

2025 SSI and SSP Maximum Monthly Benefit Levels Chart
(reflects the 2.5% federal COLA increase, effective January 1, 2025)

Fed L/A Code	State Supp Code	New York State Living Arrangement	Federal Benefit/ Individual	State Benefit/ Individual	Total Benefit/ Individual ¹	Federal Benefit/ Couple	State Benefit/ Couple	Total Benefit/ Couple ¹
A	A	Living Alone	\$967	\$87	\$1,054	\$1,450	\$104	\$1,554
A, C	B	Living with Others	\$967	\$23	\$990	\$1,450	\$46	\$1,496
B	F	Living in the Household of Another ²	\$644.67	\$23	\$667.67	\$966.67	\$46	\$1,012.67
A	C	Congregate Care Level 1- <i>Family Care</i> NYC, Nassau, Rockland, Suffolk, and Westchester Counties	\$967	\$266.48	\$1,233.48	\$1,450	\$1,016.96	\$2,466.96
A	C	Congregate Care Level 1- <i>Family Care</i> Rest of State	\$967	\$228.48	\$1,195.48	\$1,450	\$940.96	\$2,390.96
A	D	Congregate Care Level 2- <i>Residential Care</i> NYC, Nassau, Rockland, Suffolk, and Westchester Counties	\$967	\$435	\$1,402	\$1,450	\$1,354	\$2,804
A	D	Congregate Care Level 2- <i>Residential Care</i> Rest of State	\$967	\$405	\$1,372	\$1,450	\$1,294	\$2,744
A	E	Congregate Care Level 3- <i>Enhanced Residential Care</i>	\$967	\$694	\$1,661	\$1,450	\$1,872	\$3,322
D	Z	Title XIX (Medicaid Certified) Institutions ³	\$30	\$0 ⁴	\$30	N/A	N/A	N/A
A	Z	See Next Page ⁵	\$967	\$0	\$967	\$1,450	\$0	\$1,450

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

² The *Living in the Household of Another* 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).

³ 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.

⁴ 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.

⁵ 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	\$186
Congregate Care Level 2	\$213
Congregate Care Level 3	\$255

Limits on Countable Resources	
Individuals	\$2,000
Couples	\$3,000

Statutory References: Chapter 56 of the Laws of 2024