



Date: November 27, 2024

DMS Operations Memo 24-34

To: Income Maintenance Supervisors
Income Maintenance Lead Workers
Income Maintenance Staff

Affected Programs:	
<input type="checkbox"/> BadgerCare Plus	<input type="checkbox"/> Caretaker Supplement
<input type="checkbox"/> FoodShare	<input type="checkbox"/> FoodShare Employment and Training
<input checked="" type="checkbox"/> Medicaid	
<input type="checkbox"/> SeniorCare	

From: Jonelle Brom, Bureau Director
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Division of Medicaid Services

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Bureau of Eligibility and Enrollment Policy
Division of Medicaid Services

2025 Cost-of-Living Adjustment (COLA) for Medicaid

CROSS REFERENCE

Medicaid Eligibility Handbook

EFFECTIVE DATE

January 1, 2025

PURPOSE

This operations memo announces this year’s Social Security Cost-of-Living Adjustment (COLA) and the resulting increase in some Medicaid financial eligibility limits, effective January 1, 2025.

BACKGROUND

As announced by the Social Security Administration, the COLA for calendar year 2025 is 2.5% for the Social Security Administration (SSA) Old Age, Survivors and Disability Insurance (OASDI or Title II) Program and the Supplemental Security Income (SSI or Title XVI) Program.

The Medicare Part B costs are also updated based on the yearly amount set in federal law.

The federal COLA increase will result in changes to some of the Medicaid income levels, allowances, and deductions in CARES. CARES eligibility redeterminations for January 2025 will occur as part of the annual mass change.

Note: SSI amounts will not be updated in CARES through the COLA mass change. SSI amounts will continue to be auto-updated on a weekly basis. The increase in federal SSI payments will appear as an auto-update after adverse action in December 2024 and will impact February 2025 benefits. The regular SSI auto-update alerts will be generated when these amounts change.

There will not be a COLA increase in state SSI Supplement or Supplemental Security Income Exceptional Expense (SSI-E) payment amounts.

POLICY

MEDICAID DEDUCTIBLES

Per Medicaid Eligibility Handbook [Section 24.6.1](#), increases in Social Security benefits due to the COLA may not result in increases to the amount of met or unmet deductibles. However, any increases in Medicare premiums must be used to adjust the amount of any remaining unmet deductibles.

NEW PROGRAM AMOUNTS FOR 2025

INSTITUTIONAL MEDICAID CATEGORICALLY NEEDY MONTHLY INCOME LIMIT

Cross Reference: Medicaid Eligibility Handbook, [Section 39.4](#)

Effective Date: January 1, 2025

ITEM	NEW AMOUNT	OLD AMOUNT
Categorically needy monthly income limit for a person in a medical institution	\$2,901	\$2,829

KATIE BECKETT MEDICAID MONTHLY INCOME LIMIT

Cross Reference: Medicaid Eligibility Handbook, [Section 29.1](#)

Effective Date: January 1, 2025

ITEM	NEW AMOUNT	OLD AMOUNT
Monthly income limit for Katie Beckett Medicaid	\$2,901	\$2,829

ELDERLY, BLIND, AND DISABLED (EBD) MEDICAID MONTHLY INCOME LIMITS AND ASSET LIMIT CHANGES

Cross Reference: Medicaid Eligibility Handbook, [Section 39.4](#)

Effective Date: January 1, 2025

ITEM	NEW AMOUNT	OLD AMOUNT
Categorically Needy Monthly Income Limits		

ITEM	NEW AMOUNT	OLD AMOUNT
Group Size of 1	\$1,050.78	\$1,026.78
Group Size of 2	\$1,582.05	\$1,547.05
Categorically Needy Asset Limits		
Group Size of 1	No Change	\$2,000
Group Size of 2	No Change	\$3,000
Medically Needy Asset Limits		
Group Size of 1	No Change	\$2,000
Group Size of 2	No Change	\$3,000

Note: The Medically Needy monthly income limits will be updated in early 2025 when the Federal Poverty Level income guidelines are updated.

MONTHLY EBD DEEMING AMOUNT TO AN INELIGIBLE MINOR

Cross Reference: Medicaid Eligibility Handbook, [Sections 1.1.3.3](#), [15.1.2](#) and [39.4](#)

Effective Date: January 1, 2025

ITEM	NEW AMOUNT	OLD AMOUNT
Monthly EBD Deeming Amount to an Ineligible Minor	\$483	\$472

MONTHLY PARENTAL LIVING ALLOWANCE

Cross Reference: Medicaid Eligibility Handbook, [Sections 1.1.3.3](#), [15.1.2](#) and [39.4](#)

Effective Date: January 1, 2025

ITEM	NEW AMOUNT	OLD AMOUNT
Monthly Parental Living Allowance – 1 Parent	\$967	\$943
Monthly Parental Living Allowance – 2 Parents	\$1,450	\$1,415

SPOUSAL IMPOVERISHMENT INCOME ALLOCATION AND ASSET SHARE

Cross Reference: Medicaid Eligibility Handbook, [Sections 18.6.2](#) and [18.4.3](#)

Effective Date: January 1, 2025

ITEM	NEW AMOUNT	OLD AMOUNT
Income allocation maximum (monthly)	\$3,948.00	\$3,853.50
Community Spouse Asset Share (CSAS) maximum	\$157,920	\$154,140

If the total countable assets of the couple are:	Then the CSAS is:	MA eligibility limit:
\$315,840 or more	\$157,920	\$159,920
Less than \$315,840, but greater than \$100,000	half the total countable assets of the couple	½ + \$2,000
\$100,000 or less	\$50,000	\$52,000

Income Allocation and Allowance:

Community Spouse Allocation	<p>The maximum allocation is the lesser of \$3,948.00, or \$3,406.66 plus excess shelter allowance. (The lower allocation limit does not change with the COLA increases. This amount will be updated on July 1.)</p> <p>“Excess shelter allowance” means shelter expenses above \$1,022. Shelter expenses are mortgage, rent, taxes, maintenance fees, and a utility allowance. (The excess shelter allowance does not change with the COLA increases. This amount will be updated on July 1.)</p>
Dependent Family Member Income Allowance Standard	<p>\$2,555 (This amount does not change with the COLA increases. This amount will be updated on July 1.)</p> <p>The maximum allowance per dependent family member is \$851.67.</p>
Personal Needs Allowance	\$55 for institutionalized individuals (no change)
Community Waivers Allowance	\$1,147 to \$2,901 for a person in community waivers

Note: The dollar amounts for income allocation and allowance are monthly amounts.

SPOUSAL IMPOVERISHMENT FACT SHEET

IM workers and members can access the Wisconsin Medicaid Spousal Impoverishment Protection fact sheet, P-10063 at dhs.wi.gov/library/collection/p-10063.

2025 MEDICARE PART B PREMIUM AMOUNT BASED ON INCOME

Some people who get Social Security benefits will pay less than the standard monthly premium amount of \$185.00.

The people who pay the standard monthly premium or higher amounts shown in the chart below are those who fall into one of these groups:

- Individuals enrolled in Part B for the first time in 2025.
- Individuals who do not receive Social Security benefits.
- Individuals who are directly billed for Part B premiums.
- Individuals who have Medicare and Medicaid, and Medicaid pays their premiums (the state of Wisconsin will pay the standard premium amount of \$185.00).
- Individuals whose modified adjusted gross income as reported on their IRS tax return from 2023 is above a certain amount.

Cross Reference: None

Effective Date: January 1, 2025

Yearly Income (as Reported on the 2023 IRS Tax Return)			
Single	Married (Filing Jointly)	Married (Filing Separately)	Monthly Premium
\$106,000 or less	\$212,000 or less	\$106,000 or less	\$185.00
\$106,001 – \$133,000	\$212,001 - \$266,000		\$259.00
\$133,001 – \$167,000	\$266,001 - \$334,000		\$370.00
\$167,001 – \$200,000	\$334,001 - \$400,000		\$480.90
\$200,001 – \$499,999	\$400,001 – \$749,999	\$106,001 – \$393,999	\$591.90
\$500,000 and above	\$750,000 and above	\$394,000 and above	\$628.90

More information on Part B premiums is available at [cms.gov/newsroom/fact-sheets/2025-medicare-parts-b-premiums-and-deductibles](https://www.cms.gov/newsroom/fact-sheets/2025-medicare-parts-b-premiums-and-deductibles).

SSI-E MONTHLY PAYMENT LEVEL

Cross Reference: Medicaid Eligibility Handbook, [Section 39.4](#)

Effective Date: No change

ITEM	NEW AMOUNT	OLD AMOUNT
State SSI-E Supplement monthly payment	No Change	\$95.99

HOME MAINTENANCE MAXIMUM ALLOWANCE

Cross Reference: Medicaid Eligibility Handbook, [Sections 15.7.1](#) and [39.4](#)

Effective Date: January 1, 2025

ITEM	NEW AMOUNT	OLD AMOUNT
Home maintenance maximum allowance	\$1,146.77	\$1,122.77

COMMUNITY WAIVERS MONTHLY BASIC NEEDS ALLOWANCE

Cross Reference: Medicaid Eligibility Handbook, [Sections 28.6.4.1](#) and [39.4](#)

Effective Date: January 1, 2025

ITEM	NEW AMOUNT	OLD AMOUNT
Monthly Basic Needs Allowance	\$1,147	\$1,123
EBD Maximum Monthly Personal Maintenance Allowance	\$2,901	\$2,829

COMMUNITY WAIVERS SPECIAL INCOME LIMIT (GROUP B)

Cross Reference: Medicaid Eligibility Handbook, [Sections 28.6.3](#) and [39.4](#)

Effective Date: January 1, 2025

ITEM	NEW AMOUNT	OLD AMOUNT
Monthly income limit for a single person or spouse not applying	\$2,901	\$2,829

TUBERCULOSIS-RELATED MEDICAID MONTHLY INCOME LIMIT

Cross Reference: BadgerCare Plus Eligibility Handbook, [Section 43.2](#)

Effective Date: January 1, 2025

ITEM	NEW AMOUNT	OLD AMOUNT
Monthly income limit for one person	\$2,019	\$1,971
Monthly income limit for a married couple	\$2,985	\$2,915

MEDICARE SAVINGS PROGRAM ASSET LIMITS

Cross Reference: Medicaid Eligibility Handbook, [Section 39.4.1](#)

Effective Date: January 1, 2025

ITEM	NEW AMOUNT	OLD AMOUNT
Asset limit for one person	\$9,660	\$9,430
Asset limit for two persons	\$14,470	\$14,130

Applies only to Qualified Medicare Beneficiary (QMB), Specified Low-Income Medicare Beneficiary (SLMB), and Specified Low-Income Medicare Beneficiary Plus (SLMB+); does not apply to Qualified Disabled and Working Individuals (QDWI).

COST-OF-LIVING ADJUSTMENT (COLA) DISREGARD

Cross Reference: Medicaid Eligibility Handbook, [Section 39.6](#)

Effective Date: January 1, 2025

Month SSI Was Last Received	Multiply 2025 OASDI by:	Multiply 2024 OASDI by:
Jan 2024 - Dec 2024	0.024390	--
Jan 2023 - Dec 2023	0.054642	0.031008
Jan 2022 - Dec 2022	0.130305	0.108563
Jan 2021 - Dec 2021	0.178758	0.158227
Jan 2020 - Dec 2020	0.189298	0.169030
Jan 2019 - Dec 2019	0.202065	0.182116
Jan 2018 - Dec 2018	0.223798	0.204393
Jan 2017 - Dec 2017	0.239018	0.219993
Jan 2016 - Dec 2016	0.241294	0.222326
Jan 2015 - Dec 2015	0.241294	0.222326
Jan 2014 - Dec 2014	0.253976	0.235326
Jan 2013 - Dec 2013	0.265001	0.246626
Jan 2012 - Dec 2012	0.277287	0.259220
Jan 2011 - Dec 2011	0.302401	0.284961
Jan 2010 - Dec 2010	0.302401	0.284961
Jan 2009 - Dec 2009	0.302401	0.284961
Jan 2008 - Dec 2008	0.340644	0.324160
Jan 2007 - Dec 2007	0.355468	0.339355
Jan 2006 - Dec 2006	0.376058	0.360459
Jan 2005 - Dec 2005	0.400632	0.385648
Jan 2004 - Dec 2004	0.416390	0.401799
Jan 2003 - Dec 2003	0.428393	0.414103

Month SSI Was Last Received	Multiply 2025 OASDI by:	Multiply 2024 OASDI by:
Jan 2002 - Dec 2002	0.436285	0.422192
Jan 2001 - Dec 2001	0.450570	0.436835
Jan 2000 - Dec 2000	0.469150	0.455879
Jan 1999 - Dec 1999	0.481592	0.468632
Jan 1998 - Dec 1998	0.488245	0.475451
Jan 1997 - Dec 1997	0.498771	0.486240
Jan 1996 - Dec 1996	0.512897	0.500719
Jan 1995 - Dec 1995	0.525240	0.513371
Jan 1994 - Dec 1994	0.538172	0.526626
Jan 1993 - Dec 1993	0.549875	0.538622
Jan 1992 - Dec 1992	0.562985	0.552060
Jan 1991 - Dec 1991	0.578578	0.568042
Jan 1990 - Dec 1990	0.600169	0.590173
Jan 1989 - Dec 1989	0.618117	0.608570
Jan 1988 - Dec 1988	0.632805	0.623625
Jan 1987 - Dec 1987	0.647606	0.638796
Jan 1986 - Dec 1986	0.652128	0.643431
Jan 1985 - Dec 1985	0.662588	0.654152
Jan 1984 - Dec 1984	0.673998	0.665848
Jul 1983 - Dec 1983	0.685022	0.677148
Jul 1982 - Jun 1983	0.706724	0.699393
Jul 1981 - Jun 1982	0.736263	0.729670
Jul 1980 - Jun 1981	0.769259	0.763490
Jul 1979 - Jun 1980	0.790045	0.784796
Jul 1978 - Jun 1979	0.802859	0.797930
Apr 1977 - Jun 1978	0.813842	0.809188

CONTACTS

DHS/DMS/BEEP/EB

DHS/DMS/BEOT/JN