

Social Security Disability Resource Binder

2019

A resource binder for individuals that are pursuing social security disability benefits through the Social Security Administration. This binder covers information about both Social Security Disability Insurance/Title II and Supplemental Security Income/Title XVI.

Notice: All information, with the exception of the final section, has been taken directly from the SSA.gov website. Information should be verified for legal updates not included on SSA.gov.

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Social Security Disability Resource Binder

The Social Security and Supplemental Security Income disability programs are the largest of several federal programs that provide assistance to people with disabilities. While these two programs are different in many ways, both are administered by the Social Security Administration and only individuals who have a disability and meet both medical and technical criteria may qualify for benefits under either program.

Disability is a subject you may read about in the newspaper but not think of as something that might actually happen to you; however, your chances of becoming disabled are probably greater than you realize.

Studies show that just over one in four of today's 20-year-olds will become disabled before reaching age 67. Disability can occur from chronic illnesses but also may be a product of work-related injuries, auto accidents, or other unexpected injuries.

While we spend a lot of time working to succeed in our jobs and careers, few of us think about ensuring that we have a safety net to fall back on should we become disabled. This is an area where Social Security can provide valuable help to you.

Disability and Supplemental Security Income

SSA pays disability benefits under two programs:

- The Social Security Disability Insurance (SSDI) program pays benefits to you and certain family members if you have worked long enough and paid Social Security taxes. (Your adult child also may qualify for benefits on your earnings record if he or she has a disability that started before age 22.)
- The Supplemental Security Income (SSI) program pays benefits to disabled adults and children who have limited or no income and resources.

For most people, the medical requirements are the same under both programs and disability is determined by the same process.

Whether you apply for SSDI or SSI, the Social Security Administration (SSA) asks you for information about your medical condition, work, and education history to help us decide if you are disabled under our rules.

What is Supplemental Security Income?

Supplemental Security Income (SSI) is a federal income supplement program funded by general tax revenues (not Social Security taxes):

- It is designed to help aged, blind, and disabled people, who have little or no income; and
- It provides cash to meet basic needs for food, clothing, and shelter. The amount of benefits will change based on the fiscal year. For 2019, the monthly amount is \$771/month.
- Additionally, it provides access to Medicaid.

SUPPLEMENTAL SECURITY INCOME (SSI) ELIGIBILITY REQUIREMENTS

WHO IS ELIGIBLE FOR SSI?

Anyone who is:

- aged (age 65 or older);
- blind; or
- disabled.

And, who:

- has limited income;
- has limited resources;
- Is a U.S. citizen or national, or in one of certain categories of aliens;

In general, an alien who is subject to an active warrant for deportation or removal does not meet the citizenship/alien requirement.

- is a resident of one of the 50 States, the District of Columbia, or the Northern Mariana Islands;
- is not absent from the country for a full calendar month or for 30 consecutive days or more;
- is not confined to an institution (such as a hospital or prison) at the government's expense;
- applies for any other cash benefits or payments for which he or she may be eligible, (for example, pensions, Social Security benefits);

- gives SSA permission to contact any financial institution and request any financial records about you;
- files an application; **and**
- meets certain other requirements.

WHAT IS "BLINDNESS" FOR AN ADULT OR CHILD?

Blindness in SSA's disability programs means:

- you have a central visual acuity for distance of 20/200 or less in your better eye with use of a correcting lens; or
- you have a visual field limitation in your better eye, such that the widest diameter of the visual field subtends an angle no greater than 20 degrees.

If you have a visual impairment, but are not blind according to SSA's rules as defined above, you may still be eligible for SSI benefits on the basis of disability. See the definitions of disability for children and adults below.

WHAT DOES "DISABLED" MEAN FOR A CHILD?

If you are under age 18, SSA may consider you "disabled" if you have a medically determinable physical or mental impairment (including an emotional or learning problem) that:

- results in marked and severe functional limitations; **and** can be expected to result in death; **or**
- has lasted or can be expected to last for a continuous period of not less than 12 months.

If you are age 18 or older, the adult definition of disability explained below applies.

WHAT DOES "DISABLED" MEAN FOR AN ADULT?

If you are age 18 or older SSA may consider you "disabled" if you have a medically determinable physical or mental impairment (including an emotional or learning problem) which:

- results in the inability to do any substantial gainful activity; **and**
- can be expected to result in death; **or**
- has lasted or can be expected to last for a continuous period of not less than 12 months.

SSA is committed to providing benefits quickly to applicants whose medical conditions are so serious that their conditions clearly meet disability standards.

Compassionate Allowances (CAL) are a way to quickly identify diseases and other medical conditions that, by definition, meet Social Security's standards for disability benefits. These conditions primarily include certain cancers, adult brain disorders, and a number of rare disorders that affect children. The CAL initiative helps reduce waiting time to reach a disability determination for individuals with the most serious disabilities. By incorporating cutting-edge technology, the agency can easily identify potential CAL to quickly make decisions. SSA receives information from the public, advocacy groups, comments received from the Social Security and Disability Determination Services communities, counsel from medical and scientific experts, research with the National Institutes of Health (NIH), and information received from past public outreach hearings regarding potential CAL conditions. For more information on CAL go to www.ssa.gov/compassionateallowances/.

WHAT DOES "LIMITED INCOME" INCLUDE?

Income, for the purposes of SSI includes:

- money you earn from work;
- money you receive from other sources, such as Social Security benefits, workers compensation, unemployment benefits, the Department of Veterans Affairs, friends or relatives; **and**
- free food or shelter.

SSA does not count all income for SSI, but income that they do count reduces your SSI benefit amount. For more information about what SSA may count as income, please see [SSI INCOME](#).

SUPPLEMENTAL SECURITY INCOME (SSI) RESOURCES

WHAT ARE RESOURCES?

Resources are things you own such as:

- cash;
- bank accounts, stocks, U.S. savings bonds;
- land;
- life insurance;
- personal property;
- vehicles;
- anything else you own which could be changed to cash and used for food or shelter; and
- deemed resources.

WHAT ARE DEEMED RESOURCES?

Sometimes, SSA “deems” a portion of the resources of a spouse, parent, parent’s spouse, sponsor of an alien, or sponsor’s spouse as belonging to the person who applies for SSI. SSA calls this process the deeming of resources. If a child under age 18 lives with one parent, \$2,000 of the parent's total countable resources does not count. If the child lives with 2 parents, \$3,000 does not count. We count amounts over the parents’ limits as part of the child's \$2,000 resource limit.

WHY ARE RESOURCES IMPORTANT IN THE SSI PROGRAM?

The value of your resources is one of the factors that determines whether you are eligible for SSI benefits. However, not all resources count for SSI. If the value of your resources that SSA counts is over the allowable limit at the beginning of the month, you cannot receive SSI for that month. If you decide to sell the excess resources for what they are worth, you may receive SSI beginning the month after you sell the excess resources. You may even be able to receive benefits while you try to sell the excess resources in certain situations, particularly in the sale of real property. Please see [Conditional Benefits](#) for more information on this matter.

WHAT IS THE RESOURCE LIMIT?

The limit for countable resources is \$2,000 for an individual and \$3,000 for a couple.

WHAT RESOURCES DO NOT COUNT FOR SSI?

For SSI, SSA does not count:

- the home you live in and the land it is on;
- household goods and personal effects (e.g., your wedding and engagement rings);
- burial spaces for you or your immediate family;
- burial funds for you and your spouse, each valued at \$1,500 or less (see the SSI Spotlight on [Burial Funds](#));
- life insurance policies with a combined face value of \$1,500 or less;
- one vehicle, regardless of value, if it is used for transportation for you or a member of your household;
- retroactive SSI or Social Security benefits for up to nine months after you receive them (including payments received in [installments](#));
- grants, scholarships, fellowships, or gifts set aside to pay educational expenses for 9 months after receipt;

up to \$100,000 of funds in an Achieving a Better Life Experience (ABLE) account established through a State ABLE program (see the SSI Spotlight on [ABLE](#)).

WHAT ARE INSTALLMENTS?

When an individual is eligible for past-due SSI benefits, Social Security must first reimburse the State if you received any monetary Interim Assistance, while you were waiting for your SSI decision. If the remaining past-due benefits are large, SSA must pay them in installments in order to not put a person over the SSI resource limit. The installment payments are made in no more than three payments, at six month intervals.

There is an exception that allows the amount of the first and second payment to be increased because of certain debts. There are also two exceptions that would permit payment of all unpaid benefits due an individual to be paid in one lump-sum:

- if you have a medical condition that is expected to result in your death within 12 months;
or
- you become ineligible for SSI benefits and are likely to remain ineligible for 12 months.

WHAT OTHER RESOURCES DO NOT COUNT FOR SSI?

- property essential to self-support (see the SSI Spotlight on [Property You Need for Self-Support](#));
- resources that a blind or disabled person needs for an approved plan for achieving self support (PASS) (see the SSI Spotlight on [Plans to Achieve Self-Support](#));
- money saved in an Individual Development Account (IDA) (See the SSI Spotlight on [Individual Development Accounts](#));
- support and maintenance assistance and home energy assistance that we do not count as income;
- cash received for medical or social services that we do not count as income is not a resource for 1 month;

EXCEPTION: Cash reimbursements of expenses already paid for by the person are evaluated under the regular income and resources rules.

- health flexible spending arrangements (FSAs);
- State or local relocation assistance payments are not counted for 12 months;
- crime victim's assistance is not counted for 9 months;
- earned income tax credit payments are not counted for 9 months;
- dedicated accounts for disabled or blind children (see [Deeming Eligibility Chart for Children](#));
- disaster relief assistance;
- cash received for the purpose of replacing an excluded resource (for example, a house) that is lost, damaged, or stolen is not counted for 9 months;
- All federal tax refunds and advanced tax credits received on or after January 1, 2010 are not counted for 12 months;
- The first \$2,000 of compensation received per calendar year for participating in certain clinical trials; **and**
- Some trusts (See the SSI Spotlight on [Trusts](#)).

WHAT IF I WANT TO SELL A RESOURCE?

If you are trying to sell real property or other resources that put you over the resource limit, you may be able to get SSI while you are trying to sell them. When you sell the resource, you must pay back the SSI benefits you received for the period in which you were trying to sell the property or other resource. SSA calls these "conditional benefits". You must sign the "Agreement to Sell Property" form and SSA must accept that agreement before conditional payments can begin. You can get the form from your local Social Security office.

CAN I GET SSI IF I HAVE EXCESS RESOURCES?

To get SSI, your countable resources must not be worth more than \$2,000 for an individual, or \$3,000 for a couple. However, you may be able to get conditional payments if you agree to sell some of your countable resources.

WHAT KINDS OF THINGS CAN I SELL?

You can sell the following types of things:

- Real property, such as land or a house that you don't live in; or
- Personal property, such as non-excluded vehicles (for example, a second car).

HOW DOES THIS WORK?

While you are trying to sell real property, you can receive SSI benefits for up to 9 months under certain conditions. While you are trying to sell personal property, you can receive SSI benefits for up to 3 months or paid for even longer if certain conditions are met.

WHAT DO I HAVE TO DO?

Your conditional benefits cannot begin until after you sign the "agreement to sell property" form and SSA accepts the agreement. You also have to demonstrate that you are diligently pursuing the sale of the property.

WHAT HAPPENS AFTER I SELL MY REAL AND/OR PERSONAL PROPERTY?

- You will have to pay back some or all of the SSI benefits you received while trying to sell the property.
- You may continue to get SSI benefits. Contact your local Social Security office to find out if your SSI benefits will continue after the sale.

WHAT HAPPENS IF I GIVE AWAY OR SELL A RESOURCE?

If you, your spouse, or a co-owner give away a resource or sell it for less than it is worth, you may be ineligible for SSI benefits for up to 36 months. How long you are ineligible for SSI benefits depends on the value of the resource you transferred.

WHAT DOES IT MEAN TO TRANSFER RESOURCES?

Transferring a resource is giving away or selling a resource. For example, giving away cash to another person is a transfer of resources.

WHAT HAPPENS TO MY SSI IF I TRANSFER A RESOURCE?

If you, your spouse, or a co-worker give away a resource or sell it for less than it is worth, you may be ineligible for SSI for up to 36 months. How long you are ineligible for SSI depends on the value of the resource you transferred.

WHAT HAPPENS IF I SELL A RESOURCE?

If you sell a resource for what it is worth, the 36-month ineligibility period does not apply. But, the money you receive from the sale may make you ineligible if it puts you over the \$2,000 resource limit for an individual or \$3,000 for a couple.

WHAT HAPPENS IF I PUT MY RESOURCES INTO A TRUST?

In some cases, we consider putting resources into a trust as a transfer of resources that makes you ineligible for SSI. In other cases, we count the trust itself as a resource. Moreover, the value of the trust could put you over the resource limit. See the SSI Spotlight on [Trusts](#) or more information on how trusts affect SSI eligibility.

HOW DOES TRANSFERRING A RESOURCE AFFECT MEDICAID COVERAGE?

Medicaid may not pay for certain health care costs if you or your spouse gives away a resource or sell it for less than it is worth. If you have any questions about how transferring a resource affects Medicaid coverage, please contact the welfare or social services agency that handles Medicaid in your area.

CITIZEN / NON-CITIZEN STATUS

To get SSI, you must be:

- a citizen or national of the United States; or
- a non-citizen who meets the alien eligibility criteria under the 1996 legislation and its amendments.

WHEN IS A NON-CITIZEN ELIGIBLE FOR SSI?

Beginning August 22, 1996, most non-citizens must meet two requirements to be eligible for SSI:

- the non-citizen must be in a [qualified alien](#) category, and
- meet a [condition](#) that allows qualified aliens to get SSI benefits.

A non-citizen must also meet all of the other requirements for SSI eligibility, including the limits on income, resources, etc.

WHO IS A "QUALIFIED ALIEN"?

There are seven categories of non-citizens who are qualified aliens. You are a "qualified alien" if the Department of Homeland Security (DHS) says you are in one of these categories:

1. Lawfully admitted for Permanent Residence (LAPR) in the U.S., including "Amerasian immigrant" as defined in P.L. 100-202, with a class of admission AM-1 through AM-8;
2. Granted conditional entry under Section 203(a)(7) of the Immigration and Nationality Act (INA) as in effect before April 1, 1980;
3. Paroled into the U.S. under Section 212(d)(5) of the INA for a period of at least one year;
4. Refugee admitted to the U.S. under Section 207 of the INA;
5. Granted asylum under Section 208 of the INA;

6. Deportation is being withheld under Section 243(h) of the INA as in effect before April 1, 1997, or removal is being withheld under Section 241(b)(3) of the INA;
7. A “Cuban or Haitian entrant” under Section 501(e) of the Refugee Education Assistance Act of 1980 or in a status that is to be treated as a “Cuban/Haitian entrant” for SSI purposes.

In addition, you can be a “deemed qualified alien” if, under certain circumstances, you, your child, or your parent has been subjected to battery or extreme cruelty by a family member while in the United States.

UNDER WHAT CONDITIONS IS A “QUALIFIED ALIEN” ELIGIBLE FOR SSI?

If you are in one of the seven "qualified alien" categories listed above, or have been determined to be a “deemed qualified alien” because you have been subjected to battery or extreme cruelty, you may be eligible for SSI benefits if you have limited income and resources and are aged, blind, or disabled and also meet one of the following conditions:

1. You were receiving SSI and lawfully residing in the U.S. on August 22, 1996.
2. You are a Lawfully Admitted for Permanent Residence (LAPR) with 40 qualifying quarters of earnings. Work done by your spouse or parent(s) may also count toward the 40 quarters of earnings, but only for getting SSI.

SSA cannot count quarters of earnings earned after December 31, 1996, if you, your spouse, or your parent(s) worked or received certain benefits from the U.S. government based on limited income and resources during that period.

IMPORTANT: *If you entered the U.S. for the first time on or after August 22, 1996, then you may not be eligible for SSI for the first five years as a LAPR, even if you have 40 qualifying quarters of earnings.*

3. You are currently on active duty in the U.S. Armed Forces, or you are an honorably discharged veteran and your discharge is not because you are an alien. This condition may also apply if you are the spouse, widow(er), or dependent child of certain U.S. military personnel.

4. You were lawfully residing in the United States on August 22, 1996, **and** you are blind or disabled.

5. You may receive SSI for a maximum of 7 years from the date DHS granted you qualified alien status in one of the following categories, and the status was granted within seven years of filing for SSI:
 - Refugee admitted to the United States (U.S.) under section 207 of the Immigration and Nationality Act (INA);
 - Asylee admitted to the U.S. under section 208 of the INA;
 - Alien whose deportation was withheld under section 243(h) of the INA or whose removal is withheld under section 241(b)(3) of the INA;
 - Admitted as a "Cuban or Haitian entrant"- as defined under section 501(e) of the Refugee Education Assistance Act of 1980 or in a status that is to be treated as a "Cuban/Haitian entrant" for SSI purposes; or
 - "Amerasian immigrant" pursuant to P.L. 100-202, with a class admission of AM-1 through AM-8.

EXEMPTION FROM THE AUGUST 22, 1996 LAW FOR CERTAIN NON-CITIZEN INDIANS

Certain categories of non-citizens may be eligible for SSI and are not subject to the August 22, 1996, law. These categories include:

- American Indians born in Canada who were admitted to the United States under Section 289 of the INA; or
- Non-citizen members of a Federally recognized Indian tribe who fall under Section 4(e) of the Indian Self-Determination and Education Assistance Act.

ADDITIONAL ELIGIBLE ALIEN CATEGORIES

Victims of Severe Forms of Human Trafficking: You may be eligible for SSI under certain circumstances if the Department of Health and Human Services' [Office of Refugee Resettlement](#) and the Department of Homeland Security determine that you meet the requirements of the Trafficking Victims Protection Act of 2000.

Iraqi/Afghan Special Immigrants: You may also qualify for SSI for a period of seven years if you are an Iraqi or Afghani special immigrant admitted to the United States.

See the SSI Spotlight on [SSI Benefits for Aliens](#).

WHO IS NOT ELIGIBLE FOR SSI?

Some examples of who is not eligible for SSI include, but are not limited to:

SOMEONE WHO HAS AN UNSATISFIED FELONY OR ARREST WARRANT

You are ineligible to receive SSI benefits for any month during which you have an unsatisfied felony or arrest warrant for:

- escape from custody; or
- flight to avoid prosecution or confinement; or
- flight-escape.

In addition, SSA cannot pay you any retroactive payments if you have one of these unsatisfied felony or arrest warrants. SSA will hold your retroactive payments until you contact SSA and provide proof that you satisfied the felony or arrest warrant. Proof may be in the form of a court-order or other legal documents.

SOMEONE WHO IS IN PRISON OR JAIL

If you are receiving SSI and you go to prison or jail, (this also includes correctional institutions, such as detention centers, halfway houses, boot camps, etc. but does not necessarily include home confinement) you are not eligible to receive SSI for any full calendar month you are incarcerated. In addition, SSA cannot pay any retroactive payments for benefits due before you were incarcerated. We will hold the retroactive payments until you contact SSA and provide proof that you are no longer a prisoner.

Please view ‘What Prisoners Need to Know’ online at www.ssa.gov/pubs/10133.html if you want more information about how being in jail or prison affects your SSI benefits.

In most instances, you can apply for SSI benefits and Supplemental Nutrition Assistance Program (SNAP) benefits several months before you expect to be released from prison or jail. See the SSI spotlight on the [Prerelease Procedure](#).

SOMEONE WHO IS IN A PUBLIC INSTITUTION

If you are in any institution for a whole month that is run by a Federal, State or local government, you are not eligible for SSI for that month unless an exception applies such as residence in a public emergency shelter for the homeless or publicly operated community residence. If you expect to leave the institution, you may use the prerelease procedure described in the SSI spotlight on the [Prerelease Procedure](#).

SOMEONE WHO GIVES AWAY RESOURCES

If you give away a resource or sell it for less than it is worth in order to reduce your resources below the SSI resource limit, you may be ineligible for SSI for up to 36 months.

SOMEONE WHO IS A NON-CITIZEN SSI RECIPIENT WHO FAILS TO MEET THE ALIEN STATUS REQUIREMENTS

- If you are receiving SSI as a non-citizen and you lose your status as an eligible alien, you are not eligible to receive SSI. For example, your SSI will stop if you lose your status as a [qualified alien](#) because there is an active warrant for your deportation or removal from the U.S.
- If you are a [qualified alien](#) but you no longer meet one of the [conditions](#) that allow SSI eligibility for [qualified aliens](#), then your SSI benefits will stop.

SOMEONE WHO IS AN SSI RECIPIENT WHO IS ABSENT FROM THE U.S. FOR A FULL CALENDAR MONTH OR FOR 30 CONSECUTIVE DAYS OR MORE

Except for certain students temporarily abroad for study purposes or a child of military parents stationed overseas, an individual is not eligible for SSI benefits for any month during all of which he or she has been outside the U.S. Once an individual has been outside the U.S. for 30 consecutive days or longer, he or she must be back in the U.S. for 30 consecutive days to be eligible for SSI benefits.

SUPPLEMENTAL SECURITY INCOME (SSI) APPLICATION PROCESS AND APPLICANTS' RIGHTS

HOW TO APPLY FOR SSI BENEFITS

You can apply for SSI benefits by:

- Visiting SSA's [Apply Online for Disability Benefits](#) website to start the disability application process online. You may be eligible to apply for SSI through the online disability application.
- Calling SSA at 1-800-772-1213 (or TTY 1-800-325-0778 if you are deaf or hard of hearing) and making an appointment to apply for SSI benefits. If you are deaf or hard of hearing, SSA also will take your telecommunications relay services (TRS) assisted calls at 1-800-772-1213. With an appointment, one of SSA's representatives will help you apply for benefits. You can have an appointment to apply for SSI benefits on the telephone or in person at your local Social Security office.
- Having someone else call and make the appointment for you or assist you with your application for SSI. For more information, see our chapter on [HOW SOMEONE CAN HELP YOU WITH YOUR SSI](#); **or**
- Visiting your local Social Security office to apply without making an appointment, but please anticipate a longer wait time.

You will have to provide information and work with SSA to get [documents](#) concerning SSI [eligibility](#).

WHEN TO APPLY

Apply as soon as possible so that you do not lose benefits that may be owed to you. SSA cannot pay SSI benefits for time periods earlier than the effective date of your application.

If you call SSA to make an appointment to apply and you file an application within 60 days of the call, SSA may use the date of your call as your application filing date (i.e. Your "Protective Filing Date").

If you do not keep this appointment and you do not contact SSA to reschedule the appointment, SSA will try to contact you. If SSA does not get in touch with you to reschedule the appointment, SSA will send you a letter. The letter will say that if you file an application within 60 days from the date of the letter, SSA will use the date of your original contact with us as your SSI application date.

If you are in a public institution but you will be leaving within a few months, you may not be eligible for SSI until you leave. You may, however, be able to apply before you leave so that

SSI benefits can begin quickly after you leave. Check with the institution and contact SSA about filing an application under the "prerelease procedure."

If you are a disabled youth in foster care, eligibility for foster care payments in most States ends when you attain age 18. You may need the income support and health services that result from SSI eligibility to ease the transition to independent living. To help with this transition, SSA may accept an SSI application from you up to 180 days before your foster care eligibility ends due to age.

YOU HAVE THE RIGHT TO APPLY

- Anyone may apply for SSI.
- There is no charge to apply.

YOU HAVE THE RIGHT TO RECEIVE HELP FROM SOCIAL SECURITY

SSA will complete the application forms for you based on information you give to them.

SSA will help you get [documents](#) you need to show that you meet the SSI [eligibility](#) requirements.

If you are applying because you have a [disability or are blind](#) and SSA decides that the medical information needed to make a determination is not available from existing sources, SSA will pay for you to have a medical exam or test performed by a doctor and make the appointment for you. If you need a medical exam or test, you must go to the exam or test before they can determine whether you are eligible to receive SSI. In some circumstances SSA may also pay your travel costs to get to this exam or test.

YOU HAVE THE RIGHT TO A REPRESENTATIVE

You may appoint someone as your representative to help you with your SSI claim and go with you to your appointment(s) with us.

YOU HAVE THE RIGHT TO A NOTICE

SSA will notify you in writing of any decision about your SSI eligibility or change in benefit amount. SSA will also send copies of all notices to your representative if you have one. Each notice about your eligibility or change in benefit amount will explain your [appeal rights](#).

YOU HAVE THE RIGHT TO EXAMINE YOUR FILE

You or your appointed representative may request and examine or get a copy of the information in your case file. Also, you or your representative may review and copy the laws, regulations and policy statements used in deciding your case at www.ssa.gov/ssi/ssi-law-regs.htm.

YOU HAVE THE RIGHT TO APPEAL

You may appeal most determinations SSA makes about your eligibility for SSI or changes they make in your benefit amount.

SUPPLEMENTAL SECURITY INCOME (SSI) WORK INCENTIVES

WHAT ARE WORK INCENTIVES?

One of SSA's highest priorities is to help people with disabilities achieve independence by helping them take advantage of employment opportunities. Work incentive employment supports help disabled and blind SSI recipients go to work by minimizing the risk of losing their SSI or Medicaid benefits.

Some incentives allow SSA to not count some of your income or resources.

Other incentives let you continue to receive Medicaid coverage even though you are not receiving SSI cash benefits.

You may be entitled to take advantage of more than one work incentive program. Depending on the types of income you receive, it will change the amount SSA does not count and the SSI benefit amount.

For more information about work incentives, visit the SSA website at www.ssa.gov/disabilityresearch/workincentives.htm and www.ssa.gov/redbook.

EARNED INCOME EXCLUSION

SSA does not count the first \$65 of earned income plus one-half of the amount over \$65. Therefore, SSA reduces your SSI benefit only \$1 for every \$2 you earn over \$65.

STUDENT EARNED INCOME EXCLUSION

If you are a student under age 22, as explained on [trusts](#), SSA may exclude up to \$1,870 of gross earnings in a month (but not more than \$7,550 in calendar year 2019) in figuring your countable income.

IMPAIRMENT-RELATED WORK EXPENSES

If you are [disabled](#), SSA may exclude from your earned income any out-of-pocket expenses you pay for certain items and services that relate to your disability that you need in order to work as long as the cost is reasonable. It does not matter if you also use these items and services for non-work activities. For example, SSA can deduct the costs of co-pays, medications, counseling services, car modifications, assistive technology that people with disabilities use for employment-related purposes; such as software applications, computer support services, and special tools which have been specifically designed to accommodate the person's impairment or attendant care services.

SSA calls these expenses impairment-related work expenses (IRWE), and can deduct the cost of them as long as the cost is "reasonable", that is, it represents the standard charge for the item or

service in your community. However, if somebody reimburses you for these expenses, SSA cannot exclude them from your earned income.

SSA will exclude IRWE from your earned income when SSA figures your SSI monthly payment amount. This means your SSI benefit could go up.

SSA may also consider these items when they figure your earnings in order to decide if you are doing substantial work. SSA only looks at [Substantial gainful activity](#) (SGA) when you first apply for SSI. If you are receiving SSI and go to work, SGA is not an issue. However, SSA does have to figure your countable income.

For more information, see the SSI Spotlight on [Impairment-Related Work Expense](#).

WORK EXPENSES FOR BLIND PERSONS

If you are [blind](#), SSA will deduct any part of your earned income that you spend to be able to work (such as for transportation, taxes, or special equipment) from the amount of income SSA uses to figure your SSI benefit. The expense does not have to be related to your blindness.

PLAN TO ACHIEVE SELF-SUPPORT (PASS)

If you are blind or have a disability, you may set up a plan to set aside income or resources to meet expenses for reaching an employment goal. You may also exclude part of your ineligible spouse's income and resources.

If you are a child living with your parent(s), you may also exclude part of your parents' income and resources.

Unlike impairment-related work expenses, you may use a PASS to exclude unearned income and resources as well as earned income and use that money to meet the expenses of reaching your occupational goal.

SSA does not count income or resources set aside under a PASS when figuring the SSI benefit amount. You cannot use your SSI payment to pay the expenses necessary to reach your occupational goal. This is because you must use the SSI to pay ordinary living expenses.

You can use a PASS to establish, maintain, or increase SSI benefits.

See the SSI Spotlight on [Plans to Achieve Self-Support](#) (PASS).

TICKET TO WORK

The Ticket to Work and Work Incentive Improvement Act of 1999 (Public Law 106-170) provides several important opportunities for people ages 18 through 64 who receive Social

Security disability or SSI benefits and who want to go to work or increase their earnings. To find out more about this program, see the SSA website www.ssa.gov/work.

One of the opportunities provided by this law is the “Ticket” program. The Ticket program is available in all States. Under the Ticket program, you may be eligible to receive free employment services from an approved employment support service provider of your choice. The SSA term for an approved service provider is an “employment network.” Or you can choose to work with your State Vocational Rehabilitation Agency.

The employment network will work with you to come up with a plan designed to help you reach your work goals. SSA pays the employment networks for helping you achieve certain earnings-related milestones and outcomes; there is no cost to you. The ultimate goal is to help you find a good job, a good career and a better self-supporting future.

While you are participating in the Ticket program, we will not conduct regularly scheduled continuing disability reviews to see if your disabling condition has improved.

Under the Ticket to Work legislation, beneficiaries who are interested in returning to work can also receive free benefits counseling from Work Incentive Planning and Assistance (WIPA) projects. WIPA projects are community-based organizations that will help you understand the employment supports that are available to you, how work will affect your benefits, and enable you to make informed choices about work.

Another provision of the Ticket to Work legislation is the Protection and Advocacy for Beneficiaries of Social Security (PABSS) program. PABSS organizations are located in all states and territories and serve beneficiaries who want to work by helping to remove barriers to employment. PABSS organizations assist beneficiaries with understanding employment rights, reasonable accommodations, and can assist with complaints about an employment network or your State Vocational Rehabilitation Agency.

You can find a list of employment networks in your area and other information on this program at: www.ssa.gov/work or by calling 1-866-968-7842 (TTY 1-866-833-2967). (<https://yourtickettowork.ssa.gov>)

MEDICAID BUY-IN

Another provision of the Ticket to Work and Work Incentive Improvement Act of 1999 (see above) expands the States' options under the Medicaid buy-in program for working individuals with disabilities.

- States can cover working individuals with disabilities who are at least age 16, but less than 65 years of age using income and resource limits set by the State; and
- States can provide Medicaid to employed individuals covered under the group described above, who lose that coverage due to medical improvement, but who still have a medically determinable severe impairment.

The Social Security Administration and the Centers for Medicare & Medicaid Services (CMS) are encouraging States to participate in this program.

HOW TO APPLY

To apply for assistance under this rule, you should contact the State medical assistance (Medicaid) office in your area to find out if your State participates or plans to participate.

BENEFIT CONTINUATION FOR PEOPLE WHO WORK SECTION 1619(a) OF THE SOCIAL SECURITY ACT

[Section 1619\(a\)](#) provides that, even if you are working at or above the [SGA](#) level, you may be able to continue to receive cash payments and Medicaid benefits. Your benefits will not necessarily stop just because of work. To qualify, you must have been eligible for an SSI payment for at least one month before you begin working at the SGA level; you must still be disabled; and you must meet all other eligibility rules, including the income and resource tests.

MEDICAID WHILE WORKING: SECTION 1619(b) OF THE SOCIAL SECURITY ACT

[Section 1619\(b\)](#) provides that, in most cases, even if your earned income (after the applicable exclusions) is too high to permit an SSI cash benefit, you may still be eligible for Medicaid as long as you need Medicaid in order to work and your earnings are under a “threshold” amount. <https://www.ssa.gov/disabilityresearch/wi/1619b.htm>. In certain cases you can have an individual threshold amount. See www.ssa.gov/redbook/index.html for more information about individualized thresholds.

For more information, see the SSI Spotlight on [Continued Medicaid Eligibility for People Who Work](#).

REINSTATEMENT WITHOUT REAPPLYING

If you are eligible for Medicaid under [Section 1619\(b\)](#), you remain eligible for SSI and may begin receiving cash benefits again without a new SSI application if your earnings drop.

SSI AND EXTRA HELP WITH MEDICARE PRESCRIPTION DRUG COVERAGE

If you receive SSI and you have Medicare you are automatically eligible for prescription drug coverage and Extra Help with your prescription drug coverage costs. You will not be required to file a separate application. You will be able to select a prescription drug plan. If you do not select a plan on your own, Medicare will enroll you in a plan with no premium to make sure you get help paying for your prescription drugs. You can join, switch, or drop a Medicare prescription drug plan at any time.

If you need information about Medicare prescription drug plans or how to enroll in a plan, visit www.medicare.gov/part-d/ or call **1-800-MEDICARE(1-800-633-4227)**. TTY users can call **1-877-486-2048**. You also can request information about your State Health Insurance Assistance Program (SHIP). SHIP is a national program that offers free help with your Medicare questions.

SPECIAL BENEFITS FOR SOME INSTITUTIONALIZED BENEFICIARIES

If you are eligible under [Section 1619](#) of the Social Security Act and you enter a medical institution, you are eligible for a regular SSI benefit for up to 2 months.

EXPEDITED REINSTATEMENT (EXR) OF BENEFITS

EXR is a safety net for people who successfully return to work and lose their entitlement to SSI benefits and payments. If your cash payment ended because of your work and earnings, and you stop work within 5 years of when your benefits ended, SSA may be able to start your benefits again.

EXR allows you to receive up to 6 months of temporary cash benefits while SSA conducts a medical review to determine whether it can reinstate your benefits. You may also be eligible for Medicaid during this provisional benefit period. To get payments while SSA makes its decision and to meet the reinstatement requirements, your previous SSI eligibility must have terminated because of excess earned income or a combination of earned and unearned income, and you must:

- Be “not able” or “become unable” to work at the SGA level due to your medical condition;
- Be “not able” or become unable” to perform SGA in the month of the EXR request;
- have a current impairment(s) that is the same as, or related to, your original disabling impairment(s); and
- request EXR within 5 years from the month your benefits stopped.

Please also see the SSA section on [EXPEDITED REINSTATEMENT](#).

EFFECT OF WORK ON MEDICAL REVIEW

Effective January 1, 2002, Social Security will not conduct a continuing disability review of a disabled beneficiary based on work activity alone. This provision applies to SSI recipients who have received Social Security disability benefits for at least 24 months. This provision does not apply to SSI only beneficiaries. If you receive SSI only, we will conduct regularly scheduled medical reviews, unless you are using your Ticket to Work. As long as you are using your Ticket to Work, participating in the program, and making progress toward your vocational goals we will not conduct a medical review. For more information, please see our section on the [TICKET TO WORK](#) program.

CONTINUATION OF BENEFITS AFTER MEDICAL CESSATION (SECTION 301 BENEFITS)

You may continue getting SSI benefits even after SSA determines that your disability or blindness ceased if you are participating in:

- a program under the Ticket to Work Program;
- an approved Plan to Achieve Self-Support (PASS);
- an approved program of vocational rehabilitation services, employment services, or other support services; or
- an approved educational or training program;

And

- SSA determines that your completion or continuation in the program for a specified period of time, will increase the likelihood that you will successfully return to the workforce and no longer require disability or blindness benefits.

In addition, if you are a student aged 18 through 21, you may continue getting SSI benefits after SSA determines that your disability or blindness ceased if you are participating in an Individual Education Plan (IEP) with an approved educational institution.

MEDICAID BUY-IN PROGRAM FOR WORKING PEOPLE WITH DISABILITIES

What is Medicaid Buy-in?

Medicaid Buy-in is designed to provide Medicaid to working people with disabilities who, because of relatively high earnings, cannot qualify for Medicaid under one of the other provisions.

Who Is Eligible?

States are allowed to provide Medicaid to these individuals by creating a new optional eligibility group.

Although some States may have more liberal income limits, in most States individuals may become eligible if:

- they are in a family whose **net** income is less than 250 percent of the national poverty guideline for a family of the size involved (for example, the 2019 Federal Poverty Guideline for a family of 3 is \$21,330, so the limit for this program would be \$53,325); and
- except for their earnings, they would be considered eligible for SSI; this includes meeting the definition of disability; and
- they meet all other SSI [income](#) and [resource](#) limits.

Each State determines its own definition of a “family.” All SSI exclusions apply to the determination of family income, including the earned income exclusions.

Individuals are not required to have been receiving SSI benefits to be eligible for this Medicaid Buy-in provision. However, the State must make a disability determination if an individual was not an SSI recipient. [SGA](#) (wages or self-employment) is not a consideration when States make this determination.

EXAMPLE:

The 2019 Federal Poverty Guideline for an individual is \$12,490. The net income limit for Medicaid Buy-in for an individual is income of less than 250 percent of \$11,880, that is, less than \$31,225.

For example, if Joe Green's annual income is earnings of \$42,765, he meets the net income limit (after the SSI earned income exclusions) and is eligible for Medicaid Buy-in if his State participates (as long as he meets all other [eligibility factors](#) for SSI benefits).

\$42,765.00 earnings divided by 12 months = \$ 3,563.75

\$3,563.75	monthly earnings
<u>- \$85.00</u>	general and earned income exclusion
\$3,478.75	
<u>- \$1,739.38</u>	exclusion of half remaining earned income
\$1,739.37	monthly countable income, or \$20,872.44 a year.

In this example, Mr. Green's net income of \$20,872 is below 250 percent of the poverty guideline for an individual (less than \$31,225).

Are There Premiums? States are allowed (but not required) to charge eligible individuals premiums or other cost-sharing charges. These charges may be set on a sliding scale based on income. Each State makes the decision about the premiums or other cost-sharing charges.

How do I get more information? To find out more about Medicaid in your State, call your State medical assistance (Medicaid) office. You may find information on how to contact your State Medicaid office on the Centers for Medicare & Medicaid Services website at www.medicaid.gov/medicaid/by-state/by-state.html

To find out if your State has a Medicaid Buy-in plan, contact your State Medicaid office.

HOW TO FIND OUT MORE

Most Social Security offices have a Work Incentive Liaison (WIL) who works with outside organizations that serve disabled and blind people. Please contact your local office for the name and telephone number of the WIL.

Also available to provide assistance are Area Work Incentives Coordinators (AWIC). AWICs are experienced employment support experts who:

- Coordinate and/or conduct public outreach on work incentives in their local areas;
- Provide and/or coordinate and oversee training on SSA's employment support programs for all personnel at local Social Security offices;
- Handle sensitive or high profile disability work-issue cases, if necessary; and
- Monitor the disability work-issue workloads in their areas.

Information on how to contact your local AWIC is available at <https://www.ssa.gov/redbook/eng/resources-supports.htm#a0=1>.

For more information on work incentives, see the SSI Spotlights on:

- [Impairment-Related Work Expenses](#);
- [Special SSI Rule for Blind People Who Work](#);
- [Individual Development Accounts](#);
- [Plans to Achieve Self-Support](#);
- [Property You Need for Self-Support](#);
- [Student Earned Income Exclusion](#)>; and

- [Continued Medicaid Eligibility for People Who Work: Section 1619\(b\)](#).

The "Red Book" (a summary guide to employment supports), is available online at:www.ssa.gov/redbook/.

The Red Book is also available on audiocassette, Braille, large print, and CD. It contains additional information on both SSI and Social Security disability work incentives. In addition, the above site, along with www.ssa.gov/work, provide information on our efforts to help people with disabilities enter the workforce in employment or self-employment. There are sections about vocational rehabilitation programs, employment support, legislation, employment programs, health care for people with disabilities, and much more.

SUPPLEMENTAL SECURITY INCOME REPORTING

WHO REPORTS INCOME?

- If you receive SSI benefits, you must report any earnings from work or any other money or help that you, your spouse or children living in your household receive.
- If you are the representative payee for an adult who receives SSI benefits, you must report any income that the individual, his or her spouse, or children living in the recipient's household receive.

If you are the parent, stepparent, or representative payee for a child under age 18 who receives SSI benefits, you must report any income that the child, his or her parent(s), stepparent, or brother(s) or sister(s) receive.

WHAT INCOME TO REPORT

EARNINGS FROM WORK

- Any jobs
- When work starts
- Amount of pay
- How often paid
- When work stops
- Changes to your amount of pay
 - When you contact SSA, ask how to report money earned from work over the telephone.

Submit pay stubs, a copy of the Federal income tax return for self-employed individuals.

OTHER MONEY OR HELP

- Any money or help received by family members who live with the person who receives SSI
- Type of money or help (see reverse for examples)
- Amount of money or help
- How often payments are received
- When the payment or help changes or ends

Submit an award letter or proof of other monies or help.

WHERE AND WHEN TO REPORT INCOME

- Call SSA's toll-free number at 1-800-772-1213.
- Your local Social Security office.
- For the deaf or hearing-impaired, call TTY 1-800-325-0778.

- Report new income or any change in income as soon as it happens, but no later than the 10th day of the month following the change. For example, if work begins May 22, report immediately, but no later than June 10.

You or a representative payee, on your behalf, must report income received by you, your spouse, and/or your child from the following sources:

- Wages – including overtime and bonuses
- Net Earnings from Self-Employment
- Federal, State or Local Help Based on Need
- Refugee Cash Help
- Temporary Help for Needy Families
- General Help
- Bureau of Indian Affairs Income
- Disaster Relief
- Military Allowance and Pay
- Military Pension
- Veterans Benefits
- Office of Personnel Management Benefits
- Private Pension
- Foreign Pension
- Black Lung Benefits
- Railroad Retirement Benefits
- Civil Service Benefits
- Unemployment Compensation
- Workers' Compensation
- State Disability Payments
- Insurance or Annuity Payments
- Interest or Dividends
- Royalties
- Gifts
- Rental/Lease Income
- Lottery/Gambling Winnings/Prizes
- Alimony
- Child Support
- Settlements and Awards, including Court -Ordered Awards
- Proceeds of a Life Insurance Policy
- Inheritance of Cash or Property
- Social Security Benefits
- Strike Pay or Other Union Benefits

- If someone gives you food or free housing
- If someone helps pay for your food, utilities, rent, or mortgage
- Any Other Income or Help Not Mentioned

For more information on SSI, see SSA's official 2019 120-page "Understanding Supplemental Security Income" pamphlet at the following link: <https://www.ssa.gov/pubs/EN-17-008.pdf>

The [Understanding SSI](#) booklet provides comprehensive general information about SSI eligibility requirements and processes. Written especially for SSI advocates, but also useful for the general public, it addresses a broad range of topics, from applying for benefits to reporting events that may change the payment of benefits. Please check out its "Table of Contents" for a list of these topics.

See also: [SSI Spotlights](#) are a series of 27 fact sheets about a variety of SSI topics, e.g., living arrangements, and are designed to supplement the guidelines in [Understanding SSI](#) (see above). You may link directly to each of the spotlights, or you may link to them from the text of the guidelines.

In addition, Spanish versions of the spotlights are available at [Puntos Importantes de Seguridad de Ingreso Suplementario \(SSI\)](#).

Social Security Disability Insurance

To qualify for Social Security disability insurance (SSDI) benefits, you must first have worked in jobs covered by Social Security. Then you must have a medical condition that meets Social Security's [definition of disability](#). In general, SSA pays monthly benefits to people who are unable to work for a year or more because of a disability.

Benefits usually continue until you are able to work again on a regular basis. There are also a number of special rules, called "work incentives," that provide continued benefits and health care coverage to help you make the transition back to work.

If you are receiving Social Security disability benefits when you reach [full retirement age](#), your disability benefits automatically convert to retirement benefits, but the amount remains the same.

How Much Work Do You Need?

In addition to meeting SSA's [definition of disability](#), you must have worked long enough — and recently enough — under Social Security to qualify for disability benefits.

Social Security [work credits](#) are based on your total yearly wages or self-employment income. You can earn up to four credits each year.

[The amount needed for a work credit changes from year to year](#). In 2019, for example, you earn one credit for each \$1,360 in wages or self-employment income. When you've earned \$5,440, you've earned your four credits for the year.

The number of work credits you need to qualify for disability benefits depends on your age when you become disabled. Generally, you need 40 credits, 20 of which were earned in the last 10 years ending with the year you become disabled. However, [younger workers may qualify with fewer credits](#).

For more information on whether you qualify, read SSA's publication: [How You Earn Credits](#).

Remember that whatever your age, you must have earned the required number of work credits within a certain period ending with the time you become disabled. If you qualify now but you stop working under Social Security, you may not continue to meet the disability work requirement in the future.

What SSA Means By Disability

The definition of disability under Social Security is different than other programs such as Medicaid and Veteran's Affairs. Social Security pays only for total disability. **No benefits are payable for partial disability or for short-term disability.**

SSA considers you disabled under Social Security rules if:

- You cannot do work that you did before;

- SSA decides that you cannot adjust to other work because of your medical condition(s); **and**
- Your disability has lasted or is expected to last for at least one year or to result in death.

This is a strict definition of disability. Social Security program rules assume that working families have access to other resources to provide support during periods of short-term disabilities, including workers' compensation, insurance, savings, and investments.

How SSA Decides If You Are Disabled

If you have enough work to qualify for disability benefits, they use a step-by-step process involving five questions. They are:

1. Are you working?

If you are working in 2019 and your earnings average more than \$1,220 a month, or \$2,040 for blind applicants, you generally cannot be considered disabled.

If you are not working, SSA will send your application to the [Disability Determination Services](#) (DDS) office that will make the decision about your medical condition. The DDS uses Steps 2-5 below to make the decision.

2. Is your condition "severe"?

Your condition must significantly limit your ability to do basic work such as lifting, standing, walking, sitting, and remembering – for at least 12 months. If it does not, SSA will find that you are not disabled.

If your condition does interfere with basic work-related activities, we go to Step 3.

3. Is your condition found in the list of disabling conditions?

For each of the major body systems, SSA maintains a [list of medical conditions](#) that SSA considers so severe that it prevents a person from completing substantial gainful activity. If your condition is not on the list, SSA has to decide if it is as severe as a medical condition that is on the list. If it is, SSA will find that you are disabled. If it is not, SSA then goes to Step 4.

SSA has two initiatives designed to expedite its processing of new disability claims:

- [Compassionate Allowances](#): Certain cases that usually qualify for disability can be allowed as soon as the diagnosis is confirmed. Examples include acute leukemia, Lou Gehrig's disease (ALS), and pancreatic cancer.
 - Compassionate Allowances are a way to quickly identify diseases and other medical conditions that, by definition, meet Social Security's standards for

disability benefits. These conditions primarily include certain cancers, adult brain disorders, and a number of rare disorders that affect children. The CAL initiative helps us reduce waiting time to reach a disability determination for individuals with the most serious disabilities.

The Compassionate Allowances program identifies claims where the applicant's disease or condition clearly meets Social Security's statutory standard for disability. By incorporating cutting-edge technology, the agency can easily identify potential Compassionate Allowances to quickly make decisions. Social Security Administration (SSA) uses the same rules to evaluate CAL conditions when evaluating both Social Security Disability Insurance (SSDI) or Supplemental Security Income (SSI) programs.

- For a list of conditions covered by Compassionate Allowances, see the following link: <https://www.ssa.gov/compassionateallowances/conditions.htm>
- [Quick Disability Determinations](#): We use sophisticated computer screening to identify cases with a high probability of allowance.

For more information about SSA's disability claims process, visit our [Benefits For People With Disabilities](#) website.

Listing Of Impairments

The Listing of Impairments describes, for each major body system, impairments considered severe enough to prevent an individual from doing any gainful activity (or in the case of children under age 18 applying for SSI, severe enough to cause marked and severe functional limitations). Most of the listed impairments are permanent or expected to result in death, or the listing includes a specific statement of duration. For all other listings, the evidence must show that the impairment has lasted or is expected to last for a continuous period of at least 12 months. The criteria in the Listing of Impairments are applicable to evaluation of claims for disability benefits under the Social Security disability insurance program or payments under the SSI program.

Part A of the Listing of Impairments contains medical criteria that apply to the evaluation of impairments in adults age 18 and over. The medical criteria in [Part A](#) may also be applied in evaluating impairments in children under age 18 if the disease processes have a similar effect on adults and younger children.

Part B of the Listing of Impairments contains additional medical criteria that apply only to the evaluation of impairments of persons in children under age 18. Certain criteria in Part A do not give appropriate consideration to the particular effects of the disease processes in childhood; that is, when the disease process is generally found only in children or when the disease process differs in its effect on children and adults. Additional criteria are included in [Part B](#), and the impairment categories are, to the extent possible, numbered to maintain a relationship with their

counterparts in Part A. In evaluating disability for child under age 18, part B will be used first. If the medical criteria in part B do not apply, then the medical criteria in part A will be used.

The criteria in the Listing of Impairments apply only to one step of the multi-step sequential evaluation process. At that step, the presence of an impairment that meets the criteria in the Listing of Impairments (or that is of equal severity) is usually sufficient to establish that an individual who is not working is disabled. However, the absence of a listing-level impairment does not mean the individual is not disabled. Rather, it merely requires the adjudicator to move on to the next step of the process and apply other rules in order to resolve the issue of disability.

4. Can you do the work you did previously?

At this step, SSA decides if your medical impairment(s) prevents you from performing any of your past work. If it doesn't, SSA will decide that you don't have a qualifying disability. If it does, SSA proceeds to Step 5.

5. Can you do any other type of work?

If you can't do the work you did in the past, SSA looks to see if there is other work you could do despite your impairment(s).

SSA considers your medical conditions and your age, education, past work experience, and any transferable skills you may have. If you can't do other work, SSA will decide you are disabled. If you can do other work, SSA will decide that you don't have a qualifying disability and your claim will be denied.

Special Situations

Most people who receive disability benefits are workers who qualify on their own records and meet the work and disability requirements we have just described. However, there are some situations you may not know about:

- [If You're Blind Or Have Low Vision - How We Can Help](#)
- [If You Are The Worker's Widow Or Widower](#)
- [Benefits For A Disabled Child](#)
- [Benefits for Wounded Warriors & Veterans](#)

Special Rules For People Who Are Blind Or Have Low Vision

SSA considers you to be legally blind under Social Security rules if your vision cannot be corrected to better than 20/200 in your better eye or if your visual field is 20 degrees or less, even

with a corrective lens. Many people who meet the legal definition of blindness still have some sight and may be able to read large print and get around without a cane or a guide dog.

If you do not meet the legal definition of blindness, you may still qualify for disability benefits if your vision problems alone or combined with other health problems prevent you from working.

There are a number of special rules for people who are blind that recognize the severe impact of blindness on a person's ability to work. For example, the monthly earnings limit for people who are blind is generally higher than the limit that applies to non-blind disabled workers.

In 2019, the monthly earnings limit is \$2,040.

Benefits For Disabled Widows Or Widowers

If something happens to a worker, benefits may be payable to their widow, widower, or surviving divorced spouse with a disability if the following conditions are met:

- He or she is between ages 50 and 60;
- Their condition meets the [definition of disability](#) for adults; and
- The disability started before or within seven years of the worker's death.

If a widow or widower who is caring for the worker's children receives Social Security benefits, he or she is still eligible for disabled widow's or widower's benefits if their disability starts before those payments end or within seven years after they end.

Widows, widowers, and surviving divorced spouses cannot apply online for survivors benefits. However, if they want to apply for benefits, they should [contact Social Security immediately](#) at **1-800-772-1213** to request an appointment. (If they are deaf or hard of hearing, they should call our TTY number at **1-800-325-0778**.)

If they are disabled, they can speed up the application process if they complete an [Adult Disability Report](#) and have it available at the time of their appointment.

We use the same [definition of disability](#) for widows and widowers as we do for workers.

Benefits For A Disabled Child

A child under age 18 may be disabled, but SSA doesn't need to consider the child's disability when deciding if he or she qualifies for benefits as your dependent. The child's benefits normally stop at age 18 unless he or she is a full-time student in an elementary or high school (benefits can continue until age 19) or is disabled.

Adults Disabled Before Age 22

An adult disabled before age 22 may be eligible for child's benefits if a parent is deceased or starts receiving retirement or disability benefits. SSA considers this a "child's" benefit because it is paid on a parent's Social Security earnings record.

The "adult child"—including an adopted child, or, in some cases, a stepchild, grandchild, or step grandchild—must be unmarried, age 18 or older, have a disability that started before age 22, and meet the definition of disability for adults.

Example: A worker starts collecting Social Security retirement benefits at age 62. He has a 38-year old son who has had cerebral palsy since birth. The son will start collecting a disabled "child's" benefit on his father's Social Security record.

It is not necessary that the adult child ever worked. Benefits are paid based on the parent's earnings record.

- An adult child must not have substantial earnings. The amount of earnings we consider "substantial" increases each year. In 2019, this means working and earning more than \$1,220 a month.

Certain expenses the adult child incurs in order to work may be excluded from these earnings. For more information about work and disability, refer to [*Working While Disabled: How We Can Help*](#).

What if the adult child is already receiving SSI benefits or disability benefits on his or her own record?

An adult child already receiving SSI benefits or disability benefits on his or her own record should still check to see if benefits may be payable on a parent's earnings record. Higher benefits might be payable and entitlement to Medicare may be possible.

How does SSA decide if an adult "child" is disabled for SSDI benefits?

If a child is age 18 or older, SSA will evaluate his or her disability the same way we would evaluate the disability for any adult. SSA sends the application to the Disability Determination Services in your state that completes the disability decision for it.

What happens if the adult child gets married?

If he or she receives benefits as an adult disabled since childhood, the benefits generally end if he or she gets married. However, some marriages (for example, to another adult disabled child) are considered protected.

The rules vary depending on the situation. Contact a Social Security representative at **1-800-772-1213** (If you are deaf or hard of hearing, call TTY number at **1-800-325-0778**) to find out if the benefits can continue.

At this time, you cannot apply for disabled adult child's benefits online. If you wish to file for benefits, contact Social Security immediately at 1-800-772-1213 to request an appointment. (If you are deaf or hard of hearing, call our TTY number at 1-800-325-0778.) If you delay, some potential benefits could be lost.

If they are disabled, they can speed up the application process if they complete an [Adult Disability Report](#) and have it available at the time of their appointment.

WORK CREDITS REQUIRED FOR SOCIAL SECURITY DISABILITY

Social Security Credits

Credits are the "building blocks" SSA uses to find out whether you have the minimum amount of covered work to qualify for each type of Social Security benefit. For most people, the minimum number is 40 credits. If you stop working before you have enough credits to qualify for benefits, your credits will stay on your record. If you return to work later on, more credits will be added. No benefits can be paid if you do not have enough credits.

If you do not have at least 40 credits, you are not currently entitled to a retirement benefit, but you may become entitled with additional work. Read SSA's publication, "[How You Earn Credits](#)," for more information.

Also, if you are not entitled to retirement benefits based on your own work record, you may still be entitled to benefits on the work record of a current or divorced spouse. For more information:

- Read SSA's publication on "[Survivors Benefits](#)," if your spouse (or ex-spouse) is deceased, or
- Visit our "[Benefits For You As A Spouse](#)" page.

SSA has a variety of calculators to help you plan for the future and for what you may need now. Learn more at the [calculations page](#).

How Credits Are Earned

The way you earn a credit has changed over the years. Currently, when you work and pay Social Security taxes, you earn up to a maximum of four "credits" per year.

Before 1978, employers reported your earnings every 3 months and we called credits "quarters of coverage," or QCs. Back then, you got a QC or credit if you earned at least \$50 in a 3-month calendar quarter.

In 1978, employers started reporting your earnings just once a year. Credits are now based on your total wages and self-employment income throughout the year, no matter when during the year you did the work. You might work all year to earn four credits, or you might earn enough for all four in a much shorter length of time.

The amount of earnings it takes to earn a credit may change each year. In 2019, you must earn \$1,360 in covered earnings to get one Social Security or Medicare work credit and \$5,440 to get the maximum four credits for the year.

During your lifetime, you will probably earn more credits than the minimum number you need to be eligible for benefits. These extra credits do not increase your benefit amount. The average of your earnings over your working years, not the number of credits you earn, determines how much your monthly payment will be.

Read our publication, "[How You Earn Credits](#)," for more information.

Number Of Credits Needed For Retirement Benefits

The number of work credits you need to get retirement benefits depends on your date of birth.

If you were born in 1929 or later, you need 40 credits (10 years of work). People born before 1929 need fewer than 40 credits (39 credits if born in 1928; 38 credits if born in 1927; etc.).

Number Of Credits Needed For Disability Benefits

The number of work credits needed for disability benefits depends on your age when you become disabled. Generally, you need 40 credits, 20 of which being earned in the last 10 years ending with the year you become disabled. However, younger workers may qualify with fewer credits.

These are the rules; if you become disabled:

- **Before age 24** - You may qualify if you have 6 credits earned in the 3-year period ending when your disability starts.
- **Age 24 to 31** - You may qualify if you have credit for working half the time between age 21 and the time you become disabled. For example, if you become disabled at age 27, you would need credit for 3 years of work (12 credits) out of the past 6 years (between ages 21 and 27).
- **Age 31 or older** - Find your age below to learn the number of work credits needed.

Born after 1929, Became Disabled At Age	Number of Credits You Need
31 through 42	20
43	21
44	22
45	23
46	24
47	25
48	26
49	27
50	28
51	29
52	30
53	31
54	32
55	33
56	34
57	35
58	36
59	37

60	38
61	39
62 or older	40

Number Of Credits Needed For Survivors Benefits

The number of credits needed for family members to be eligible for survivors benefits depends on your age when you die. The younger you are, the fewer credits needed, and nobody needs more than 40 credits (10 years of work).

Under a special rule, we can pay benefits to your children and your spouse who is caring for your children even if your record doesn't have the number of credits needed. They can get benefits if you have credits for one and one-half year's work (6 credits) in the three years just before your death.

If you are already receiving retirement or disability benefits at the time of your death, we will pay your survivors based on that entitlement. We will not have to determine your credits again.

THE APPEALS PROCESS

Social Security wants to be sure that every decision made about your disability or Supplemental Security Income (SSI) application is correct. SSA carefully considers all the information in your case before it makes any decisions that affect your eligibility or your benefit amount. When SSA makes a decision on your claim, it will send you a letter explaining its decision. If you do not agree with its decision, you can appeal — that is, ask it to look at your case again. When you ask for an appeal, SSA will look at the entire decision, even those parts that were in your favor. If SSA's decision was wrong, it will change it.

When and how can I appeal?

If you were recently denied Social Security benefits for medical or non-medical reasons, you may request an appeal. Your request must be in writing and received within 60 days of the date you receive the letter containing our decision. You can call SSA and ask for the appeal form (Form SSA-561). The fastest and easiest way to file an appeal of your decision is by visiting www.socialsecurity.gov/disability/appeal. You can file online and provide documents electronically to support your appeal. You can file an appeal online even if you live outside of the United States.

How many appeal levels are there?

Generally, there are four levels of appeal. They are:

- **Reconsideration**
- **Hearing by an administrative law judge**
- **Review by the Appeals Council;** and
- **Federal Court review.**

When SSA sends you a letter about a decision on your application, they will tell you how to appeal the decision.

- **Reconsideration** - A reconsideration is a complete review of your claim by someone who did not take part in the first decision. We will look at all the evidence submitted when the original decision was made, plus any new evidence. Most reconsiderations involve a review of your files without the need for you to be present. But when you appeal a decision that you are no longer eligible for disability benefits because your medical condition has improved, you can meet with a Social Security representative and explain why you believe you still have a disability.
- **Hearing by an Administrative Law Judge** – If you disagree with the reconsideration decision, you may ask for a hearing. The hearing will be conducted by an administrative law judge who had no part in the original decision or the reconsideration of your case. The hearing is usually held within 75 miles of your home. The administrative law judge will notify you of the time and place of the hearing. Before the hearing, SSA will likely ask you to give us more evidence and to clarify information about your claim. You may look at the information in your file and give new information. At the hearing, the administrative law judge will question you and any witnesses you bring. Other witnesses, such as medical or vocational experts, also may give us information at the hearing. You or your representative may question the witnesses. In certain situations, we may hold your hearing by a video conference rather than in person. We will let you know ahead of time if this is the case. With video hearings, we can make the hearing more convenient for you. Often an appearance by video hearing can be scheduled faster than an in-person appearance. Also, a video hearing location may be closer to your home. That might make it easier for you to have witnesses or other people accompany you. It is usually to your advantage to attend the hearing (in person or video conference). You and your representative, if you have one, should come to the hearing and explain your case. If you are unable to attend a hearing or do not wish to do so, you must tell SSA why in writing as soon as you can. Unless the administrative law judge believes your presence is necessary to decide your case and requires you to attend, you will not have to go. Or SSA may be able to make other arrangements for you, such as

changing the time or place of your hearing. You have to have a good reason for us to make other arrangements.

After the hearing, the judge will make a decision based on all the information in your case, including any new information you give. SSA will send you a letter and a copy of the judge's decision.

- **Appeals Council** – If you disagree with the hearing decision, you may ask for a review by Social Security's Appeals Council. SSA will be glad to help you ask for this review. The Appeals Council looks at all requests for review, but it may deny a request if it believes the hearing decision was correct. If the Appeals Council decides to review your case, it will either decide your case itself or return it to an administrative law judge for further review. If the Appeals Council denies your request for review, we will send you a letter explaining the denial. If the Appeals Council reviews your case and makes a decision itself, SSA will send you a copy of the decision. If the Appeals Council returns your case to an administrative law judge, SSA will send you a letter and a copy of the order.
- **Federal Court** – If you disagree with the Appeals Council's decision or if the Appeals Council decides not to review your case, you may file a lawsuit in a federal district court. The letter we send you about the Appeals Council's action also will tell you how to ask a court to look at your case.

Will my benefits continue?

In some cases, you may ask us to continue paying your benefits while SSA makes a decision on your appeal.

You can ask for your benefits to continue when:

- You are appealing our decision that you can no longer get Social Security disability benefits because your medical condition is not disabling; or
- You are appealing our decision that you are no longer eligible for SSI payments or that your SSI payment should be reduced or suspended. If you want your benefits to continue, you must tell us within 10 days of the date you receive our letter. If your appeal is turned down, you may have to pay back any money you were not eligible to receive.

Can someone help me?

Yes. Many people handle their own Social Security appeals with free help from Social Security. But you can choose a lawyer, a friend, or someone else to help you. Someone you appoint to help you is called your “representative.” SSA will work with your representative just as we would work with you. Your representative can act for you in most Social Security matters and will receive a copy of any decisions we make about your application. Your representative cannot charge or collect a fee from you without first getting written approval from Social Security. If you want more information about having a representative, ask for Your Right To Representation (Publication No. 05-10075) or you can find it on our website.

What You Need to Know When You Get Social Security Disability Benefits

About your benefits

When your payments start

Under the law, your payments can’t begin until you’ve been disabled for at least five full months. Payments usually start with your sixth month of disability. When Social Security tells you that you’ll be receiving disability benefit payments, the notice explains how much your disability benefit will be, and when your payments start. NOTE: If your family members are eligible for benefits based on your work, they’ll receive a separate notice and booklet.

How long payments continue

Generally, your disability benefits will continue as long as your medical condition has not improved and you can’t work. Benefits won’t necessarily continue indefinitely. Because of advances in medical science and rehabilitation techniques, many people with disabilities recover from serious accidents and illnesses. SSA will likely review your case periodically to make sure you still have a qualifying disability.

You’re responsible for telling SSA if:

- There’s any change in your ability to work;
- You return to work; or
- Your medical condition improves.

If you disagree with a decision we make

If you have any questions about your payment amount, or any other information SSA may send to you, please contact us. If you were recently denied Social Security benefits for medical or

non-medical reasons, you may request an appeal. Your request must be in writing and received within 60 days of the date you receive the letter containing our decision. You can call us and ask for the appeal form (Form SSA-561). The fastest and easiest way to file an appeal of your decision is by visiting www.socialsecurity.gov/disability/appeal. You can file online and provide documents electronically to support your appeal. You can file an appeal online even if you live outside of the United States. If you still aren't satisfied, there are further steps you can take. Read *Your Right to Question the Decision Made on Your Claim* (Publication No. 05-10058).

When and how your benefits are paid

Social Security benefits are paid each month. Generally, the day on which you receive your benefit depends on the birth date of the person on whose work record you receive benefits. For example, if you receive benefits as a retired or disabled worker, your benefit will be determined by your birth date. If you receive benefits as a spouse, your benefit payment date will be determined by your spouse's birth date.

Electronic payments

If you applied for benefits on or after May 1, 2011, you must receive your payments electronically. If you didn't sign up for electronic payments when you applied, SSA strongly urges you to do it now. Direct deposit is a simple, safe, and secure way to receive your benefits. Contact your bank to help you sign up. Or, you can sign up for direct deposit by contacting SSA. Another option is the Direct Express® card program. With Direct Express®, deposits from federal payments are made directly to the card account. Signing up for a card is quick and easy. Call the toll-free Treasury Electronic Payment Solution Contact Center at 1-800-333-1795. Or, sign up online at www.GoDirect.org. Also, Social Security can help you sign up.

If you receive your checks by mail

If your check is not delivered on its due date, wait three workdays before reporting the missing check to us. The most common reason checks are late is because a change of address wasn't reported. If your check is ever lost or stolen, contact us immediately. Your check can be replaced, but it takes time.

To be safe, you should cash or deposit your check as soon as possible after you receive it. You shouldn't sign your check until you are at the place where you'll cash it. If you sign the check ahead of time and lose it, the person who finds it could cash it. A government check must be

cash within 12 months after the date of the check, or it'll be void. After a year, if you're still entitled to the payment, we'll replace the voided check.

Returning benefits not due

If you receive a check that you know isn't due, take it to any Social Security office, or return it to the U.S. Treasury Department at the address on the check envelope. You should write VOID on the front of the check and enclose a note telling why you're sending the check back. If you have direct deposit and receive a payment you should not have gotten, call or visit your Social Security office. SSA will tell you how you can return it. If you knowingly accept payments that aren't due to you, you may face criminal charges.

Paying taxes on your benefits

Some people who get Social Security have to pay taxes on their benefits. About one-third of our current beneficiaries pay taxes on their benefits. You'll be affected only if you have substantial income in addition to your Social Security benefits.

- If you file a federal tax return as an "individual," and your income is more than \$25,000, you have to pay taxes.
- If you file a joint return, you may have to pay taxes, if you and your spouse have a combined income that is more than \$32,000.
- If you're married and file a separate return, you'll probably pay taxes on your benefits.

For more information, contact the Internal Revenue Service.

How we will contact you

Generally, SSA uses the mail or call you on the phone when it wants to contact you, but sometimes a Social Security representative may come to your home. SSA's representative will show you identification before talking about your benefits. For your protection, call the Social Security office to ask if someone was sent to see you before you let the representative into your home.

Cost-of-living adjustments

Each January, your benefits will increase automatically if the cost of living has gone up. For example, if the cost of living has increased by 2 percent, your benefits also will increase by 2 percent. If you receive your benefits by direct deposit, we'll notify you in advance of your new

benefit amount. If you receive your benefits by check, we'll include a notice explaining the cost-of-living adjustment with your check.

When you reach full retirement age

If you're receiving Social Security disability benefits, your disability benefits automatically convert to retirement benefits, but the amount remains the same.

If you also receive a reduced widow(er)'s benefit, be sure to contact Social Security when you reach full retirement age so that we can make any necessary adjustment in your benefits.

A word about Medicare

After you receive disability benefits for 24 months, you'll be eligible for Medicare. You will get information about Medicare several months before your coverage starts. If you have permanent kidney failure requiring regular dialysis or a transplant or you have amyotrophic lateral sclerosis (Lou Gehrig's disease), you may qualify for Medicare almost immediately.

Help for low-income Medicare beneficiaries

If you get Medicare and have low income and few resources, your state may pay your Medicare premiums and, in some cases, other "out-of-pocket" medical expenses such as deductibles and coinsurance. Only your state can decide if you qualify. To find out if you do, contact your state or local welfare office or Medicaid agency. Also, more information is available from the Centers for Medicare & Medicaid Services by calling the Medicare, toll-free number, 1-800-MEDICARE(1-800-633-4227). If you're deaf or hard of hearing, you may call TTY 1-877-486-2048.

Supplemental Nutrition Assistance Program

You might be able to get help through the Supplemental Nutrition Assistance Program (SNAP), formerly known as food stamps. Visit www.fns.usda.gov/snap to find out how to apply. For more information, read Nutrition Assistance Programs (Publication No. 05-10100) or Supplemental Nutrition Assistance Program Facts (Publication No. 05-10101).

What you must report to us

Please notify us promptly by phone, mail, or in person whenever a change occurs that could affect your benefits. Family members receiving benefits based on your work also should report

events that might affect their payments. Information you give to another government agency may be provided to Social Security by the other agency, but you also must report the change directly to us.

NOTE: If we find that you gave us false information on purpose, your benefits will be stopped. For the first violation, your benefits will be stopped for six months; for the second violation, 12 months; and for the third, 24 months. Also, if you don't report a change, it may result in your being paid too much. If you're overpaid, you'll have to repay the money.

Have your claim number handy when you report a change. If you receive benefits based on your own work, your claim number is the same as your Social Security number followed by the letters "HA." If you receive benefits on someone else's work, your claim number will be the other person's Social Security number followed by a different letter. The award notice you received when your benefits started shows your claim number. You also should be prepared to give the date of the change, and, if different, the name of the person about whom the report is made. If you work while receiving disability payments. You should tell SSA if you take a job or become self-employed, no matter how little you earn. Please let SSA know how many hours you expect to work, and when your work starts or stops. If you still have a qualifying disability, you'll be eligible for a trial work period, and you can continue receiving benefits for up to nine months. Also, tell SSA if you have any special work expenses because of your disability (such as specialized equipment, a wheelchair or even prescription drugs), or if there's any change in the amount of those expenses. If you receive other disability benefits, Social Security benefits for you and your family may be reduced if you also are eligible for workers' compensation (including payments through the black lung program) or for disability benefits from certain federal, state, or local government programs.

You must tell us if:

- You apply for another type of disability benefit;
- You receive another disability benefit or a lump-sum settlement; or
- Your benefits change or stop.

If you're offered services under the Ticket to Work program

Social Security may send you a "ticket" that you can use to get services to help you go to work or earn more money. You may take the "ticket" to your state vocational rehabilitation agency or to an employment network of your choice. Employment networks are private organizations that

have agreed to work with Social Security to provide employment services to beneficiaries with disabilities.

Your participation in the Ticket to Work program is voluntary, and we provide the services to you at no cost. For more information, ask us for a copy of Your Ticket to Work (Publication No. 05-10061).

If you move

When you plan to move, tell SSA your new address and phone number as soon as you know them. Also, please let SSA know the names of any family members who are getting benefits and who are moving with you. Even if you receive your benefits by direct deposit, SSA must have your correct address so we can send letters and other important information to you. Your benefits will be stopped if SSA is unable to contact you. You can change your address with a mySocial Security account. To create a mySocial Security account, visit, www.socialsecurity.gov/myaccount. Be sure you also file a change of address with your post office.

If you change direct deposit accounts

If you change financial institutions, or open a new account, be sure to say that you want to sign up for direct deposit. You also can change your direct deposit online if you have a mySocial Security account. To create a mySocial Security account, visit www.socialsecurity.gov/myaccount. Or, SSA can change your direct deposit information over the telephone. Have your new and old bank account numbers handy when you call SSA. They'll be printed on your personal checks or account statements. Changing this information takes SSA about 30-60 days. Don't close your old account until you make sure your Social Security benefits are being deposited into the new account.

If you're unable to manage your benefits

Sometimes people are unable to manage their money. When this happens, Social Security should be notified. We can arrange to send benefits to a relative or other person who agrees to use the money to take care of the person for whom the benefits are paid. We call the person who manages someone else's benefits a "representative payee." For more information, read A Guide for Representative Payees (Publication No. 05-10076). NOTE: People who have "power of attorney" for someone don't automatically qualify to be the person's representative payee.

If you get a pension from work not covered by Social Security

If you start receiving a pension from a job for which you didn't pay Social Security taxes — for example, from the federal civil service system, some state or local pension systems, nonprofit organizations, or a foreign government — your Social Security benefit may be reduced. Also, tell SSA if the amount of your pension changes.

If you get married or divorced

If you get married or divorced, your Social Security benefits may be affected, depending on the kind of benefits you receive. If your benefits are stopped because of marriage or remarriage, they may be started again if the marriage ends

If you get:

Your own disability benefits

Then:

Your benefits will continue.

If you get:

Spouse's benefits

Then:

Your benefits will continue if you get divorced, and you are age 62 or over, unless you were married less than 10 years.

If you get:

Disabled widow's or widower's benefits (including disabled divorced widow's and widower's benefits)

Then

Your benefits will continue if you remarry when you are age 50 or older.

If you get

Any other kind of benefits

Then

Generally, your benefits will stop when you get married. Your benefits may be started again if the marriage ends

If you change your name

If you change your name — by marriage, divorce or court order — you need to tell SSA right away. If you don't give SSA this information, your benefits will be issued under your old name and, if you have direct deposit, payments may not reach your account. If you receive checks, you may not be able to cash them if your identification is different from the name on your check.

If you care for a child who receives benefits

If you receive benefits because you are caring for a disabled worker's child who is younger than age 16 or disabled, you should notify SSA right away if the child leaves your care. You must give SSA the name and address of the person with whom the child is living. A temporary separation may not affect your benefits if you continue to have parental control over the child, but your benefits will stop if you no longer have responsibility for the child. If the child returns to your care, we can start sending your benefits to you again.

Your benefits usually stop when the youngest, unmarried child in your care reaches age 16, unless the child is disabled.

If you have an outstanding warrant for your arrest

You must tell SSA if you have an outstanding arrest warrant for any of the following felony offenses:

- Flight to avoid prosecution or confinement;
- Escape from custody; and
- Flight-escape.

You can't receive regular disability benefits, or any underpayments you may be due, for any month in which there is an outstanding arrest warrant for any of these felony offenses.

If you're convicted of a crime

Tell Social Security right away if you're convicted of a crime. Regular disability benefits, or any underpayments that may be due, aren't paid for the months a person is confined for a crime, but any family members who are eligible for benefits based on that person's work may continue to receive benefits.

Monthly benefits or any underpayments that may be due usually aren't paid to someone who commits a crime, and who is confined to an institution by court order and at public expense.

If you violate a condition of parole or probation

You must tell SSA if you're violating a condition of your probation or parole imposed under federal or state law. You can't receive regular disability benefits or any underpayment that may be due for any month in which you violate a condition of your probation or parole.

If a beneficiary dies

Let SSA know if a person receiving Social Security benefits dies. Benefits aren't payable for the month of death. That means if the person died any time in July, for example, the check received in August (which is payment for July) must be returned. If direct deposit is used, also notify the financial institution of the death as soon as possible so it can return any payments received after death.

Family members may be eligible for Social Security survivors benefits when a person getting disability benefits dies.

Benefits for children

If you're receiving benefits on behalf of a child, there are important things you should know about his or her benefits.

When a child reaches age 18

A child's benefits will stop the month before the child turns age 18, unless the child is disabled or is a full-time elementary or secondary school student and unmarried. About three months before the child's 18th birthday, you'll get a letter explaining how benefits can continue. SSA will also send a letter to the child and a student form. If your child's benefits stopped at age 18, benefits may start again if he or she becomes disabled before reaching age 22 or if he or she

becomes a full-time elementary or secondary school student before reaching age 19. The student must contact us to reapply for benefits.

If your 18-year-old child is still in school

An 18-year-old can receive benefits until age 19 if he or she continues to be a full-time elementary or secondary school student. When your child's 19th birthday occurs during a school term, benefits usually can continue until completion of the term, or for two months following the 19th birthday, whichever comes first. You should tell SSA immediately if your child marries, is convicted of a crime, drops out of school, changes from full-time to part-time attendance, is expelled, suspended, or changes schools. You should also tell SSA if your child has an employer who is paying for your child to attend school. In general, a student can keep receiving benefits during a vacation period of four months or less if he or she plans to go back to school full time at the end of the vacation.

If your child is disabled

Your child can continue to receive benefits after age 18 if he or she has a disability that begins before age 22. Your child also may qualify for SSI disability benefits. Contact SSA for more information.

Reviewing your medical condition

Any person who receives disability benefits must have their medical conditions reviewed from time to time. SSA calls this review a “continuing disability review.” If evidence shows that your condition has medically improved and you can return to work, your disability benefits may stop.

Frequency of continuing disability reviews

How often your medical condition is reviewed depends on how severe your condition is and how likely it is to improve. Your initial award notice will tell you when you can expect your first medical review.

- **Medical improvement expected** — If your condition is expected to improve within a specific time, your first review will be six to 18 months after you started getting disability benefits.
- **Improvement possible** — If improvement in your medical condition is possible, we’ll review your case about every three years.
- **Improvement not expected** — If your medical condition is unlikely to improve, we’ll review your case about every five to seven years.

What happens during a continuing disability review?

We’ll send a letter to you telling you that we’re conducting a medical review. Soon after you receive the notice, someone from your local Social Security office will contact you to explain the review process and your appeal rights. The Social Security representative will ask you to provide information about your medical treatment and any work that you may have done since you started receiving disability benefits.

A team consisting of a disability examiner and a doctor will review your case and request your medical reports. If needed, SSA may ask you to have a special examination. SSA will pay for this examination and some of your transportation costs. When SSA makes a medical decision, it will send you a letter. If SSA decides that you still have a qualifying disability, your benefits will continue. If SSA decides you no longer have a qualifying disability and you disagree with its decision, you may file an appeal. If you decide not to appeal the medical decision, your benefits will stop three months after SSA decides that your disability ended.

What happens when my claim is approved?

SSA will send a letter to you telling you your application is approved, the amount of your monthly benefit, and the effective date. Your monthly disability benefit is based on your average lifetime earnings. Your first Social Security disability benefits will be paid for the sixth full month after the date your disability began.

Here is an example: If the state agency decides your disability began on January 15, your first disability benefit will be paid for the month of July. Social Security benefits are paid in the month following the month for which they are due, so you'll receive your July benefit in August.

Medicare

What is Medicare?

Medicare is our country's health insurance program for people age 65 or older. People younger than age 65 with certain disabilities, or permanent kidney failure, or amyotrophic lateral sclerosis (Lou Gehrig's disease), can also qualify for Medicare. The program helps with the cost of health care, but it doesn't cover all medical expenses or the cost of most long-term care. You have choices for how you get Medicare coverage. If you choose to have original Medicare coverage, you can buy a Medicare supplement policy (called Medigap) from a private insurance company to cover some of the costs that Medicare does not.

A portion of the payroll taxes paid by workers and their employers cover most Medicare expenses. Monthly premiums, usually deducted from Social Security checks also cover a portion of the costs.

The Centers for Medicare & Medicaid Services is the agency in charge of the Medicare program. But, you apply for Medicare at Social Security, and SSA can give you general information about the Medicare program.

Medicare has four parts

Medicare Part A (hospital insurance) helps pay for inpatient care in a hospital or skilled nursing facility (following a hospital stay).

- Part A also pays for some home health care, and hospice care.

Medicare Part B (medical insurance) helps pay for services from doctors and other health care providers, outpatient care, home health care, durable medical equipment, and some preventive services.

Medicare Part C (Medicare Advantage) includes all benefits and services covered under Part A and Part B. Some plans include Medicare prescription drug coverage (Medicare Part D) and other extra benefits and services.

Medicare Part D (Medicare prescription drug coverage) helps cover the cost of prescription drugs.

You can get more details about what Medicare covers from Medicare & You (Publication No. CMS-10050). To get a copy, call the toll-free number or go to the Medicare website, www.medicare.gov.

A word about Medicaid

You may think Medicaid and Medicare are the same, but they're two different programs. Medicaid is a state-run program that provides hospital and medical coverage for people with low income. Each state has its own rules about who's eligible, and what Medicaid covers. Some people qualify for both Medicare and Medicaid. For more information about the Medicaid program, contact your local medical assistance agency or social services office.

Who can get Medicare?

Before age 65, you are eligible for Medicare Part A (hospital insurance) at no cost if:

- You've been entitled to Social Security disability benefits for 24 months; or
- You receive a disability pension from the railroad retirement board and meet certain conditions; or
- You receive Social Security disability benefits because you have Lou Gehrig's disease (amyotrophic lateral sclerosis); or
- You worked long enough in a government job through which you paid Medicare taxes, and you have met the requirements of the Social Security disability program for 24 months; or
- You're the child or widow(er) age 50 or older, including a divorced widow(er), of a worker who has worked long enough under Social Security or in a Medicare-covered government job, and you meet the requirements of the Social Security disability program; or
- You have permanent kidney failure and you receive maintenance dialysis or a kidney transplant and—You're eligible for or receive monthly benefits under Social Security or the railroad retirement system; or—You've worked long enough in a Medicare-covered government job; or—You're the child or spouse (including a divorced spouse) of a worker (living or deceased) who has worked long enough under Social Security or in a Medicare-covered government job.

Medicare Part B (medical insurance)

Anyone who's eligible for Medicare Part A at no cost can enroll in Medicare Part B by paying a monthly premium. Some people with higher incomes will pay a higher monthly Part B premium.

You can only sign up for Part B during designated enrollment periods. If you don't enroll in Part B when you're first eligible for it, you may have to pay a late enrollment penalty for as long as you have Part B coverage.

Medicare Part C (Medicare Advantage plans)

If you receive your Part A and Part B benefits directly from the government, you have original Medicare. If you receive your benefits from a Medicare Advantage organization or other private company approved by Medicare, you have a Medicare Advantage plan. Many of these plans provide extra coverage and may lower your out-of-pocket costs.

If you have Medicare Parts A and B, you can join a Medicare Advantage plan. With these plans, you can't have a Medigap policy, because Medicare Advantage plans cover many of the same benefits a Medigap policy covers. This includes benefits like extra days in the hospital after you've used days that Medicare covers.

Medicare Advantage plans include:

- Medicare coordinated-care plans;
- Medicare preferred provider organization plans;
- Medicare private fee-for-service plans; and
- Medicare specialty plans.

If you decide to join a Medicare Advantage plan, you use the health card that you get from your Medicare Advantage plan provider for your health care. Also, you might have to pay a monthly premium for your Medicare Advantage plan because of the extra benefits it offers. You can enroll in a Medicare Advantage plan during your initial enrollment period (as explained under Signing up for Medicare on page 8), the first time you're eligible for Medicare. You can also enroll during the annual Medicare open enrollment period from October 15 – December 7 each year. The effective date for the enrollment is January 1 of the upcoming year. There are also special enrollment periods for some situations.

Medicare Part D (Medicare prescription drug coverage)

Anyone who has Medicare Part A or Part B is eligible for Part D (Medicare prescription drug coverage). Part D benefits are available as a stand-alone plan or built into Medicare Advantage. The drug benefits work the same in either plan. Joining a Medicare prescription drug plan is voluntary, and you pay an extra monthly premium for the coverage. Some beneficiaries with higher incomes will pay a higher monthly Part D premium.

If you don't enroll in a Medicare drug plan when you're first eligible, you may pay a late enrollment penalty if you join a plan later. You'll have to pay this penalty for as long as you have Medicare prescription drug coverage. However, you won't pay a penalty if you have Extra Help (see below), or another creditable prescription drug plan. To be creditable, the coverage must pay, on average, at least as much as Medicare's standard prescription coverage.

You can enroll during your initial enrollment period (as explained under Signing up for Medicare on page 8), the first time you're eligible for Medicare. You can also enroll during the annual Medicare open enrollment period from October 15 – December 7 each year. The effective date for the enrollment is January 1 of the upcoming year. There are also special enrollment periods for some situations.

Help for some low-income people

If you can't afford to pay your Medicare premiums and other medical costs, you may be able to get help from your state. States offer programs for people entitled to Medicare who have low income. Some programs may pay for Medicare premiums and some pay Medicare deductibles and coinsurance. To qualify, you must have Medicare Part A and have limited income and resources. You can go online to get more information about these programs from the Centers for Medicare & Medicaid Services website. Visit www.medicare.gov and find the tab titled, "Your Medicare Costs" and find "Get help paying costs." You can also visit www.medicare.gov/publications to read Get Help With Your Medicare Costs: Getting Started (Publication No. CMS-10126).

Only your state can decide if you qualify for help under these programs. To find out, contact your state or local medical assistance (Medicaid) agency, social services, or welfare office.

You may also be able to get Extra Help paying for the annual deductibles, monthly premiums, and prescription co-payments related to the Medicare prescription drug program (Part D). You may qualify for Extra Help if you have limited income (tied to the federal poverty level) and limited resources. These income and resource limits usually change each year, and you can contact us for the current numbers.

You automatically qualify and don't need to apply for Extra Help if you have Medicare and meet one of the following conditions:

- Have full Medicaid coverage;
- Have Supplemental Security Income (SSI); or
- Take part in a state program that pays your Medicare premiums.

For more information about getting help with your prescription drug costs, call Social Security's toll-free number or visit our website. You can also apply online at www.socialsecurity.gov/extrahelp.

Signing up for Medicare

When should I apply?

If you're already getting Social Security benefits, or railroad retirement checks, SSA will send you information a few months before you become eligible for Medicare. If you live in one of the 50 states, Washington, D.C., the Northern Mariana Islands, Guam, American Samoa, or the U.S. Virgin Islands, we'll automatically enroll you in Medicare Parts A and B. However, because you must pay a premium for Part B coverage, you can choose to turn it down.

After you enroll in Medicare, you'll receive a red, white, and blue Medicare card showing whether you have Part A, Part B or both. Keep your card in a safe place so you'll have it when you need it. If your card is lost or stolen, you can apply for a replacement card online by setting up a mySocial Security account at www.socialsecurity.gov/myaccount, or call Social Security's toll-free number. You'll also receive a Medicare & You handbook (Publication No. CMS-10050) that describes your Medicare benefits and plan choices.

Choices for receiving health services

Medicare beneficiaries can have choices for getting health care services. You can get more information about your health care choices from the following publications:

- Medicare & You (Publication No. CMS-10050) — CMS mails this guide to people after they enroll in Medicare and sends them an updated version each year after that.
- Choosing a Medigap Policy: A Guide to Health Insurance for People with Medicare (Publication No. CMS-02110) — This guide describes how other health insurance plans supplement Medicare and offers some shopping hints for people looking at those plans.

To get a copy of these publications, visit www.medicare.gov/publications, or call the toll-free number, 1-800-MEDICARE (1-800-633-4227). If you're deaf or hard of hearing, call TTY 1-877-486-2048.

If you have other health insurance

Medicare Part A (hospital insurance) is free for almost everyone. You have to pay a monthly premium for Medicare Part B (medical insurance). If you already have other health insurance when you become eligible for Medicare, is it worth the monthly premium cost to sign up for Part B? The answer varies with each person and the kind of other health insurance you have. Although we can't give you "yes" or "no" answers, we can offer information that can help you decide. SSA can also advise if you'll be subject to a late enrollment penalty if you delay signing up.

If you have a private insurance plan

Get in touch with your insurance agent to see how your private plan fits with Medicare Part B. This is especially important if you have family members who have coverage under the same policy. And remember, just as Medicare doesn't cover all health services, most private plans don't either. In planning your health insurance coverage, keep in mind that most nursing home care isn't covered by Medicare or private health insurance policies. One important word of caution: For your own protection, do not cancel any health insurance you now have until your Medicare coverage begins.

If you have insurance from an employer-provided group health plan

By law, group health plans of employers with 20 or more employees have to offer current workers and their spouses who are age 65 (or older) the same health benefits as younger workers. If you or your spouse are still working and covered under an employer-provided group health plan, talk to the personnel office before signing up for Medicare Part B.

If you have a Health Savings Account (HSA)

If you have an HSA when you sign up for Medicare, you can't contribute to your HSA once your Medicare coverage begins. If you contribute to your HSA after your Medicare coverage starts, you may have to pay a tax penalty. If you'd like to continue contributing to your HSA, you shouldn't apply for Medicare, Social Security, or Railroad Retirement Board (RRB) benefits.

If you have health care protection from other plans

If you have TRICARE (insurance for active-duty, military retirees, and their families), your health benefits can change or end when you become eligible for Medicare. This applies for any reason, regardless of age or place of residence. If you're retired from the military or are a military retiree's family member, you must enroll in Part A and Part B when first eligible to keep TRICARE coverage. You can find a military health benefits adviser at <https://milconnect.dmdc.osd.mil>, or call the Defense Manpower Data Center, toll-free at 1-800-538-9552 (TTY 1-866-363-2883) before you decide whether to enroll in Medicare medical insurance (Part B). If you have health care protection from the Indian Health Service, Department of Veterans Affairs, or a state medical assistance program, contact those offices to help you decide if it's to your advantage to have Medicare Part B.

IMPORTANT: If you have VA coverage and don't enroll in Part B when you're first eligible, you may have to pay a late enrollment penalty for as long as you have Part B coverage. Also, you may have to wait to enroll, which will delay this coverage.

For more information on how other health insurance plans work with Medicare, visit www.medicare.gov/publications to view the booklet Medicare and Other Health Benefits: Your

Guide to Who Pays First (Publication No. CMS-02179), or call the Medicare toll-free number, 1-800-MEDICARE(1-800-633-4227). If you're deaf or hard of hearing, call TTY 1-877-486-2048.

Overpayments

An overpayment occurs when Social Security pays you more than you should've been paid. If this happens, SSA will notify you and your representative payee, if you have one. SSA's notice will explain why you've been overpaid, your repayment options, and your appeal and waiver rights. You should read the notice carefully.

Options for repaying

If you agree that you've been paid too much, and that the overpayment amount is correct, you have options for repaying it. If you're receiving Social Security benefits, SSA will withhold the full amount of your benefit each month, unless you ask for a lesser withholding amount, and SSA approves your request. Full withholding would start 30 days after we notify you of the overpayment. If you're receiving Supplemental Security Income (SSI), generally SSA will withhold 10 percent of the maximum federal benefit rate each month. If you can't afford this, you may ask that SSA takes less from your benefit each month. Or, you may ask to pay back the overpayment at a rate greater than 10 percent. SSA doesn't start deducting money from your SSI payments until at least 60 days after we notify you of the overpayment. If you no longer receive SSI, but you do receive Social Security, you can pay back your SSI overpayment by having up to 10 percent of your monthly Social Security benefit withheld.

If you aren't receiving benefits, you should:

- Send a check to Social Security for the entire amount of the overpayment within 30 days;
- Visit your local Social Security Field Office to make a payment using a check, money order, debit, or credit card; or
- Contact us to set up a plan to pay back the amount in monthly installments.

If you aren't receiving benefits, and you don't pay the amount back, SSA can recover the overpayment from your federal income tax refund or from your wages if you're working. Also, SSA can recover overpayments from future SSI or Social Security benefits. It will also report the delinquency to credit bureaus.

Appeal and waiver rights

If you don't agree that you've been overpaid, or if you believe the amount is incorrect, you can appeal by filing form SSA-561. You can get the form online, by calling SSA, or visiting your local office. Your appeal must be in writing.

You should explain why you think you haven't been overpaid, or why you think the amount is incorrect. You have 60 days from the date you received the original overpayment notice to file an

appeal. We assume you got this letter five days after the date on it, unless you show us that you didn't get it within the five-day period. You must have a good reason for waiting more than 60 days to ask for an appeal. If you believe you shouldn't have to pay the money back, you can request that we waive collection. You must submit form SSA-632, which you can get online, by calling us, or visiting your local office. There's no time limit for filing a waiver.

You'll have to prove that:

- The overpayment wasn't your fault; **and**
- Paying it back would cause you financial hardship or would be unfair for some other reason.

SSA may ask you to give us proof of your income and expenses. SSA also may ask you to meet with one or more of its representatives. If so, your attendance at this meeting is important. SSA will stop recovering the overpayment until we make a decision on your request for an appeal or waiver.

How Workers' Compensation and Other Disability Payments May Affect Your Benefits

Disability payments from private sources, such as private pensions or insurance benefits, don't affect your Social Security disability benefits. Workers' compensation and other public disability benefits, however, may reduce your Social Security benefits. Workers' compensation benefits are paid to a worker because of a job-related injury or illness. They may be paid by federal or state workers' compensation agencies, employers, or by insurance companies on behalf of employers. Other public disability payments that may affect your Social Security benefit are those paid by a federal, state, or local government and are for disabling medical conditions that are not job-related. Examples are civil service disability benefits, state temporary disability benefits, and state or local government retirement benefits that are based on disability.

If you receive workers' compensation or other public disability benefits, AND Social Security disability benefits, the total amount of these benefits can't exceed 80 percent of your average current earnings before you became disabled.

Some public benefits don't affect your Social Security disability benefits.

If you receive Social Security disability benefits, and one of the following types of public benefits, your Social Security benefit will not be reduced:

- Veterans Administration benefits;
- State and local government benefits, if Social Security taxes were deducted from your earnings;

or

- Supplemental Security Income (SSI).

Figuring the reduction

Your monthly Social Security disability benefits, including benefits payable to your family members, are added together with your workers' compensation or other public disability payment. If the total amount of these benefits exceeds 80 percent of your average current earnings, the excess amount is deducted from your Social Security benefit. Example: Before you became disabled, your average earnings were \$4,000 a month. You, your spouse, and your two children would be eligible to receive a total of \$2,200 a month in Social Security disability benefits. You also receive \$2,000 a month from workers' compensation. Because the total amount of benefits you would receive (\$4,200) is more than 80 percent (\$3,200) of your average current earnings (\$4,000), your family's Social Security benefits will be reduced by \$1,000 (\$4,200 - \$3,200). Your Social Security benefit will be reduced until the month you reach age 65, or the month your other benefits stop, whichever comes first. Starting December 19, 2015, due to

a change in the law, your benefits will continue to be reduced until you reach your full retirement age.

How we determine your average current earnings

SSA uses different formulas to calculate your average current earnings. Which formula it uses depends on your specific circumstances.

Be sure to report changes

If there is a change in the amount of your other disability payment, or if those benefits stop, let SSA know. Tell SSA if the amount of your workers' compensation or other public disability payment increases or decreases. Any change in the amount of these benefits is likely to affect the amount of your Social Security benefits.

If you get a lump-sum disability payment

If you get a lump-sum workers' compensation or other disability payment in addition to, or instead of a monthly benefit, the amount of the Social Security benefits you and your family receive may be affected. Let SSA know right away if you receive a lump-sum disability payment.

How to Correct Your Social Security Earnings Record

If you're 18 years old or older, you can create a mySocial Security account. At www.socialsecurity.gov/myaccount, you can get your Social Security Statement to check your earnings record, and see estimates of future retirement, disability, and survivor benefits. You should check your account carefully to be sure it shows the correct amount you earned each year and to make sure your name and date of birth are correct.

Why is it important for my earnings record to be correct?

The amount of the Social Security benefit you or your family receive depends on the amount of earnings shown on your record. If all of your earnings are not shown on your record, this could mean lower Social Security benefits for you or your family.

How could earnings be missing?

If the earnings missing from your Social Security record are for the current year or last year, you don't need to worry. Because these earnings are recent, SSA may not have recorded them yet. They should appear on a later Statement.

However, earnings could be missing from your record for earlier years for one of the following reasons:

- Your employer reported your earnings using the wrong name or Social Security number.
- Your employer reported your earnings incorrectly.
- You got married or divorced and changed your name, but never reported the change to Social Security.
- You worked using a Social Security number that didn't belong to you.

What should I do if earnings are missing?

If you discover earnings missing from your record, the first thing you should do is find some proof of those earnings.

This proof could be:

- A W-2 form (Wage and Tax Statement);
- A tax return;

- A wage stub or pay slip;
- Your own wage records; or
- Other documents showing you worked.

If you can't find any written documents that show your earnings, try to remember the following facts, and write them down:

- Where you worked;
- The name of your employer;
- The dates you worked;
- How much you earned; and
- The name and Social Security number you used when you worked.

How can Social Security help?

After you've gathered your documents or made a list of all of the information you can remember, contact Social Security. SSA will work with you to correct your record. This process could take some time, depending on the information you bring to us about your missing earnings. SSA may have to contact your employers or have you contact them.

Cost of Living Adjustment

Social Security and Supplemental Security Income (SSI) benefits are adjusted to reflect the increase, if any, in the cost of living as measured by the Consumer Price Index for Urban Wage Earners and Clerical Workers (CPI-W) prepared by the Bureau of Labor Statistics (BLS). The purpose of the cost-of-living adjustment (COLA) is to ensure that the purchasing power of Social Security and SSI benefits is not eroded by inflation.

To determine the COLA, the average CPI-W for the third calendar quarter of the most recent year a COLA was determined is compared to the average CPI-W for the third calendar quarter of the current year. The resulting percentage increase, if any, represents the percentage that will be used to increase Social Security benefits beginning for December of the current year. SSI benefits increase by the same percentage the following month (January). If the increase in the CPI-W is at least one-tenth of one percent (0.1 percent), there will be a COLA. However, if the CPI-W increases by less than 0.05 percent, or if the CPI-W decreases, there won't be a COLA.

Effect on Medicare Part B Premium

Unlike the Social Security COLA, the CPI-W plays no part in the computation of the Medicare Part B premium. The Medicare Part B premium changes each year, if necessary, so that the Part B premium is sufficient to fund approximately 25 percent of the projected cost of the Part B program. Any such premium change is effective in January.

Your Right to Representation

You can have a representative, such as an attorney or non-attorney, help you when you do business with Social Security. SSA will work with your representative, just as it has with you. For your protection, in most situations, your representative can't charge or collect a fee from you without first getting written approval from SSA. However, your representative may accept money from you in advance as long as they hold it in a trust or escrow account. Both you and your representative are responsible for providing us with accurate information. It is illegal to provide false information knowingly or willfully. If you do, you may face criminal prosecution.

What a representative can do

Once you appoint a representative, he or she can act on your behalf before Social Security by:

- Getting information from your Social Security file;
- Helping you get medical records or information to support your claim;
- Coming with you, or for you, to any interview, conference, or hearing you have with us;
- Requesting a reconsideration, hearing, or Appeals Council review; and
- Helping you and your witnesses prepare for a hearing and questioning any witnesses. Your representative will also receive a copy of the decision(s) we make on your claim(s).

Choosing a representative

You can choose an attorney or other qualified individual to represent you. You can also have more than one representative. However, you can't have someone who, by law, can't act as a representative, or someone the Social Security Administration has suspended or disqualified from representing others. Some organizations can help you find a representative or give you free legal services, if you qualify. Some representatives don't charge unless you receive benefits. Your Social Security office has a list of organizations that can help you find a representative.

You can appoint one or more people in a firm, corporation, or other organization as your representatives, but you can't appoint the firm, corporation, or organization. After you choose a representative, you must tell SSA in writing as soon as possible. To do this, you must use Form SSA-1696-U4, Appointment of Representative, which is available from its website at www.socialsecurity.gov or at any Social Security office.

You must give the name of the individual you are appointing and sign your name. If the individual isn't an attorney, he or she must also sign the form.

What your representative may charge you

To charge you a fee for services, your representative first must file either a fee agreement or a fee petition with the SSA. Your representative can't charge you more than the amount SSA

approves. If you or your representative disagree with the fee SSA approves, either of you can ask the SSA to look at it again. If a representative charges or collects a fee without SSA approval, or charges or collects more than SSA approves, SSA may suspend or disqualify them from representing anyone before the Social Security Administration.

Filing a fee agreement

If you and your representative have a written fee agreement, your representative may ask us to approve it any time before we decide your claim. Usually, SSA will approve the agreement and tell you in writing how much your representative may charge as long as:

- You filed the fee agreement before we decide your case;
- You both signed the agreement;
- We approved your claim and you're getting past-due benefits; and
- The fee you agreed on with your representative isn't more than 25 percent of past-due benefits or \$6,000, whichever is less.

If SSA doesn't approve the fee agreement, it will notify you and your representative in writing.

How much you pay

The fee SSA decides your representative may charge is the most you owe for his or her services, even if you agreed to pay your representative more. However, your representative can charge you for out-of-pocket expenses, such as costs for medical reports, without SSA's approval. If an attorney or non-attorney whom Social Security has found eligible for direct payment represents you, SSA withholds up to 25 percent of your past-due benefits to pay toward the fee. SSA pays all or part of the representative's fee from this money and send you any money left over.

You must pay for out-of-pocket expenses your representative incurs or expect(s) to incur (for example, the cost of getting your doctor's or hospital records).

General Tips for Successful Administrative Law Judge (ALJ) Hearings

1. The ALJ will make a new decision in your case and is not bound by the earlier determinations that were made at the initial and reconsideration stages.
2. The ALJ must decide if a claimant has a condition that not only prevents him or her from doing the work he or she did in the last 15 years, but also prevents them from doing any kind of work available in the national economy. (*Workers over 50 have a different set of standards, that may be explored in the Grid Rules*)
3. Claimants should not wear excessive make up or a lot of jewelry.
4. Claimants should dress comfortably, not like they are going to church or another kind of court date. You want the ALJ to see how you look on an average day.
5. Don't wear any clothing with writing on it, other than a simple logo.
6. Turn off your cell phone while you are in the hearing room. Certain hearing offices do not allow a cell phone into the building at all. (e.g. Greensboro hearing office)
7. If you have a hat on, do not wear it into the hearing room.
8. Arrive at the hearing about 30 minutes early. Most hearing offices do not open until 8 AM, so no need to arrive before then.
9. The ALJ does not expect claimants to remember specific dates of medical treatment, as all of those details should be in their file.
10. The hearing room typically contains only five people –
 - The judge at a raised bench who typically wears a robe;
 - A clerk who record hearing testimony;
 - The claimant;
 - the claimant's attorney or representative; and
 - A vocational expert (VE) who will testify about the type of work the claimant did in the past fifteen years according to the Dictionary of Occupational Titles (DOT) and answer questions about a hypothetical version of you.
11. Here's how a question the ALJ directs at the VE will typically sound:
 - “Consider a hypothetical claimant of our claimant's age, education, and work experience,

with the following limitations ...?

Can this person do their prior work?

Is there any other kind of work in the national economy this person can do?"

Fortunately, the VE does not make the final decision, regardless of his or her testimony about the work a claimant is able to do. The ALJ decides.

12. Always let the ALJ finish asking the question before trying to answer. If you don't understand a question that either the ALJ or your representative asks you, ask them to repeat it. If you don't know the answer, it is OK to say, "I don't know."
13. There is a transcript of the hearing being made, so you should always verbalize your answer "Yes" or "No" to a "Yes or No" question, not "uh huh" or "un uh."

If you are talking about a particular part of your body that hurts, don't just point to it, as this information will not be picked up by the court reporter. Say what hurts. For example, "My lower back hurts," "My right upper arm hurts," etc. The judge can see you pointing at the body part but the transcript which he or she will likely review later to make his or her decision will not show the body part to which you pointed.

14. In over 90% of the cases, the ALJ will not make a verbal decision. The ALJ will issue a written decision which usually comes out anywhere from six weeks to four months later. However, this time frame is only an estimate. Decisions can come much quicker or take considerably longer.