3,000

Statutory References: Chapter 56 of the Laws of 2023