



Securing today
and tomorrow

Social Security Administration Tribal Benefits Coordinator Guide 2023





A Note to Benefit Coordinators

We appreciate the assistance you provide to Social Security beneficiaries and Supplemental Security Income (SSI) recipients. We know sometimes it can be difficult to know when to contact us and who to talk to about Social Security related issues. This guide is designed to help find quick answers to common questions. Your feedback is important. Please contact your local Social Security office with questions and suggestions.

Disclosure

In most other cases, clients must consent before Social Security will release information to them. If your client is calling Social Security for information, they must be able to answer several identifying questions, even if giving oral permission for you to receive information. Your clients can also provide written consent on Form SSA-3288. Your clients can print the form online at www.ssa.gov/forms/ssa-3288.pdf. You may fax or mail a signed SSA-3288 to your local Social Security Office.

Disclosure is the release or showing of personal information about an individual to a third party – other than the person to whom it pertains or a minor child’s parent or legal guardian acting on the minor’s behalf. Social Security’s privacy regulations allow us to disclose personal information to government agencies (such as Tribal Government, Tribal Health Department, Indian Health Service, or Bureau of Indian Affairs) without an individual’s consent when the information is needed to administer the agency’s own needs-based program. The agency must justify why they need the information for their program.



Message from the Commissioner's Office

Social Security provides a safety net for millions of people. We recognize people who need our programs the most may experience barriers to accessing our services including people living with disabilities, populations who have limited English proficiency, and Tribal elders who may have to travel a great distance to reach a Social Security Field Office. Advancing equity involves increased outreach to Tribal communities, ensuring access to quality services and program benefits for those who speak a primary language other than English, evaluating our policies to remove undue administrative burdens, and ensuring that income security is within the reach of every eligible individual.

To help us address these challenges, I established an Office of Native American Partnerships, which reports directly to me. This office will ensure a strong presence with Tribes nationwide to support effective delivery of our services to retirees, people with disabilities, and elder populations.

Richard Litsey, the Office of Native American Partnership's first Director, will elevate the agency's relationship with Tribes and serve as the primary point of contact on Tribal affairs for all stakeholders. Richard brings a wealth of experience advising Federal agencies on ways to improve public programs and services for American Indians and Alaska Natives. Nancy Berryhill represents the agency as the Tribal Consultation Official and Renee Ferguson is Richard's Acting Deputy Director. Our team is here to support you in your role as a Tribal Benefit Coordinator.

Dr. Kilolo Kijakazi
Acting Commissioner
Office of the Commissioner





Director of Native American Partnerships

It is my honor to serve as the inaugural Director for the Office of Native American Partnerships within the Office of the Commissioner at the Social Security Administration. I am an enrolled member of the Muscogee (Creek) Nation, a member of the Sons of the American Legion, Post 8, Washington, DC., and a member of the bar in Mississippi and Texas.

Before returning to the Social Security Administration, I worked as the Director of Policy and Advocacy for the National Indian Health Board and regularly engaged with the Indian Health Service, Centers for Medicare & Medicaid Services, Health and Human Services, and other Federal partners on issues Tribal leaders and advocates raise.

I served in the U.S. Senate as Counsel and Senior Advisor for the Finance Committee and a member on the Social Security Team. I collaborated with Finance Committee staff working on Indian Tax Issues and Indian Health Care and assisted with Tribal issues for the Senator's personal office. For fifteen years, I served as an attorney/ advisor, Senior Attorney, and a Hearing Office Director for the Social Security Administration.

When you use the Tribal Benefits Coordinator Guide, know you are helping those who most need help. This edition includes scam and fraud prevention strategies as well as helpful information unique to Native Americans.

Richard Litsey

*Director, Office of Native American Partnerships
Office of the Commissioner*





Senior Advisor and Tribal Consultation Official

It is my honor to serve as your Tribal liaison, bridging Social Security and sovereign Tribal nations. As the Senior Advisor for the Deputy Commissioner for Operations and Tribal Consultation Official, I am dedicated to serving Tribal communities and to strengthening our government-to-government relationships.

This edition of the Tribal Benefits Coordinator Guide includes policy updates and helpful information unique to Native Americans. It is my hope that this guide will provide Tribal Benefits Coordinators an up-to-date picture of how Social Security serves Indian Country communities.

Under Richard and Renee's leadership, we are reinforcing the need to build relationships in Native American communities and taking a direct approach to improving cultural awareness across Social Security. Renee serves as the American Indian and Alaska Native Executive Champion to support our commitment to service delivery and outreach initiatives.

Thank you for your continued support as we move in the right direction, together.

Nancy A. Berryhill

*Senior Advisor for the Deputy Commissioner of Operations,
Tribal Consultation Official for the Office of the Commissioner*





American Indian and Alaska Native Executive Champion

The Biden Administration includes Indigenous and Native American persons in its definition of “underserved communities” in EO 13985, *Advancing Racial Equity and Support for Underserved Communities Through the Federal Government*. In addition to the actions we describe in our ***Fiscal Year 2023 Tribal Consultation and Call to Action Plan***, the ***Equity Action Plan*** includes initiatives that will identify and address systemic barriers to full participation in our programs and services for Native Americans. The Tribal Benefits Coordinator Guide is one way of providing the educational tools and outreach resources to the Tribal communities we serve.

It has been a pleasure to meet many of you as we continue our work to meet the needs of Tribal communities. I am committed to provide accurate information to Tribal communities to ensure timely communication on Tribal issues. I look forward to amplifying the voice of Tribal leaders by enhancing outreach and cultural awareness opportunities with our employees.

On behalf of the many people who worked to put the Tribal Benefits Coordinator Guide together, I hope this will serve as a valuable resource when discussing Social Security benefits, services, and policies. If you have suggestions for improvement or questions about information in the guide, please reach out to your local contacts or contact us through our dedicated mailbox at ***SSA.Tribal.Communications@ssa.gov***.

Thank you for your continued support.

Renee Ferguson

*AIAN Executive Champion,
Acting Deputy Director of Native American Partnerships
Office of the Commissioner*



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SocialSecurity.gov/aiian

Estimate your benefits • Open a *my* Social Security account • Apply online

Current Issues

Building Tribal Program and Trust Precedents at Social Security



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Tribal Programs and Trusts Can Affect Supplemental Security Income Payments

Tribes develop programs to distribute payments to Tribal members from gaming revenue or to establish Indian Gaming Regulatory Act (IGRA) trusts, with the goal of protecting and preserving the interests of minor children and incompetent adults entitled to receive any of the gaming revenue. These types of payments can affect Supplemental Security Income (SSI) by either affecting eligibility for SSI or reducing the amount payable by the Social Security Administration (SSA).

To determine if these Tribal payments can be excluded for SSI purposes, SSA must review each Tribal program, and trusts with benefit payments to SSI recipients under the program rules. SSA relies on documentation provided by Tribes, such as award letters, tax documents, Tribal letters, paystubs, signed agreements, or trust documents. SSA may rely on the individual Tribal member to provide us with documentation about the payments and benefits they receive from Tribal programs, including any trusts, to determine if an exclusion for SSI applies.

Native American Precedent Resource (NAPR)

We are working to ensure quality and consistent application of SSI policies for income and resource determinations regarding Tribal programs and trusts. In response to Tribal Consultation, we developed an internal national database called the **Native American Precedent and Resource Center, or NAPR**. The **NAPR** site assists our claim specialists nationwide to provide customer service anywhere a Tribal member may reside.

How You Can Help

Tribal Coordinators can help us build a complete precedent directory for their Tribe's programs by sending information that explains how each specific program or trust is set up and administered to Tribal members. The program award letters and pay stubs providing the full program overview (rules, eligibility requirements, copy of the application, etc.) will help us better serve Tribal members who receive SSI. Tribal Coordinators can share information with their contact in the local Social Security office or by email to:

SSA.Tribal.Communications@ssa.gov.

When you conduct business with us about a Tribal income, resource, and IGRA trust, our claim specialists must first check the **NAPR** site to reduce any duplicative requests for documentation from the Tribe. If there are gaps in documentation previously collected, you may be asked to help us.

Other Resources

For more information on how Social Security is working to improve lives across Indian Country, visit our American Indians and Alaska Natives (AIAN) webpage at: **www.ssa.gov/people/aiian**.

SSA's AIAN webpage provides many useful publications to Tribes and its members. It includes specific information about SSI income and resource exclusions, such as our **Assistance Based on Need (ABON)** program, COVID-related disaster relief payments, and **IGRA Trusts**. The site also highlights the Tribal General Welfare Exclusion Act of 2014 and explains the requirements necessary to classify a Tribal program as ABON income for exclusions under the SSI policy.

How to Identify Social Security Related Scams?

We need your help! Criminals continue to impersonate SSA and other government agencies in an attempt to obtain personal information or money. Scammers might call, email, text, write, or message you on social media claiming to be from the Social Security Administration or the Office of the Inspector General. They might use the name of a person who really works there and might send a picture or attachment as “proof.”

These are red flags; you can trust that Social Security will *never*:

- **Threaten** you with arrest or legal action because you don't agree to pay money immediately.
- **Suspend** your Social Security number.
- Claim to need **personal information or payment** to activate a cost-of-living adjustment (COLA) or other benefit increase.
- **Pressure** you to take immediate action, including sharing personal information.
- Ask you to **pay with** gift cards, prepaid debit cards, wire transfers, cryptocurrency, or by mailing cash.
- **Threaten** to seize your bank account.
- **Demand** secrecy.



Be skeptical and look for red flags. If you receive a suspicious call, text message, email, letter, or message on social media, the caller or sender may not be who they say they are. Scammers have also been known to:

- Use legitimate names of Office of Inspector General or Social Security Administration employees.
- “Spoof” official government phone numbers, or even numbers for local police departments.
- Send official-looking documents by U.S. mail or attachments through email, text, or social media message.

How to Avoid a Scam

Protect yourself, friends, and family — If you receive a suspicious call, text, email, social media message, or letter from someone claiming to be from Social Security:

1. **Remain calm.** If you receive a communication that causes a strong emotional response, take a deep breath. Talk to someone you trust.
2. **Hang up or ignore the message.** Do not click on links or attachments.
3. **Protect your money.** Scammers will insist that you pay with a gift card, prepaid debit card, cryptocurrency, wire transfer, money transfer, or by mailing cash. Scammers use these forms of payment because they are hard to trace.
4. **Protect your personal information.** Be cautious of any contact claiming to be from a government agency or law enforcement telling you about a problem you don't recognize, even if the caller has some of your personal information.
5. **Spread the word** to protect your community from scammers.
6. **Report the scam** to the Office of the Inspector General at oig.ssa.gov/report.

Contacting Social Security

Social Security is here to help, and our website is the best way for most people to access our services. If someone cannot use our website, they can call our National 800 Number (**1-800-772-1213**) or a local Social Security office. We can schedule appointments to assist someone by phone or in person. Appointments are not required but strongly recommended.

The most convenient way to take any action related to your Social Security benefits is with a free *my* Social Security account.

To create an account visit www.ssa.gov/myaccount.

my Social Security

A personal *my* Social Security account provides ready access to information and allows the individual to conduct business with Social Security online. If they need proof of their Social Security, Medicare, or Supplemental Security Income (SSI) benefits, let them know they can get a benefit verification letter online with a personal *my* Social Security account.

You can serve your clients faster because they no longer have to travel to a Social Security office or wait for a letter to be mailed to them. They can get up-to-date information they need online, perhaps even from a computer in your office.

With *my* Social Security, people who receive benefits can easily view, print, or save an official letter that includes proof of their benefit amount and type, as well as Medicare start date and withholding amount and age. Go to www.ssa.gov/myaccount/

They can create an account if they are age 18 or older, have a Social Security number (SSN), and a valid email address. Social Security uses one of two credential service providers – *Login.gov* and *ID.me* to verify a person's identity and create an account.

Your client can use their personal *my* Social Security account to get a benefit verification letter, to check their earnings and work record, and in many areas, request a replacement Social Security card. If they receive retirement, survivors, or disability benefits, they can also

- Change their address and phone number.
- Change their direct deposit.
- Request a replacement Medicare card.
- Print a replacement SSA-1099 or SSA-1042S for tax purposes.
- Report wages, if receiving Social Security Disability benefits.
- Opt-out of mailed notices for those available online.

Apply Online

Applicants can file online for Social Security retirement, spouses' benefits, Medicare, or disability benefits at www.ssa.gov/apply. Individuals interested in applying for SSI can answer a few questions at www.ssa.gov/ssi to let us know they want to apply and we will make an appointment to help them complete the application. If applying online, the applicant must electronically sign their application and attest to the accuracy of the information provided. After the application is complete, they have several ways to check the status of their application by:

- Logging in to their personal *my* Social Security account
- Calling **1-800-772-1213** Monday through Friday 8 a.m. through 7 p.m.
- Contacting their local office

We also offer an online Benefit Eligibility Screening Tool (BEST) at www.benefits.gov to determine eligibility for benefits. Just by answering a series of questions, anyone can find out whether they are eligible for retirement, disability, or SSI benefits. They can even find out whether they might be eligible for Medicare benefits.

Applicants can call us using our toll-free number **1-800-772-1213**, Monday through Friday from 8 a.m. until 7 p.m. People who are hearing impaired may call our Text Telephone (TTY) number **1-800-325-0778**. Automated services are available by phone, including scheduling an appointment, address changes, and signing up for direct deposit of Social Security payments.

Social Security Office Locator www.ssa.gov/locator.

Much of the business with Social Security can be done online, but sometimes a person may want to talk with a Social Security representative face-to-face. If that is the case, finding the nearest office is readily available by visiting the online office locator and entering a ZIP Code to find the nearest Social Security office.

If Someone Needs an Interpreter

We provide free interpreter services by phone or in person in a Social Security office. To request an interpreter on the toll-free number, **1-800-772-1213**, either press 7 for Spanish or for all other languages, remain silent during the automated prompts until a representative answers the line. The representative will contact an interpreter to assist with the call. If they cannot complete the request by phone, we will make an appointment at a local Social Security office and arrange for an interpreter to be there at the time of the visit.

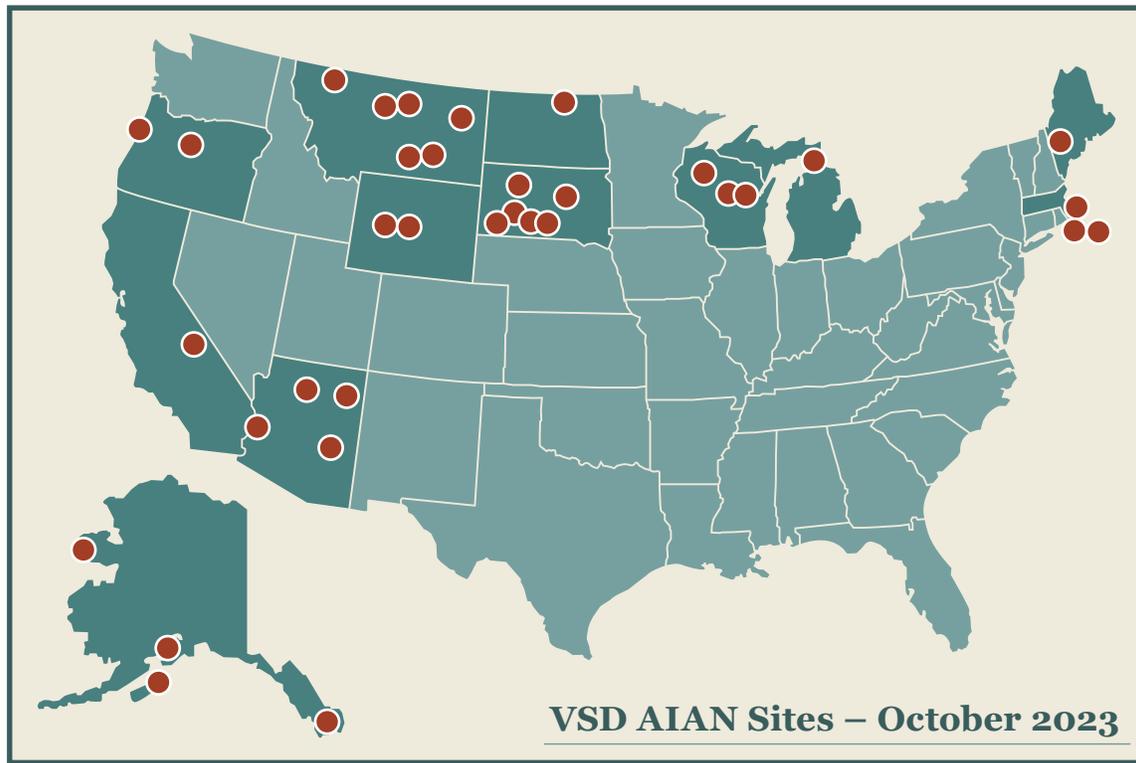
Video Service Delivery and MS Teams

We have Video Service Delivery (VSD) centers set up in some communities, so visitors do not have to drive to their local office. A person can connect with a Social Security representative by using the Video Teleconference equipment. The Social Security representative can see, talk to, and assist them as if they were face-to-face in an office. They do not have to know how to use a computer for this service.

We use VSD for a variety of workloads. To request more information on available video service or to use MS Teams, contact the local Social Security number or call **1-800-772-1213**. The representative will contact a local or hearing office manager for additional assistance.

VSD American Indians and Alaska Native (AIAN) Site Map

(www.ssa.gov/open/geospatial.html)



VSD SITES

Alaska	Kenai Ketchikan Kodak Nome	North Dakota	Belcourt
Arizona	Chinle Parker Tuba City Whiteriver	Oregon	Siletz Warm Springs
California	Bishop	South Dakota	Eagle Butte Fort Thompson Kyle Pine Ridge Rosebud Wanblee
Maine	Rumford	Wisconsin	Bowler Keshena Stone Lake
Massachusetts	Harwich Nantucket Oak Bluffs	Wyoming	Arapahoe Fort Washakie
Michigan	Saint Ignace		
Montana	Box Elder Browning Crow Harlem Lame Deer Poplar		

The Social Security Card

The nine-digit Social Security number is the first and continuous connection with Social Security. It helps us identify and accurately record covered wages or self-employment earnings. We also use it to monitor entitlement to benefits.

A Social Security number is often necessary when applying for work, collect Social Security benefits, and get other government services. We encourage everyone to **keep their Social Security card in a safe place with other important papers** and avoid giving it out unnecessarily. Many times, just knowing the number is enough and you do not need to present the card.

Applying for an Original SSN

Age 12 or Older Applicants

Anyone age 12 or older who requests an original Social Security number must appear in person for an interview. They must present original documents or copies certified by the agency that issued them. We cannot accept photocopies or notarized copies.

Newborns

The Enumeration at Birth authorization allows an individual to apply for a Social Security number for a newborn before leaving the hospital. The state agency will share the baby's information with us, and the card will arrive in the mail. If the parent chooses to wait to apply for a Social Security number, and does not file at the hospital, they must have the birth certificate and proper identification when applying at the local office.

Canadian-born North American Indians

Individuals born in Canada need a long-form birth certificate, a tribal ID (or other ID), and a blood quantum letter (BQL) to apply for a new SSN. If applying for a replacement Social Security card, these individuals can use either a long- or short-form birth certificate, ID (tribal or other), and the BQL. If applying for a child, the accompanying applicant must also submit ID.

Noncitizen Applicants

In general, only noncitizens who have permission to work from the Department of Homeland Security can apply for a Social Security number. A noncitizen application must prove immigration status as a student or an individual with employment status or Lawful Permanent Resident. More information on noncitizen requirements is available at <https://www.ssa.gov/ssnumber/ss5doc.htm>.

At www.ssa.gov/ssnumber, you can begin your application online and complete it at your local office. In some cases, you can even make an appointment online to bring us the required documents.

Applying for a Replacement Card

If you need a replacement card or need to change your name on your card, you can visit www.ssa.gov/ssnumber and answer a few questions to determine the best way for you to request a replacement or corrected card. You can start the application and you may be able to complete the request online without needing to visit an office. If you do need to visit an office to complete the request, in many cases, you will also be able to make an appointment online.

Get a replacement card in person

Complete an application for a Social Security card (Form SS-5, available at www.ssa.gov/forms) and show us original documents or copies certified by the issuing agency, proving their U.S. citizenship, age, and identity.

If applying on behalf of a child, proper identification is needed for parent and child.

Original Documents Needed

Citizenship – We can only accept certain documents as proof of U.S. citizenship. These include a U.S. birth certificate or a U.S. passport. For individuals applying for a Social Security card for the first time who were born outside the U.S. and are over the age of 12, they must show proof of long-term residency outside the U.S.

If the applicant is not a U.S. citizen, they will need to submit other evidence proving their Native-American status.

Age – If the applicant has or can obtain a U.S. state-issued birth certificate that recorded their birth before age 5, they must submit it. If not, we can consider other documents, such as their passport, to prove their age.

Identity – We can only accept certain documents as proof of identity. An acceptable document must be current (not expired) and show the name, identifying information (date of birth or age), and preferably, a recent photograph. For example, for proof of identity, Social Security must see the following documents:

- Current U.S. driver's license
- Current state-issued non-driver identification card
- Current U.S. passport

If the applicant does not have one of the documents listed above, or they cannot get a replacement document within 10 days, we will ask to see other documents, such as

- Employee ID card
- School ID card
- Health insurance card (not a Medicare card)
- U.S. military ID card
- Tribal ID for which Social Security has established a precedent regarding its use

Any of the identification documents listed must also include identifying information, like **name, age, date of birth, and a photo.**

Retirement

Calculating Retirement Benefits

Monthly retirement benefits are paid to workers who are at least age 62 and insured. A person becomes insured by paying Social Security taxes. The taxes you pay earn credits toward benefits. Generally, a person needs 40 work credits to be insured. For example, in 2024, a person earns one work credit for each \$1,730 in earnings. The amount needed to earn a work credit changes each year. A person can earn a maximum of four work credits per year. Someone earning \$6,920 or more in 2024 would earn the maximum of four work credits for the year. For more information about the amount of earnings it takes to earn a Social Security credit, please visit www.ssa.gov/OACT/COLA/QC.html#qcseries.

Because retirement benefits are meant to replace only part of the earnings a person had before they retired, an individual who works over the earnings limit may have a reduction in the Social Security benefits they receive. The limit only applies if they are under Full Retirement Age (FRA).

(See the following chart)

Retirement Chart	
<i>Year of Birth</i>	<i>Full Retirement Age</i>
1937 or earlier	65
1938	65 and 2 months
1939	65 and 4 months
1940	65 and 6 months
1941	65 and 8 months
1942	65 and 10 months
1943 to 1954	66
1955	66 and 2 months
1956	66 and 4 months
1957	66 and 6 months
1958	66 and 8 months
1959	66 and 10 months
1960 and later	67

Once a person reaches full retirement age, they can earn as much as they want and receive retirement payments each month. If a person takes Social Security retirement benefits before reaching FRA and continues to work, the yearly earnings may reduce your benefit amount.

- **If you are under full retirement age for the entire year**, we deduct \$1 from your benefit payments for every \$2 you earn above the annual limit.
- **In the year you reach full retirement age**, we deduct \$1 in benefits for every \$3 you earn above a different limit. We only count earnings before the month you reach your full retirement age.

The earnings limit amounts vary from year to year and are based on the increases in the level of nationwide earnings, unless otherwise increased by legislation. The new amounts for each upcoming year are published every October. Earnings limits and other information about retirement benefits can be found at <https://www.ssa.gov/planners/retire/whileworking.html>.



Work History Affects Retirement Benefits

The amount Social Security pays is based on how much a worker earned. Higher earnings result in higher benefits. We use the average of your highest 35 years of earnings.

Your client may be able to work and receive retirement benefits, depending on the amount of income they receive. For a full explanation of how work affects your retirement benefits, see our publication, *How Work Affects Your Benefits*, at www.ssa.gov/pubs/EN-05-10069.pdf.

Windfall Elimination Provision

Retirement or disability pensions from work that was not covered by Social Security, such as a city or government agency, may reduce your client's Social Security benefit. This is called the Windfall Elimination Provision (WEP). Your client can learn more online at www.ssa.gov/planners/retire/wep.html or by calling Social Security. The family's benefits can be affected by factors such as their own work and receipt of a government pension. Social Security will provide them a complete list of reporting responsibilities when they file for benefits.

Family Retirement Benefits

If your client receives Social Security retirement benefits, some of your client's family members may be able to receive benefits. Family members who may be eligible to receive benefits include the following:

Spouses

Spouse's benefits can be paid at age 62 or older, as long as the spouse is not entitled to a higher benefit on their own record.

Spouses under age 62 can receive benefits if they are taking care of a child who is entitled on the client's record (the child must be under age 16 or disabled).

If your client receives a pension from a job at which they did not pay Social Security taxes, some or all of their Social Security spouse's, surviving spouse's benefit may be offset due to receipt of that pension. This offset is referred to as the Government Pension Offset, or GPO. Learn more online at www.ssa.gov/planners/retire/gpo.html or by calling Social Security. Social Security will provide a complete list of reporting responsibilities when they file for benefits.

Unmarried Children and Grandchildren

When your client receives Social Security retirement benefits, his or her children may also be eligible for benefits. An unmarried child, including an adopted child, or, in some cases, a stepchild, grandchild, or step-grandchild may be eligible for benefits if the child is younger than age 18, or between the ages of 18 and 19 and a full-time student (no higher than grade 12). A disabled unmarried child, age 18 or older may be eligible if the disability started before age 22. The child's disability must also meet the definition of disability for adults.

More and more grandparents are finding themselves raising their grandchildren. Social Security will pay benefits to grandchildren when the grandparent retires, becomes disabled, or dies, if certain conditions are met. Generally, the biological parents of the child must be deceased or disabled, or the grandparent must legally adopt the grandchild.

To receive this benefit, the grandchild must have begun living with the grandparent before the age of 18 and received at least one half of their support for the year before the month the grandparent became entitled to retirement or disability insurance benefits or died. Also, the natural parent(s) of the child must not be making regular contributions to their support.

If the grandchild was born during the one-year period, they must have lived with and provided at least one-half of the child's support for substantially the entire period from the date of birth to the month they became entitled to benefits.

The grandchild may qualify for benefits under these circumstances, even if they are a step-grandchild. However, if their spouse is already receiving benefits, they would need to adopt the child for them to qualify for benefits.

Benefits for Divorced Spouses

If your client is divorced, and their marriage lasted 10 years or longer, they may be able to receive benefits on their ex-spouse's record (even if the ex-spouse has remarried) if they meet the following requirements:

- Unmarried
- Age 62 or older
- The ex-spouse is entitled to Social Security retirement or disability benefits; **and**
- The benefit they are entitled to receive based on their own work is less than the benefit they would receive based on their ex-spouse's work.

The benefit for a divorced spouse is equal to one-half of the ex-spouse's full retirement amount (or disability benefit) if they start receiving benefits at full retirement age. The benefits do not include any delayed retirement credits the ex-spouse may receive.

If your client remarries, they generally cannot collect benefits on their former spouse's record, unless the later marriage ends (whether by death, divorce, or annulment).

If their ex-spouse has not applied for retirement benefits, but is eligible for them, your client can receive benefits on their former spouse's record if they have been divorced for at least two years.

If they are **eligible for retirement benefits** on their own record **and** divorced spouse's benefits, we will pay the retirement benefit first. If the benefit on their ex-spouse's record is higher, they will get an additional amount on their ex-spouse's record so that the combination of benefits equals that higher amount.

If they continue to work while receiving benefits, **the retirement benefit earnings limit** still applies. If they are eligible for benefits this year and are still working, they can use the **earnings test calculator** to see how those earnings would affect their benefit payments.

If they will also receive a pension based on work not covered by Social Security, such as government work, their **Social Security benefit on their ex-spouse's record** may be affected.

The benefits they receive has no effect on the amount of benefits their ex-spouse or their current spouse may receive.

Filing for Benefits

There are two ways for your client to file an application for benefits; either online or by speaking with a Social Security representative by phone, VSD (Video Service Delivery), or face-to-face at the local Social Security office.

Applications for Social Security retirement, spouse, or disability benefits can be filed online. To help your client prepare to apply for benefits, they may want to first check our online benefit planners at www.ssa.gov/planners/.

Benefits for unreduced retirement, spouse, or widow(er)'s benefits are based on full retirement age (FRA). Applying for benefits before reaching FRA will result in a reduction of the benefit amount.

Applicants can contact us at **1-800-772-1213** (TTY **1-800-325-0778**) or at the local Social Security office to set up an appointment. The questions asked in the process are the same ones required when filing online, but your client will have a Social Security representative asking them questions and completing the application.

Required Documents

When your client applies for retirement benefits, or an eligible family member applies for benefits on the client's record, there are some documents that they may need to submit. With most applications, we verify age and citizenship. Sometimes, we do not need proof because we may have seen the birth certificate in the past, and we may not need to see it again. However, if it is needed, we usually require a certified birth certificate. If your client served in military service, we may need to see records indicating the dates of active duty. Usually, proof of military service (DD Form-214) will tell us what we need to know.

If a family member applies for benefits, we will need documents to prove the relationship between the applicant and the worker. We will generally use a birth certificate or some other evidence to show the relationship to the worker.

Most clients must provide their bank account information, as all federal benefits are required to be paid electronically via direct deposit. Eligible clients without bank accounts can be enrolled in the Direct Express® prepaid debit card program. Exceptions to this are granted on a limited basis.

Timeline for Benefits

The timeframe for processing retirement and family benefits ranges from a few days to a few weeks, depending upon the complexity of the issues and whether we have to wait for evidence. An application may be completed four months before your client wants their benefits to start.



Survivors Benefits

Social Security provides help for the families of workers who are deceased. Benefits can be paid to the following:

- Surviving spouses
- Divorced surviving spouses
- Children
- Grandchildren (in some instances)
- Dependent parents (in some instances)

When the worker paid Social Security taxes on their wages, they earned credits toward Social Security benefits for their family members. The number of credits needed depends on the age of the worker when they die. If the worker dies young, fewer credits are needed; but no one needs more than 40 work credits or about 10 years of work. There is a special rule that helps younger workers who have worked for one and one-half years in the three years just before death. If the worker had that much work, benefits can still be paid to the worker's children and the spouse who is caring for the children.

Additional Eligibility Information

- Reduced surviving spouse's benefits can begin as early as age 60.
- Surviving spouses may receive full benefits at age 65 if they were born on or before January 1, 1940.
- If a divorced surviving spouse meets Social Security's definition of disability, they can begin receiving benefits as early as age 50.
- Surviving spouses can receive benefits at any age if they are caring for the worker's child who is younger than age 16 or who is disabled and receiving substantial personal care services from the surviving parent.
- The divorced spouse who is caring for a child of the worker can be paid benefits without meeting the 10-year marriage requirement if the child is under 16 years of age or is determined to be disabled and requires personal care.
- Unmarried child, including an adopted child, or, in some cases, a stepchild, grandchild, or step-grandchild — if the child is younger than age 18, or between the ages of 18 and 19 and a full-time student (no higher than grade 12)
- Disabled unmarried child, age 18 or older — if they have a disability that started before age 22. The child's disability must also meet the definition of disability for adults.
- Dependent parents may receive benefits if they are age 62 or older and they received at least one-half of their support from the insured worker.
- Spouses who were married to the worker for at least 10 years before they became divorced and are age 60 or older (or aged 50 through 59 if they meet the disability requirements) can receive benefits on the worker's record.

Determining the Amount of Benefits

The survivors benefit amount is based on the lifetime average earnings of the person who dies. Social Security uses the worker's basic benefit amount and calculates the percentage amount the survivors are entitled to receive. The percentage received depends on the age of the survivors and relationship to the worker. Higher lifetime earnings result in higher benefit amounts.

Some Typical Situations

A surviving spouse, at full retirement age or older, generally receives 100% of the worker's full retirement amount, assuming the worker did not receive a reduced benefit prior to death.

A surviving spouse, age 60 or older, but under full retirement age, receives between 71 to 99 % of the worker's basic benefit amount.

A surviving spouse, any age, who is disabled or has a child younger than age 16 in their care, receives 75% of the worker's basic amount.

Retirement or disability pensions from work that was not covered by Social Security, such as from a government agency, may reduce your client's Social Security surviving spouse's benefit. This is called the Government Pension Offset. You can learn more online at www.ssa.gov/planners/retire/wep.html or by calling Social Security.

Disability Benefits

Disability benefits are for individuals who have a medical condition or combination of impairments that prevents substantial work for at least 12 months, or the condition is expected to result in death. Although other programs may offer partial or short-term disability, federal law requires that we use a strict definition of disability.

If your client is still working when they apply, we will decide if they are performing significant and productive physical or mental work. We call this work substantial gainful activity (SGA). In general, individuals who engage in SGA do not meet our definition of disability. In 2024, monthly earnings of more than \$1,550 for disabled earners or \$2,590 for blind earners are considered SGA. The SGA amount changes each year. For self-employed clients, we determine SGA based on three tests, all of which we consider before we can establish that the self-employed person is not or was not engaged in SGA. In making our decision about your client's work, we also consider their impairment-related work expenses and any subsidies provided by their employer. More information about SGA is available at <https://www.ssa.gov/OACT/COLA/sga.html>. Social Security Disability Programs

We pay benefits through two different programs: Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI). There are many differences between the two programs.

To be eligible for SSDI, a person must be insured for disability benefits. A person becomes insured by paying Social Security taxes on their wages or self-employment. In general, a person must have a current work history based on their age at the time they became disabled, and they must have worked long enough under Social Security. For more information, see the brochure titled *Disability Benefits* (Publication No. 05-10029) available online at www.ssa.gov/pubs/EN-05-10029.pdf.

The SSI program provides financial assistance payments to aged, blind, and disabled persons (including children) who have limited income and resources.

In addition to SSDI and SSI, we also pay disability-related survivor benefits to surviving spouses who are between the ages of 50 and 60. Divorced surviving spouses who were married at least 10 years, are disabled and between the ages of 50 and 60 may also be eligible for these disability-related survivor benefits.

For unmarried children age 18 and older whose disability began prior to age 22, we may pay disabled child's benefits if the parent is currently entitled to Social Security retirement or disability benefits, or if the parent is deceased and worked long enough for their survivors to qualify for benefits.

Amount of Benefits

When we approve an application for SSDI benefits, payments begin with the sixth full month after the date the disability began (with certain limitations on retroactivity). A beneficiary may be due up to 12 months of retroactive benefits, depending on the established onset date of their disability.

The basis of the monthly SSDI benefit rate is the applicant's average lifetime earnings. The Social Security Statement, available in their my Social Security account, includes an estimate of how much they would receive if they became disabled.

For the SSI program, the monthly payment varies up to the maximum federal benefit rate. The federal benefit rates in 2024 are \$943 for an individual or \$1,415 for a married couple who are both eligible for SSI. The applicant's other sources of income, referred to by SSA as countable income, decreases the federal benefit rate. In addition, the applicant's state of residence may supplement the federal benefit rate. If the applicant's resources exceed the SSI limits, no monthly payments are due. The resource limits are \$2,000 for an individual and \$3,000 for a couple.

Benefits for the Family

If someone receives Social Security disability (or retirement) benefits, some of their family members may be able to receive benefits. Those members include the following:

- **Their spouse**—if they are age 62 or older
- **Their spouse at any age**—if they are caring for the disabled worker's child who is younger than age 16 or disabled prior to the age of 22
- **Their unmarried child, including an adopted child**, or, in some cases, **a stepchild, grandchild, or step-grandchild**—if the child is younger than age 18, or between the ages of 18 and 19 and a full-time student (no higher than grade 12)
- **Their unmarried child, age 18 or older**—if they have a disability that started before age 22. The child's disability must also meet the definition of disability for adults.

In some situations, a divorced spouse may qualify for benefits based on their spouse's earnings, if they were married to them for at least 10 years, are not currently married, and are at least age 62. The money paid to a divorced spouse does not reduce your client's benefit or any benefits due to a current spouse or children.

Disability Application Process

The process of filing for disability benefits through the SSDI or SSI program is similar to filing for retirement benefits. The difference is in the added medical decision for the disability. Each state has a Disability Determination Services (DDS) that works with Social Security to make the medical decisions. Social Security local office representatives do not make medical decisions.

Documentation for Adults

In preparation for the disability application, it is helpful to gather some information ahead of time, whether an applicant is filing online, at the Social Security office, or over the phone. An adult filing for disability benefits will need the following information:

- Original or certified copy of their birth certificate or other proof of age, although U.S. citizens typically do not need to present this document.
- U.S. citizenship or lawful alien status, if foreign born.
- Medical information, including names, addresses, and phone numbers of all doctors, hospitals, and clinics.
- Patient ID number(s).
- Approximate dates seen.
- List of current medications.
- Medical records in the client's possession.
- Military records, such as the DD-214, if your client was in the military.
- W-2 or self-employment federal tax forms if your client worked last year.
- Workers' compensation information, including date of injury, claim number, and proof of payment amounts.
- SSN(s) for your client's spouse and minor or disabled children.
- Checking or savings account information for direct deposit.
- Name, address, and phone number of two people whom Social Security can contact if we are unable to get in touch with your client.
- Work record, job titles, and duties for the last 15 years.



Documentation for Children with Disabilities

If someone is applying for disability benefits for a child, they will need the following documents:

- Original or certified copy of the child's birth certificate or other proof of age, although U.S. citizens typically do not need to present this document.
- U.S. citizenship or lawful alien status, if foreign born
- Medical information, including the dates the child was seen or treated, and the child's patient ID number(s), if known.
- Medication(s) the child is taking,
- Child's medical assistance number, if any.
- Names, addresses, and phone numbers of any schools the child attended in the past 12 months, including the names of teachers, psychologists, counselors, and speech and other therapists who have seen or treated the child.
- The child's Individualized Family Service Plan (IFSP) or Individualized Education Plan (IEP), if the child has one; and any other school records that are available.
- Names, addresses, and phone numbers of any social services programs and the names of caseworkers that have information about the child.
- Name, address, and phone number of another adult who helps care for the child and can help us get information, if necessary.
- Names, addresses, and phone numbers of the child's past and current employers.

If the applicant is the child of a retired, disabled, or deceased worker, and has a disability that began before they turned 22, they may be eligible for benefits on the parent's Social Security record.

For SSI childhood disability cases (children under the age of 18), they will also need the following documents:

- Proof of current income for the child and family members living in the household (e.g., pay stubs, self-employment tax returns, unemployment, other program benefits, child support, etc.).
- Proof of resources for the child and parents living in the household (e.g., bank account statements, life insurance policies, certificates of deposit, stocks, bonds, etc.).
- Names and SSNs for all the children and adults who live in the household. Disability Evaluation

Social Security representatives in the local Social Security office will send the disability application to the state Disability Determination Services (DDS) for an evaluation of the medical conditions. For an SSI childhood disability determination, the DDS evaluates whether the medical conditions cause marked and severe functional limitations. For adult disability determinations, the DDS reviews the evidence to determine whether the medical condition is severe enough to prevent any substantial work and whether the medical condition has lasted, or is expected to last, at least one year or is expected to result in death.

Often, the DDS sends additional forms for completion to the client or others who know about the client's disability. Sometimes, when the DDS needs additional medical information, it schedules a consultative examination (CE) to determine if the client is eligible. Social Security pays for the exam. If an applicant does not go to the CE, the DDS may deny their claim due to insufficient evidence.



After the DDS makes a decision, the DDS returns the case to the Social Security office for processing. Some decisions take longer than others, especially those involving a CE. If the applicant is filing for SSI, Social Security may need to update their record after receipt of the medical decision to determine whether there have been any changes to income, resources, or living arrangements since the individual filed the application. If the application was for SSI for a disabled child, Social Security may also need to update parents' income and resources.

Compassionate Allowance

Compassionate Allowances (CAL) involves the quick identification of claims where the person's diseases and other medical conditions clearly meet Social Security's standards for disability. These conditions primarily include certain cancers, adult brain disorders, and a number of rare disorders that affect children. The CAL initiative helps us reduce the time it takes to make a disability decision for individuals with the most serious disabilities. By incorporating cutting-edge technology, the agency can easily identify potential CAL cases and the DDS can expedite the decision. SSA uses the same rules to evaluate CAL conditions when evaluating both SSDI and SSI claims.

SSA receives information from the public, advocacy groups, the Social Security and Disability Determination Services communities, medical and scientific experts, the National Institutes of Health (NIH), and past public outreach hearings regarding potential CAL conditions. For more information on Compassionate Allowances, please visit www.ssa.gov/compassionateallowances/index.htm. Returning to Work

Social Security has special rules called work incentives that allow your clients to test their ability to return to work, while protecting financial and medical benefits. We intend for our employment-support provisions to assist your clients in their efforts to become self-sufficient through work.

Your clients can get help with any education, training, and rehabilitation they need in order to work. For a description of the work incentives and other programs that can help your clients return to the work force, please visit www.ssa.gov/disabilityresearch/wi/generalinfo.htm. For more information, view the online publication, *Working While Disabled - How We Can Help* (Publication No. 05-10095) or visit www.ssa.gov/work/.

Reporting Work Activity

If your client takes a job, it is important that they let us know about it immediately. They should tell us when they start or stop work, if there is a change in their job duties, hours of work, rate of pay, or if they have out-of-pocket expenses needed for work due to the disability. Even if they are receiving full pay, they still may qualify for Social Security disability benefits. They can report their current work activity online from their personal *my Social Security* account, by calling us at **1-800-772-1213** (TTY **1-800-325-0778**), or by visiting their local Social Security office. To find your local office, visit our website at www.ssa.gov/locator. Your client can open a free *my Social Security* account at www.ssa.gov/myaccount/. Certain individuals may also report their wages by calling a toll-free automated system or through a mobile application.

Ensure your client asks for a receipt showing that they reported their work activity. The work report receipt is for their records and serves as proof that they reported their work.

If your client receives Disability benefits, they can report wages using their personal *my Social Security* account. If your client receives SSI, they must report their wages monthly. Timely reporting helps to avoid overpayments and underpayments. In addition to *my Social Security*, Social Security offers a toll-free telephone wage reporting system and a mobile wage reporting application for SSI recipients. Information about these options are located on our website at www.ssa.gov/ssi/spotlights/spot-telephone-wage.htm or call **1-800-772-1213** to ask a Social Security representative how you can report wages using the system

or application. When your client reports any changes in work activity, we provide them a receipt that verifies your client has fulfilled their obligation of reporting. Keep this receipt with any paystubs so we can verify their monthly earnings and any allowable deductions from earnings.

Work Incentives

There are employment supports available to assist our disabled beneficiaries with returning to work. The following are examples of SSDI and SSI employment support:

- **Subsidy** – support provided by an employer that may result in receiving more pay than the actual value of the services performed.
- **Special Conditions** – refers to support and on-the-job assistance provided by an employer, or someone other than an employer (i.e., vocational rehabilitation agency). With the support in place, the beneficiary may receive more pay than the actual value of the services performed.
- **Unsuccessful Work Attempt (UWA)** – an effort to work in employment or self-employment that stopped or was reduced to below the substantial gainful activity (SGA) level after a short time (6 months or less) because of the impairment or removal of special conditions related to your client’s impairment that they need to help them work.
- **Impairment-Related Work Expenses (IRWE)** – costs of certain impairment-related items (for example, prescriptions) and services that the worker needs to work.
- **SSI Blind Work Expenses (BWE)** – If your client receives SSI due to blindness, we deduct the cost of certain expenses they need in order to work from their earned income when determining their eligibility and payment for SSI. Some examples of these deductible expenses include medication, transportation, taxes, medical devices, etc.
- **Plan for Achieving Self-Support (PASS)** – PASS allows disabled beneficiaries to set aside other income or resources for a specified time period to pursue a work goal that will reduce or eliminate the SSI or SSDI benefits. For example, your client could set aside income from wages to pay for expenses for education, vocational training, or assistive technology used for employment-related purposes.
- **Ticket to Work** – The Ticket to Work (TTW) program is an innovative program for persons with disabilities who want to work and participate in planning their employment. The TTW program is a free and voluntary program that increases your client’s available choices when obtaining employment services, vocational rehabilitation services, and other support services they may need to get or keep a job.
- **Trial Work Period (TWP)** – The TWP allows your client to test their ability to work for at least 9 months. During their TWP, they will receive full Social Security Disability Insurance (SSDI) benefits regardless of how high their earnings might be, as long as they still have a disabling impairment. If their gross earnings are more than \$1,110 (in 2024), or they work more than 80 hours in self-employment in a month, they will use up one of their TWP months. The TWP continues until they accumulate nine TWP service months (not necessarily consecutive) within a rolling 60-month period.
- **Extended Period of Eligibility (EPE)** – The EPE begins the month after the Trial Work Period (TWP) ends, even if your client is not working that month. The first 36 months of the EPE is the reinstatement period. During the 36-month reinstatement period, your client gets benefits for all months their earnings or work activities are below the substantial gainful activity (SGA) level, as long as they still have a disabling impairment.

Other support programs that involve Vocational Rehabilitation, Medicaid while working, or special benefits include **Section 301**, **Section 1619(b)** and **Section 1619(a)**.



Work Incentives Planning and Assistance (WIPA) Projects

WIPA projects are community-based organizations that receive grants from SSA to provide Social Security Disability Insurance (SSDI) beneficiaries and Supplemental Security Income (SSI) disability recipients (including transition-to-work aged youth) with free access to work incentives planning and assistance. Each WIPA project has counselors called Community Work Incentives Coordinators (CWICs). To locate the WIPA project nearest you call, call **1-866-968-7842**, or toll free, **1-866-833-2967** (TTY) M-F 8 a.m. Eastern Time.

Medicare Coverage for Disabled Individuals

People receiving SSDI benefits will get Medicare coverage automatically after they have received SSDI for 24 months. For individuals diagnosed with Amyotrophic Lateral Sclerosis (ALS, commonly known as Lou Gehrig's disease), there is no waiting period for Medicare. Their Medicare coverage begins with the month they become entitled to disability benefits.

Continuing Disability Review (CDR)

We review most beneficiaries' medical conditions every three or seven years unless we believe that the condition will likely improve sooner. Social Security will send forms to the recipient or their representative payee to complete. The recipient or representative payee should return the completed forms to the local Social Security office. Currently, adults without a representative payee who have a personal **my Social Security** account have the option to complete and submit the CDR forms online. SSA representatives will review the forms and send them to the state Disability Determination Services (DDS). DDS will obtain records to make the determination regarding your client's continuing disability. DDS will send a notice to the recipient once the review is completed. The review may take several months. If the medical review determination is not favorable to the recipient, refer to the Appeals Process section of this guide for information.

It is very important that recipients complete the paperwork necessary for their medical review in a timely fashion. We must also document any work activity during the review period. If they previously reported the work and furnished their pay stubs, Social Security will have completed this part of the determination. If they did not report their work, we will need information about their work history, the pay stubs, as well as the medical information.

Child under Age 18

A CDR for a child receiving SSI is usually done every three years, depending on the child's condition. However, if the child was disabled based on low birth weight, a CDR is normally done by age one. When Social Security begins the review, we will ask the child's payee to show evidence that the child is receiving treatment for their condition. If the child's payee refuses to provide information regarding ongoing treatment, we may decide to look for a new payee.

When we start the review, the local Social Security office will send forms to the recipient or their representative payee requesting current medical information. It is very important to list all medical sources so Social Security can get as much medical information as possible. We will also need a completed medical release form **SSA-827** to request any additional medical information from the sources.

SSA will send a yearly publication entitled “*What You Need to Know About Your Supplemental Security Income (SSI) When You Turn 18*” to SSI youths between ages 14 – 17 and their representative payees. This annual brochure provides information on SSI work incentives that primarily affect youth (such as the Student Earned Income Exclusion and Section 301) as well as information about common programs and services the family and youth may find helpful such as vocational rehabilitation and the Department of Education’s Parent Centers. This publication is also available online at www.ssa.gov/pubs/EN-05-11005.pdf

Wounded Warriors

Military service members can receive expedited processing of disability claims from Social Security. Social Security disability benefits are different from those available from the Department of Veterans Affairs (VA) and require a separate application.

This expedited process applies to disability claims filed by military service members with a VA compensation rating of 100% permanent and total (100% P&T) or who become disabled while on active military duty on or after October 1, 2001, regardless of where the disability occurs. For more information regarding about benefits for Wounded Warriors, please visit www.ssa.gov/people/veterans/index.html.

Military Pay and Eligibility for Disability Benefits

Active-duty status and receipt of military pay do not necessarily prevent payment of SSDI benefits. Receipt of military payments should never stop someone from applying for SSDI. If they are receiving treatment at a military medical facility and working in a designated therapy program or on limited for duty status, SSA will evaluate their work activity to determine their eligibility for benefits.

Applicants cannot receive SSDI if they engage in substantial work for pay or profit. However, the actual work activity is the controlling factor and not the amount of pay they receive or their military duty status.

Service Members and veterans may apply for disability benefits at any time while in active-duty military status or after discharge, regardless of whether they are still hospitalized, in a rehabilitation program, or undergoing outpatient treatment in a military or civilian medical facility. They may apply online at www.ssa.gov/benefits/disability/, in person at the nearest Social Security office, by mail, or by phone. They may call 1-800-772-1213 or for TTY 1-800-325-0778 to schedule an appointment. A “disability starter kit” is available online at https://www.ssa.gov/disability/disability_starter_kits.htm to help individuals complete their application.

Neither a VA compensation rating of 100% P&T nor the existence of a medical condition developed during active military duty guarantees that your clients will receive Social Security disability benefits. An applicant must meet Social Security’s definition of disability in order for Social Security to approve their application for disability benefits. For more information, please visit www.ssa.gov/people/veterans/index.html.



Medicare and TRICARE

For service members who are entitled to Medicare Part A (hospital insurance) and Part B (medical insurance), TRICARE provides Medicare “wrap-around” coverage. Medicare is the primary payer for these beneficiaries, and TRICARE serves as a supplement, paying the Medicare deductible and patient cost share.

If service members are entitled to Medicare Part A based on age, disability, or End Stage Renal Disease (ESRD), they must enroll in Part B to retain their TRICARE benefits. For general information about TRICARE, please visit www.ssa.gov/legislation/tricareinfo.html.

Service members awarded retroactive SSDI may become entitled to Medicare Part A for months before they receive the disability award notice. Since October 2009, TRICARE beneficiaries who are awarded retroactive benefits based on disability or ESRD do not have to enroll in Part B for those months in the past and can keep their TRICARE coverage as long as they enroll in Part B prospectively.

The Affordable Care Act (ACA) of 2010 provides TRICARE beneficiaries who are entitled to Medicare Part A due to disability or ESRD, and who previously declined Medicare Part B during their initial enrollment period (IEP), the option to enroll in Medicare Part B during a 12-month special enrollment period (SEP). Service members should contact the Department of Defense (DOD) with any questions related to their TRICARE coverage and Medicare Part B enrollment. They may also visit www.ssa.gov/legislation/tricareinfo.html for more information.

Service Members Remain on Active Duty

Service members may receive Social Security disability benefits and remain on active duty. It is important that they immediately contact Social Security if there is a change in any of the following:

- Military Occupational Specialty (MOS) code
- Air Force Specialty Codes (AFSC)
- Navy Enlisted Classification (NEC)

A permanent change of station (PCS) move from one duty station to another is also a potential indicator that they may be going back to work and they should contact Social Security.

Changes in a recipient’s work status may affect their Social Security benefits. They need to tell SSA right away about any changes in work or active-duty status.

If they are planning to change their PCS, MOS, AFSC, or NEC, they can request a Benefits Planning Query (BPQY) from Social Security. This query contains information about the status of their disability benefits, work history and current work status, health insurance, scheduled medical reviews, and representative payee data.

They can use the BPQY as a tool to help them plan their return to work. They can request this query by calling **1-800-772-1213** (TTY **1-800-325-0778**) or visiting their local Social Security office. Supplemental Security Income (SSI)

SSI is a program that provides assistance based on financial need. Many people who are eligible for SSI may also be entitled to Social Security benefits. In fact, the application for SSI is also an application for Social Security benefits.

The SSI and Social Security programs are different in many ways. Unlike Social Security retirement, survivors or disability insurance benefits, SSI benefits are not based on an individual's prior work or a family member's prior work. Social Security taxes do not fund the SSI program. SSI is financed with federal general revenue funds. Each program has its own rules and regulations.

SSI can be paid to individuals age 65 or older (aged) and to blind or disabled people of any age (including children). Recipients must meet income and resource guidelines. In most cases, aged individuals do not have to meet disability guidelines. To start the SSI application process, they can visit www.ssa.gov/ssi/. While the Social Security Disability Insurance (SSDI) and SSI programs are different, the medical requirements for adults are the same. The applicant's state Disability Determination Services (DDS) agency will make a decision about their disability for the Social Security Administration.

In addition, to get SSI, they must meet all of the following criteria:

- Live in one of the 50 States, the District of Columbia, or the Northern Mariana Islands, or be a child of military parent(s) assigned to permanent duty anywhere outside the U.S. or certain students temporarily abroad,
- Be either a U.S. citizen or national of the U.S., or in one of certain categories of eligible noncitizens,
- Have filed an application.

A complete guide to understanding SSI is available at www.ssa.gov/ssi/text-understanding-ssi.htm.

SSI Guidelines

Information about SSI payment amounts is available at www.ssa.gov/ssi/text-general-ussi.htm. Payment is made on the first day of the month. If that date falls on a weekend or holiday, the payment is made on the preceding business day. In many states, a person who receives SSI automatically qualifies for Medicaid.

SSI Income

SSI is a needs-based program. When determining if your client is eligible for SSI, we consider their income, both earned and unearned. We also take into account the income of certain family members living in the same household (i.e., ineligible spouses, parents, stepparents, ineligible children, etc.).

Income is any item a person receives in cash or in-kind that they can use to meet their need for food or shelter. For SSI purposes, income includes the receipt of any item that can be applied, either directly or by sale or conversion, to meet basic needs of food or shelter (i.e., wages, self-employment, Social Security benefits, pensions, etc.).

Although some types of income do not affect the SSI payment, most income counts. Your client is responsible for reporting any changes in the household's income. These changes must be reported to Social Security as soon as possible, but no later than the 10th day of the next month. In most cases, the income reported will not change the SSI payment until two months after receipt unless the income makes your client ineligible for SSI.

More information on SSI income is available at www.ssa.gov/ssi/text-income-ussi.htm.

Living Arrangements

Your client's living arrangement is another factor used to determine the SSI payment amount. Income they receive in-kind, such as help with shelter expenses, may reduce their SSI payment.

If your client resides in an institution such as a hospital, nursing home, or jail, they may not be eligible for SSI or their SSI could be limited to \$30 a month. If their stay in a medical facility is temporary (90 days or less), they may be eligible to receive their regular SSI payment for a short time. For more information visit www.ssa.gov/ssi/spotlights/spot-temp-institution.htm.

Since changes in your client's living situation, including institutional care, may affect their SSI payment amount, they are responsible for reporting changes in where they live, who they live with, and any in-kind help they receive from others, both inside and outside their household.

More information on SSI living arrangements and this in-kind help is available at www.ssa.gov/ssi/text-living-ussi.htm.

Resources

As a program based on need, SSI also considers the value of a person's resources, including those of a spouse or parent(s) living in the same household, as one of the criteria in determining eligibility. An individual (or couple) with countable resources in excess of the statutory limit is not eligible for SSI.

Resources for SSI include, but are not limited to the following:

- Real estate
- Bank accounts
- Cash
- Stocks and bonds
- Vehicles
- Life insurance policies
- Achieving A Better Life Experience (**ABLE**) Accounts (balances over \$100,000)
- Any other valuable items that could be turned into cash
- Certain trusts established under the Indian Gaming Regulatory Act (IGRA)

An individual's resource limit is \$2,000 and a couple's is \$3,000. A child may have up to \$2,000 in resources in addition to the parents having \$2,000 (one-parent household) or \$3,000 (two-parent household). Some resources may not count, such as Indian lands, certain IGRA Trusts, ABLE accounts (balances under \$100,000), one vehicle used for transportation, and a home that serves as the individual's primary residence.

Your client is responsible for reporting any changes in resources owned. These changes must be reported to Social Security as soon as possible, but no later than the 10th day of the next month. Your client must report when they:

- Acquire a new resource (i.e., open a new bank account, purchase a new life insurance policy, get a second vehicle, etc.).
- Sell any real property or other resource. The money they receive may count as a resource the following month.
- Give away any money, real property, or other resources. Transferring any resource for less than it is worth may affect their eligibility to receive SSI.

More information on SSI resources is available at www.ssa.gov/ssi/text-resources-ussi.htm.

Tribal Benefit Programs and SSI

Tribes often develop income and resource programs for their members using gaming or other revenue. The benefit your client receives under a tribal program may affect their SSI eligibility or payment amount.

Our American Indians and Alaska Natives (AIAN) webpage (www.ssa.gov/people/aiant/) provides helpful publications to better understand the SSI exclusions related to the Tribal Acts and tribal benefits. It includes:

- A spotlight on some common types of tribal income and resources your SSI client must report to us
- A list of specific SSI AIAN exclusions
- Details about disaster relief and SSI Assistance Based on Need (ABON) exclusions
- Our policy on Indian Gaming Regulatory Act (IGRA) trusts
- A highlight on the Tribal General Welfare Exclusion Act of 2014 and the requirements necessary for a tribal program to be classified as ABON income
- An introduction to our new internal national precedent database called the **N**ative **A**merican **P**recedent and **R**esource Center (**NAPR**). This is where we will store information on each tribal program reported to SSA.

To determine how SSI treats a tribal benefit your client receives under a program, we must review the documentation they provide. Whenever your client conducts business with us about their tribal income and resources, please have them ask our claim specialists to check the **NAPR** Center. You can help us build a complete precedent directory by sharing information about any of your tribe's new programs. To report new programs, please contact our new Office of Native American Partnerships (ONAP) by email at SSA.Tribal.Communications@ssa.gov.

SSI for Children with Disabilities

SSI makes monthly payments to people with low income and limited resources who are 65 or older, or blind, or disabled. Your client's child, if younger than age 18, can be eligible if they have a physical or mental condition, or combination of conditions, that meets Social Security's definition of disability for children. Their income and resources and the income and resources of their ineligible natural or adoptive parent (and that parent's spouse, if any) must fall within the eligibility limits. The amount of the SSI payment is different from state to state because some states add to the SSI payment. Your client's local Social Security office can tell them more about their state's total SSI payment.



SSI Child's Income and Resources

We consider the income and resources of your client's child when deciding if the child is eligible for SSI. We also consider the income and resources of an ineligible natural or adoptive parent (and that parent's spouse, if any) living in the child's household. These rules apply if your client's child lives at home. They also apply if the child is away at school but returns home from time to time and is subject to your client's control.

If the income and resources of your client's child or the income and resources of an ineligible natural or adoptive parent (and that parent's spouse, if any) living in the child's household are more than the amount allowed, we will deny the child's application for SSI.

We limit the monthly SSI payment to \$30 when a child is in a medical facility and health insurance pays for their care.

SSI Child's Disability Requirements

Your client's child must meet all of the following requirements to be considered disabled and, therefore, eligible for SSI:

- The child must not be working and earning more than \$1,550 a month in 2024. (The earnings limit usually changes every year.)
- The child must have a physical or mental condition, or a combination of conditions, that result in "marked and severe functional limitations." This means that the condition(s) must seriously limit the child's activities.
- The child's condition(s) must have been disabling, or is expected to be disabling, for at least 12 months; or the condition(s) must be expected to result in death.

Providing Information about the Condition of Your Client's Child

When your client applies for SSI for their child based on a disability, we will ask your client for detailed information about the child's medical condition and how it affects their ability to perform daily activities. We also will ask your client to give permission to the doctors, teachers, therapists, and other professionals who have information about the child's condition to send the information to us.

If your client has any of their child's medical or school records, these should be sent to us as well. This will help speed up the decision-making process.

The Decision Process

We send all of the information your client gives us to the DDS office. Doctors and other trained staff in the DDS will review the information and will request the medical and school records of your client's child, and any other information needed to decide if the child meets our criteria for disability.

If the DDS cannot make a disability determination using only the medical information, school records, and other facts they have, they may ask your client to take the child for a medical examination or test. We will pay for the exam or test. The DDS may take three to six months to decide if the child meets our criteria for disability.

We May Make Immediate SSI Payments to Your Client's Child

For some medical conditions, there is a high likelihood of a medical approval. We can make SSI payments right away for up to six months while the DDS decides if your client's child meets the disability criteria. The following are some conditions that may qualify for these "presumptive" payments:

- Symptomatic HIV infection
- Total blindness
- Total deafness
- Cerebral palsy
- Down syndrome
- Muscular dystrophy
- Severe intellectual disability (child age 4 or older)
- Birth weight below 2 pounds, 10 ounces

If the DDS ultimately decides that the child's disability is not severe enough for SSI, the client will not have to pay back any SSI "presumptive" payments received.

SSI Continuing Disability Reviews (CDR)

We review most claimants' medical conditions every three or seven years unless we believe that the condition will likely improve sooner. Social Security will send forms to your client or their representative payee to complete. The client or representative payee should return the completed forms to the local Social Security office. SSA representatives will review the forms and send them to the state DDS. The DDS will obtain records to make the determination regarding your client's continuing disability. The DDS will send a notice to your client once the review is completed. The review may take several months. If the medical review determination is not favorable to the recipient, refer to the Appeals Process section of this guide for information.

The law requires that we review the child's medical condition from time to time to verify their disability still meets our criteria. Guidelines for CDRs:

- At least every three years for children younger than age 18, depending on the child's condition.
- If the child was disabled based on low birth weight, a CDR is normally completed by age one. If we determine their medical condition is not expected to improve by their first birthday, we may schedule the review for a later date.

More information on a continuing disability review (CDR) is available at www.ssa.gov/ssi/text-cdrs-ussi.htm.

When a Child Turns Age 18

In the SSI program, a child becomes an adult at age 18, and we use different medical and non-medical rules when deciding if an adult can receive SSI disability payments. For example, we do not count the income and resources of the child's parent(s) beginning the month after the child turns 18. We count only the disabled adult and their spouse's income and resources. We use the disability rules under the adult criteria when deciding whether a child age 18 or older is disabled.

If your client's child already receives SSI payments, we must review the child's medical condition when they turn age 18. We usually do this age-18 medical review during the one-year period that begins on the child's 18th birthday. We will use the adult disability rules to decide whether the 18-year-old is disabled. For more information, read ***What You Need To Know About Your SSI When You Turn 18*** (Publication No. 05-11005) available at www.ssa.gov/pubs/EN-05-11005.pdf.

If your client's child was not eligible for SSI before their 18th birthday because the child's parent(s) had too much income or too many resources, they may become eligible for SSI as an adult the month after turning age 18, and they can schedule an appointment to file a new SSI application.

SSI Continuing Eligibility Reviews (Redeterminations)

Social Security redetermines SSI eligibility and payment amounts of most recipients once every 1 to 6 years. Separate from these reviews, SSI recipients (or their representative payee) are responsible for promptly reporting changes in information, which may affect their SSI eligibility or payment amount. As changes are not always reported timely, Social Security established interfaces with certain federal and state agencies whose records contain information that may affect SSI eligibility or payment amount. The data secured from these interfaces may require subsequent contacts with your client.

If your client receives an appointment letter for a redetermination or review of an eligibility factor due to an interface, and is not able to make the scheduled appointment, the client should contact us as soon as possible to reschedule the appointment to a more convenient time.

If we conduct the review by mail, rather than by appointment, we will send a redetermination form for your client to complete, sign, and return. If a representative payee is involved, the payee must complete and sign this form. If the client or payee needs help completing the form, call us. Our staff can assist with filling it out.

Here are some items that may be needed for the period of review:

- Statements for all financial institution accounts: savings, checking, investments, retirement, etc., including any accounts where your client is a joint owner with someone other than their spouse
- Pay stubs
- Income tax returns, if self-employed
- Proof of all other income received (e.g., tribal lease payments, per capita payments, trust disbursements, pensions, annuities, unemployment compensation, worker's compensation, child support, etc.)
- Life insurance policies, including any current cash surrender value
- Burial contracts
- Title/Registration and loan balances for all vehicles
- Rental/lease agreement or rent receipts

More information on the redetermination process is available at www.ssa.gov/ssi/text-redets-ussi.htm.

Unfavorable Determination

SSI recipients are notified in writing of any decisions. When our decisions are not favorable to them, they are given the chance to request their payments continue while we make a first level appeal of a nonmedical decision. Recipients can request payment continuation when they appeal a decision within 60 days of receiving the unfavorable notice.

If the appeal decision is unfavorable, the claimant could be responsible for repayment of those continued payments. For more information, read *[Your Right to Question a Decision Made on Your Supplemental Security Income \(SSI\) Claim](#)* (Publication No. 05-10058) available at www.ssa.gov/pubs/EN-05-10058.pdf.

Slightly different rules apply to medical cessation cases. Medical cessation is when benefits end because of medical improvement. When appealing medical cessation cases, a person may elect to have benefits continued at both the first and second levels of appeal if they appeal the decision within 10 days of receiving the unfavorable notice. More information on the appeals process is available at www.ssa.gov/ssi/text-appeals-ussi.htm.

Direct Deposit

If your client has a bank account, they can sign up for Direct Deposit by doing any of the following:

- Start or change direct deposit online at www.socialsecurity.gov (Social Security benefits only). Contact their bank, credit union, or savings and loan association.
- Call Social Security toll-free at **1-800-772-1213** or TTY **1-800-325-0778**
- Visit their local Social Security office.

Direct deposit is a simple, safe, and secure way to get benefits. It is also Social Security's preferred means of paying benefits. Be sure to tell your clients to have their checkbook or a copy of their bank statement available when they are ready to update their record.

Direct Express

If your client does not have a bank account, or prefers another way to receive their check, we do offer Direct Express. Direct Express is administered by Comerica Bank.

We deposit federal benefit payments directly into your client's Direct Express account. Their monthly benefits will be available on their payment day—on time, every time. The Direct Express® card is simple and easy to use. Use it to do the following:

- Make purchases – Present the card when paying at any location that accepts MasterCard®. The money is automatically deducted from their account.
- Get cash – Get cash at ATMs, banks, or credit unions. Alternatively, get cash back with purchases at many retail locations.
- Use a mobile app – The Direct Express® mobile app (DXSM mobile app) is available on iPhone and Android smartphones and allows Direct Express® Debit MasterCard® cardholders to access their balance and transaction history, locate ATMs, and set up low balance and deposit alerts.



The Direct Express® card offers benefits that make it safer and more secure than checks. Benefits include the following:

- A personal identification number protects your client's account.
- Their card account has federal consumer protection, and their money is FDIC-insured.
- If their card is lost or stolen, it will be replaced.

Direct Express Fees

While there are fees for a limited number of optional transactions, it is possible to use the card free of charge. There is no cost to sign up for the card and there are no monthly fees. For more information related to associated fees, refer to www.usdirectexpress.com/faq.

Report a Missing Payment

If you do not receive your payment on the scheduled pay date, please contact your bank or financial institution first. They may be experiencing a delay in posting your payment. If you still need to report a late, missing, or stolen Social Security payment, call us toll-free at **1-800-772-1213** (TTY **1-800-325-0778**) or contact your local Social Security office. We will review the case and if the payment is due, we will replace it.

The Appeals Process

Right to Appeal

If your client disagrees with the decision, it can be appealed. When your client asks for an appeal, Social Security will look at the entire decision, not just the part with which they disagree. If Social Security made a wrong decision on the case, we will change it.

Your client has 60 days from the date they receive the letter telling them about Social Security's decision to request an appeal. Social Security assumes they receive the letter five days after the date on the letter, unless they can show it was received later.

If the appeal is not filed within the 60-day time limit, clients may lose the right to appeal. If your clients have good reason for not appealing within the time limit, Social Security may give more time. To do so, they must make a request in writing, which states the reason for the delay.

Four Levels of Appeal

There are four levels of appeal. If your client is not satisfied with the decision at one level, it may be appealed to the next stage. The four levels of appeal follow:

- Reconsideration
- Hearing by an Administrative Law Judge (ALJ)
- Review by the Appeals Council
- Federal Court review

File an Appeal

Your client, or their appointed representative, can appeal a determination/decision on their Social Security or SSI disability claims by filing a written request. They may do so by submitting a hearing request **online**, by downloading **the necessary forms** (HA-501 and, if a medical appeal, SSA-3441 and SSA-827) and sending them by mail, or writing a letter or asking for assistance to complete the request by calling a local Social Security office. Visit the *Appeal a decision we made*, page at www.ssa.gov/apply/appeal-decision-we-made.

For more information, go to www.ssa.gov/disability To learn more about the disability process.

Your client, or their appointed representative, may also appeal a non-medical decision by completing and submitting the **Non-Medical Appeal** request for reconsideration, hearing, or Appeals Council review online at <https://secure.ssa.gov/iApp/NMD/start>.

Appeals can be filed on many issues. The steps of the appeal process are the same for all appeals; however, the routing of appeal decisions varies depending on the issue involved. This guide includes a description of each of the processes but focuses on the disability appeal process.

Reconsideration

The first level of appeal is the reconsideration. A reconsideration is a complete review of the claim by someone other than the individual who made the original decision. All evidence, plus any additional evidence submitted, will be reevaluated and a new decision will be made.

This review may be completed in the district office, a payment center, or the Disability Determination Service (DDS), depending on the issue being appealed. The DDS makes the decision when the claim is denied because of medical reasons. When a decision is made on the reconsideration, Social Security sends a letter explaining the decision. It usually takes about 60 days to receive a decision, but it can take longer.

Hearing by an Administrative Law Judge (ALJ)

If your client disagrees with the reconsideration, the second level of the appeals process is a hearing before an Administrative Law Judge (ALJ). The judge working the case has had no part in any decision up to this point. The hearing process is very similar for all types of appeals.

If your client is requesting a hearing about their medical decision, the Administrative Law Judge (ALJ) will focus on their medical condition(s) and make a decision based on the evidence in the case file. The ALJ may also call witnesses to testify. For example, the ALJ may call a medical or vocational expert to testify.

During the non-medical hearing process, the ALJ will focus on the reason your client requested a hearing and request evidence specifically related to that issue. Examples of non-medical hearing request reasons include eligibility for SSA benefits, or issues that may have caused an overpayment.

The hearing request first starts at the local office, which then routes the request to one of the hearing offices to begin the process. The hearing office handling the case will send out a notice package acknowledging receipt of the hearing request and provide information about the hearing process and the options for attending the hearing (i.e., video, telephone, in person). Before the hearing, Social Security may ask the client to provide more evidence and to clarify information. Your client may appoint a representative. If your client does not wish to come to the hearing, Social Security must be notified in writing.



When the hearing is scheduled, your client and their appointed representative will receive another notice providing information about the time and place of the hearing. At the hearing, the judge will question the client and any witnesses, such as a vocational expert. After the hearing, the judge issues a written decision based on all the evidence. The hearing office then mails a copy of the decision to the client and their appointed representative.

Appeals Council

If your client disagrees with the hearing decision made by the ALJ, a review by Social Security's Appeals Council (third level) can be requested. The Appeals Council looks at all requests for review but may deny a request if it believes the hearing decision was correct. If the Appeals Council decides to review the case, the Council will either decide the case itself or issue an order returning your client's case to the ALJ for further action. The Appeals Council will notify your client by mail of the actions taken on your case.

Federal District Court

If your client disagrees with the Appeals Council's decision or if the Appeals Council decides not to review your client's case, they may file a lawsuit in a federal district court. The letter we send to them about the Appeals Council's action will also tell them how to ask a court to look at their case.

Appointing a Representative



To appoint someone as an official representative, each applicant must sign a written notice appointing them to represent them in dealings with Social Security and file it with us. Use Form SSA-1696 (Appointment of Representative) for this purpose. The form is available online at www.ssa.gov/forms/ssa-1696.pdf. They may also initiate the completion of an electronic version of the appointment form (e1696) which your client can sign and submit electronically to SSA for processing. See <https://www.ssa.gov/representation/> and <https://secure.ssa.gov/ssa1696/front-end/>.

If the applicant completed the SSA-1696 and submits an online application, annotate in the summary/remarks section "A Form SSA-1696 (Appointment of Representative) is being forwarded to Social Security on (date)."



Once the applicant files the written notice of appointment with Social Security, we will work with the representative, just as we would the applicant. An appointed representative can do the following on an applicant's behalf:

- Get information from the client's Social Security file
- Help get medical records or information to support their client's claim
- Accompany the applicant to any interview, conference, or hearing
- Request a reconsideration, hearing, or Appeals Council review
- Help the applicant and any witnesses prepare for a hearing and questioning

An appointed representative will also receive a copy of the decisions we make on the clients' claims.

Incorrect Payments

An incorrect payment occurs when a benefit is delivered early and the recipient is deceased, or when benefits are paid after the month of death.

Overpayments

An overpayment occurs when Social Security pays a beneficiary or recipient more than the amount that should have been paid for one or more months. If this happens, we will notify the overpaid person and their representative payee, if any. Our notice will include the amount of the overpayment, explain how and when the overpayment occurred, ask for a full refund, explain how we plan to recover the overpayment, and provide appeal, and waiver rights. It is very important that your client reads the notice carefully. *Repayment of Overpayments — Social Security Beneficiary.*

If the beneficiary agrees they have been overpaid, and the overpayment amount is correct, there are several ways to repay the benefits. We ask the beneficiary to repay the overpayment in full within 30 days of the notice. If they cannot do so, and they are receiving benefits, we will withhold the full amount of the benefit each month. The beneficiary can request a lesser withholding amount, subject to the approval of SSA.

If a financial hardship exists, we will look at the repayment amount being requested, review the beneficiary's financial situation, and make a decision. The beneficiary can submit their request using Form SSA-634 - Request for Change in Overpayment Recovery Rate, available online at www.ssa.gov/forms/ssa-634.pdf.

Full withholding of the Social Security benefit starts 30 days after we notify the beneficiary of the overpayment, so it is important that your client contact Social Security immediately to ask for a lower amount to be withheld from the payment, if needed. If the client receives Social Security benefits and was overpaid SSI payments, we can withhold the SSI overpayment from the Social Security payment.

Repayment of Overpayments — SSI Recipient

If a person receives SSI, we generally withhold 10 percent of the overpayment until the overpaid amount is recovered. If a financial hardship exists, a lesser amount can be requested by completing Form SSA-634 - Request for Change in Overpayment Recovery Rate, available online at www.ssa.gov/forms/ssa-634.pdf. Deductions from an SSI payment will not start until at least 60 days after we notify the recipient of the overpayment. If the person no longer receives SSI payments, the entire amount of the overpayment is due within 30 days. If payment cannot be made within 30 days, contact Social Security to work out a repayment plan. If repeated requests for the funds are not answered, Social Security will collect the overpaid funds from a federal tax refund, wages, future Social Security benefits or SSI payments.

Repayment of Overpayments - Non-Beneficiary

When your client doesn't receive SSA benefits, you should direct them to one of the following:

- Visit www.pay.gov and search for "Social Security" to pay by credit card, debit card, or bank account.
- Use their bank's online bill pay feature and make a payment for the entire amount to "Social Security Administration."
- Contact SSA to set up a plan to pay back the amount in monthly installments:
 - ◆ Visit www.ssa.gov for information and use online services, or
 - ◆ Call us toll-free at **1-800-772-1213** or at **1-800-325-0778** (TTY) if deaf or hard of hearing.



If the person is not receiving benefits or the repayment agreement becomes delinquent, we can recover the overpayment from federal income tax refunds, from wages, and future SSA benefits. It is important to beware SSA also reports the delinquency to credit bureaus.

More information about repayment options, can be found online at www.ssa.gov/manage-benefits/repay-overpaid-benefits.

Overpayment Appeal Rights

When a client does not agree that they were overpaid, or if they believe the amount is incorrect, they can file an appeal using Form SSA-561 – Request for Reconsideration, available online at www.ssa.gov/forms/ssa-561.html. The appeal must be in writing and received by Social Security within 60 days from the date shown on the overpayment letter. The reason that your client disagrees with the decision or amount must be included on the request form.

Waiver Requests

If beneficiaries, recipients, or liable payees do not believe they should have to repay the overpayment, a waiver can be requested. Form SSA-632-BK (Request for Waiver) is available online at www.ssa.gov/forms/ssa-632.html or at your client's local Social Security Office and must be submitted. A separate waiver form must be completed for each overpayment a person wants waived. A waiver can be requested at any time, but there are two basic criteria for the waiver to be approved:

1. The person was not at fault in causing the overpayment, and
2. Paying it back would cause financial hardship or paying it back would be unfair.

If the request for waiver is denied, the denial letter explains how to appeal the decision. Before the waiver is denied, a personal conference will be conducted by phone or in person with your client by the local Social Security office.

Underpayments for SSI Recipients with a Dedicated Account

Sometimes a large amount of money for past due SSI payments may require a dedicated account or payments in installments.

SSI Dedicated Accounts for Children Under Age 18

When disabled children under age 18 are due retroactive payments, and these payments equal at least six times the full SSI federal payment, payees are required to open a special account at a financial institution. All past-due payments are deposited directly into this “dedicated account”, and the use of these funds is restricted. A “dedicated account” must be separate from the account used for the regular monthly SSI payment and can only be a checking, savings, or money market account. Other funds cannot be put into the “dedicated account.” The title on the “dedicated account” must show that the child owns the funds, including interest and the representative payee has only fiduciary interest in the funds. The local Social Security office representative will explain all of this to the representative payee.

It is very important the payee understands that this account is monitored, and the money can only be used for the following expenses:

- Medical treatment
- Education or job skills training

If Social Security gives permission, and the use relates to the child's impairment, the money may also be used for the following:

- Personal needs or assistance (e.g., In-home nursing care)
- Special equipment
- Housing modification
- Therapy or rehabilitation
- Other items or services approved by your client's local Social Security office, like legal fees incurred by the child in establishing a claim for disabled child's benefits

The dedicated account cannot be used for basic monthly maintenance costs such as food, clothing, or shelter. The payee must keep receipts, bank statements, and maintain an expense record for at least two years as verification of expenditures and must be able to explain to SSA how any expenditure relates to the child's disability.

SSI Installment Payments for Retroactive Benefits

When past-due benefits exceed three times the SSI federal benefit rate plus the federally administered state supplement, (see www.ssa.gov/oact/cola/SSI.html), Social Security must pay the person in up to three installment payments. The installment payments are made every six months. The first two installments cannot be larger than three times the monthly benefit amount. Any remaining benefits will be paid in a last installment payment. This money does not count as a resource for nine months after it is received. If there is an outstanding debt, or medically necessary expenses, related to food, clothing, shelter or medical needs, Social Security may be able to increase the amount being paid in this installment payment. Representative and Organizational Payees

Representative Payees

Social Security's Representative Payee program provides financial management for beneficiaries and recipients who are incapable of managing their Social Security or SSI payments. Representative payees help Social Security beneficiaries and SSI recipients by making sure "current and reasonably foreseeable" needs are met. Some of these needs include making sure the housing and utilities are paid on time, food is available, clothing is purchased, and personal care items are provided.

If your client needs to help another person in managing their money, there are several things they need to know:

- How to apply to be a representative payee
- What the payee duties are, and the reporting responsibilities
- How to account for the money they receive on behalf of the beneficiary
- What to do when they can no longer serve as representative payee

Appointing a Representative Payee

We consider several factors before making a payee determination. We consider how long the applicant and the beneficiary or SSI recipient have known each other. We also consider their relationship, any criminal history of the person applying to be the representative payee, if the payee has other sources of income, or if the beneficiary or recipient owes the payee money. Selecting the right representative payee for an individual who needs assistance is very important to us.

We appoint a suitable representative payee (payee) who manages the payments on behalf of Social Security beneficiaries and SSI recipients. Social Security will verify the identity of the applicant. Social Security offers different options for representative payee applicants to complete the application process by video (video service delivery-VSD), over the phone, or in the office. Currently, we do not offer an online process to apply to be a representative payee.

Advance Designation

Social Security also offers the option to advance designate a representative payee. Advance designation allows a person to designate up to three individuals who could serve as a representative payee if the need ever arises. We offer advance designation to capable adults and emancipated minors who are applying for or receiving Social Security benefits, SSI, or Special Veterans Benefits. If the beneficiary becomes unable to manage, or direct others to manage benefits in the future, they will have peace of mind knowing that someone they trust may be appointed to manage their benefits for them. Social Security will only contact advance designees if they find a need to find a representative payee to assist in managing benefits. Your client can submit and update their advance designation request when they apply for benefits or after they are already receiving benefits. They may submit or update advance designations through their personal my Social Security account, by calling **1-800-772-1213** (TTY **1-800-325-0778**) or their local Social Security office. Additional information is available at www.ssa.gov/payee/advance_designation.htm.



Representative Payee Responsibilities

Once Social Security selects the applicant to be a representative payee, the payee must make sure the beneficiary's or recipients' day-to-day needs are met. As a payee continues helping, they will be asked to report any changes that could affect the amount of money the beneficiary or recipient is due. The below list includes some examples of things that may affect the benefit amount and should be reported by the payee if the beneficiary or recipient does any of the following:

- Moves,
- Starts or stops working,
- Has a medical condition that improves,
- Starts receiving another benefit type or the amount changes,
- Goes to jail for a crime that carries a sentence of more than one month,
- Is a child and custody changes or an adoption takes place,
- Is a stepchild and the parents get a divorce,
- Gets married,
- No longer needs a payee,
- Dies,
- Has an unsatisfied felony warrant (or in jurisdictions that do not define crimes as felonies, a crime punishable by death or imprisonment exceeding one year) issued for his/her arrest, or
- Is violating a condition of probation or parole under state or federal law.

The representative payee must tell us if they are no longer responsible for the beneficiary or SSI recipient, they move, they no longer want to be payee, they are convicted of a felony, or if they have violated a condition of their probation or parole.

As a representative payee, you are responsible for keeping records, and when requested, reporting to us how you spend the benefits received on behalf of a Social Security beneficiary or SSI recipient. The *Strengthening Protections for Social Security Beneficiaries Act of 2018* directs state Protection & Advocacy (P&A) system organizations to conduct all periodic onsite reviews along with educational visits.

The P&A review includes:

- an interview with the individual or organizational representative payee,
- a review of the representative payee's financial records for the requested beneficiary or sample of beneficiaries served,
- a home visit and interview for each beneficiary included in the review; and,
- an interview with legal guardians and third parties, when applicable.

Responsibilities of Reporting

In addition to the responsibilities listed above, there are special reporting requirements for payees of SSI recipients.

Representative payees must report the following for SSI recipients:

- If the recipient moves to or from a hospital, nursing home, correctional facility, or other institution.
- If the recipient is married, report when the couple separates; if separated, report when they resume living together.
- Has a change in income or resources.
- Someone moves into or out of the recipient's household.

If the representative payee fails to report any of the actions described above to Social Security, the SSI recipient may be paid too much money. In that case, the payee may have to return the money the recipient was not due, and payments may stop. If Social Security determines the representative payee intentionally withheld information in order to continue receiving payments, the representative payee may be criminally prosecuted. Criminal penalties may include fines and imprisonment.

Representative payees for SSI recipients should be aware that savings and other resources are limited to \$2,000 (\$3,000 for a couple) under the SSI program. Keep in mind that interest on savings counts toward that limit.

Accounting Responsibilities

Representative payees are responsible for keeping records and reporting how they spent the beneficiary's benefits by completing a Representative Payee Report (Form SSA-623, SSA-6230, or SSA-6233). There are certain exceptions for payee reporting. The following payees are exempt from the annual accounting requirement:

- A natural or adoptive parent of a minor child entitled to Social Security benefits and/or eligible for SSI payments who primarily resides in the same household as the beneficiary or recipient.
- A legal guardian of a minor child entitled to Social Security benefits and/or eligible for SSI payments who primarily resides in the same household as the beneficiary or recipient.
- A natural or adoptive parent of a disabled individual (as defined in section 223(d) of the Act) entitled to Social Security benefits and/or eligible for SSI payments who primarily resides in the same household as the beneficiary or recipient.
- The spouse of an individual entitled to Social Security benefits and/or eligible for Special Benefits for Certain World War II Veterans or SSI payments.

Exempted payees must continue to adhere to reporting responsibilities and duties, such as keeping detailed and accurate records of how they use benefits, in order to provide an accurate report to SSA when requested.

The appropriate form will be mailed to all other Representative Payees about once a year. It may be helpful to obtain a copy of Social Security's publication **05-10076, *A Guide for Representative Payees***, because it contains a worksheet of income and expenses that will be useful when completing the Representative Payee report. This report is also available online at www.ssa.gov/payee.

When a Representative Payee Stops Being a Payee

If the representative payee wishes to stop being a payee, they must notify Social Security immediately. This is important because a new payee will need to be selected as soon as possible. When the representative payee is no longer responsible for the beneficiary's or recipient's funds, they must return any benefits to Social Security, including interest earned and cash on hand, that belongs to the beneficiary or recipient. The funds will be re-issued to the beneficiary or recipient, or to a new payee.

When Your Client Wants to be Their Own Payee

Your client has the right to receive their own Social Security payment, unless Social Security has reason to believe they may spend their money in a way that might hurt them. If your client has a representative payee because of a physical or mental disability, in order to become their own payee, they must show SSA that they are now mentally and physically able to handle their money themselves. You can help your client provide one of the following:

- A doctor's statement that there has been a change in their condition, and the doctor believes they are able to care for themselves.
- An official copy of a court order saying that the court believes they can take care of themselves.
- Other evidence that shows their ability to take care of themselves.

NOTE: *Be advised that if Social Security believes their condition has improved to the point they no longer need a payee, we may reevaluate their eligibility for benefits. Should you discover a situation where the payee has only been changed on one program (such as SSI), but your client receives benefits from both SSI and Social Security, you will need to contact your local Social Security office to make the correction on the other payment.*

Organizational Payees

While most people receive their Social Security and SSI payments directly, some need assistance in managing their benefits. Payments to these individuals are paid through a representative payee who receives payment on behalf of the beneficiary or recipient and provides for their personal needs. For many beneficiaries or recipients, a family member or friend serves as the payee. For a growing number of individuals, no one is available to fill this role. To ensure that beneficiaries or recipients who are unable to handle their own benefits have qualified representative payees to act in this capacity, Social Security is recruiting organizations that already provide some case management services, spiritual guidance, or community assistance.

The SSA's Representative Payment program provides assistance to the most vulnerable members of society: the young, elders, and people with disabilities who are unable to manage their Social Security benefits or SSI payments.

Managing Benefit Payments

A representative payee receives and manages the beneficiary's or recipient's payments and uses them for the care and benefit of the beneficiary or recipient. Social Security benefits or SSI payments are properly used if they are used in the following manner:

- Spent for the beneficiary's current and reasonably foreseeable needs
- Saved and invested for the beneficiary if the current needs are met

An Organizational Payee will be required to make sure that all the beneficiaries' or recipients' needs are met and that detailed and accurate records of how they use benefits are maintained.

Training for Payees

Social Security has information about the Representative Payee and Organizational Payee process and responsibilities at www.ssa.gov/payee/index.htm.

Reporting Changes

After your client or their family begins receiving Social Security benefits or SSI, their situation may change. They will want to keep in touch with SSA to report those changes.

Changes are reported by calling **1-800-772-1213** (TTY **1-800-325-0778**) or by contacting the local Social Security office. In addition, some changes can be made online through a personal **my Social Security account**. Unreported changes may cause payment errors, such as overpayments or underpayments.

Clients who receive Social Security benefits should report the following:

- Changes of mailing address
- Change of marital status
- Name change
- Disabled beneficiaries or recipients should report any time they start or stop a job, including self-employment, and report their wages
- An increase or decrease in earnings if they receive retirement or family benefits
- Changes in a direct deposit account
- Any outstanding felony or arrest warrants for escape from custody, flight to avoid prosecution or confinement, or flight-escape
- A new child born or adoption of a child who is receiving benefits
- Leaving the U.S.
- A change in school enrollment for a child age 18 to 19
- A child receiving benefits leaves the client's care
- If receiving disability benefits, improvements in their medical condition
- If they start receiving a retirement or disability pension from a job for which they did not pay Social Security taxes, or if that pension amount changes

Many services are now available online from Social Security's website. Go to www.ssa.gov/onlineservices/ to learn what can be done online.

SSI Reporting

Because the SSI program is based on many aspects of income, resources, and living arrangement, there are additional changes that must be reported. These changes must be reported by the 10th of the month following the month of the change to ensure the SSI payment is correct:

- A change in the number of people in the household
- A move or change of address
- A change in help with living expenses from family or friends
- An increase or decrease in things your client owns, like money in the bank
- Entering or leaving an institution, such as a hospital, nursing home, prison, or jail
- Change in school attendance if they are under age 22
- A sale of their interest in Indian Trust lands
- Leaving the U.S. for 30 or more days in a row or for a full calendar month

Monthly wages must be reported for custodial parents of a child on SSI. They can use their personal *my Social Security account*, the SSA Mobile wage reporting app, or the SSI Telephone Wage Reporting system to do this. The local office can provide more information about these convenient programs.

When a situation changes and your client tells us about the change, we can explain how the change affects the benefits received.

Tribal Courts

Tribal courts operate a two-level court system and have general civil jurisdiction and limited criminal jurisdiction. Tribal courts address such issues as customs, traditions, and culture of the Tribe, including the interpretation relating to federal laws, rules and regulations, and laws of the state.

Tribal courts are considered guardians of tribal sovereignty. Tribal courts issue decisions on probate cases, protection orders, traffic cases, adoptions, name changes, criminal cases, and domestic relations, depending on the tribe. NOTE: Not all tribal courts are patterned the same.

Resources:

- National Directory of Tribal Justices Systems www.naicja.org
- Tribal Court Clearinghouse www.tribal-institute.org
- National Indian Justice Center www.nijc.org
- National Native American Bar Association www.nativeamericanbar.org
- Federal Indian Bar Association *Indian Law Section – Federal Bar Association (fedbar.org)*



Reporting Fraud, Waste, or Abuse

If you suspect someone of committing fraud, waste, or abuse against the Social Security Administration and/or its programs, the SSA's Office of the Inspector General is responsible for investigating your reports. The SSA OIG is also responsible for investigating and protecting the public against schemes that use SSA as the bait. If you suspect someone is committing fraud, waste, or abuse, try to capture as much information about the matter as you safely can:

- Names and addresses of the involved individuals or companies;
- Screenshot of the suspicious website or social media account. Also, try and capture or note the website address or social media account link, and how you came across the suspicious matter;
- For emails and text messages, please try and capture the entire message and any included message links.
- For U.S. mail solicitations - please retain the complete communication, including the outside envelope and all inserts.

This information will help the Inspector General to locate the source of the suspicious activity. You can report the information anonymously. However, providing your contact information could help the Inspector General in its efforts to review the suspicious matter.

Please send the information via USPS mail to:

Office of the Inspector General Fraud Hotline
Social Security Administration
P.O. Box 17768
Baltimore, MD 21235

You may also report SSA-related allegations of fraud to Inspector General at <https://oig.ssa.gov> or **1-800-269-0271**. For useful information of where to report other types of fraud please visit the Inspector General's online information guide at <https://oig.ssa.gov/fraud-reporting/resources-for-other-types-of-fraud/>.



Reporting Elder Abuse

According to a study released in 2010 by the American Journal of Public Health, approximately five million American elders are victims of abuse. This exceeds the number of domestic violence and child abuse victims combined. Social Security beneficiaries and recipients are included in the millions who suffer sometimes physical, emotional, and financial abuse, as well as neglect of basic care and medical needs.

The number of reports of financial abuse against an elder is higher than those of emotional and physical abuse, and neglect. Learn to recognize the signs and report it to abuse hotlines in your state or your tribe's Adult Protective Services (APS).

APS agencies operate under state law to investigate reports of elder abuse and to work with the victims to protect them and stop the maltreatment. It is important that APS agencies in every community have a close working relationship with Social Security to assist with the following:

- Remove abusive representative payees
- Prevent unsuitable representative payees
- Appoint appropriate representative payees who will protect the victim's benefits

Social Security is with you through life's journey. The agency takes this commitment seriously. Social Security has made great strides to protect beneficiaries and recipients from financial exploitation, and to coordinate with APS agencies on behalf of our mutual clients. You can help too, by visiting the Administration for Community Living at <https://acl.gov/> for more information on how you can be involved.

You can report abuse to Social Security using our Fraud Hotline (**800-269-0271**) Monday - Friday between 10 a.m. and 4 p.m. Eastern Time. You can also report fraud directly to any Social Security office or by using the toll-free number, **800-772-1213**.

Medicare

Most people qualify for Medicare when they turn 65. Others qualify for Medicare based on their disability. The program helps with the cost of health care, but it does not cover all medical expenses or the cost of most long-term care.

Although the Centers for Medicare & Medicaid Services (CMS) is the agency in charge of the Medicare program, your client can apply for Medicare at a Social Security office, and we can give them general information about the Medicare program. Additional information about the Medicare program is available at www.medicare.gov.

Medicare has Four Parts:

- Medicare Part A, Hospital Insurance
- Supplemental Medicare Part B, Medical Insurance
- Medicare Part C (Medicare Advantage), which was formerly known as “Medicare + Choice”
- Medicare Part D, Prescription drug coverage

Part A

Part A is paid for by a portion of Social Security taxes. It helps pay for inpatient hospital care, skilled nursing care, hospice care, and other services.

Part B

Part B is paid for by the monthly premiums of people who are enrolled in Medicare and by general funds from the U.S. Treasury. It helps pay for doctor's fees, outpatient hospital visits, and other medical services and supplies that are not covered by Part A.

NOTE: If the individual does not enroll in Part B when first eligible for it, they may have to pay a late enrollment penalty for as long as they have Part B coverage. They may also have to wait to enroll, which will delay this coverage.

Part C

Part C (Medicare Advantage) plans allow the client to choose to receive all health care services through a provider organization. These plans may help lower the cost of receiving medical services or provide extra benefits for an additional monthly fee. Your client must have both Parts A and B to enroll in Part C. However, since most International Telecommunication Unions (ITUs) do not have contracts with Medicare Advantage plans, enrollment is not a recommended option for someone who primarily uses ITUs for their healthcare issues.

Part D

Part D (Prescription drug coverage) is voluntary, and the costs are paid for by Medicare and monthly premiums of enrollees. Unlike Part B, in which individuals are automatically enrolled, your client must choose the plan and enroll themselves, except for those described below under the Extra Help (subsidy) with Medicare Prescription drug coverage.

People who have Medicare and are receiving SSI and Medicaid or both, or who participate in the Medicare Savings Programs, are deemed eligible for a subsidy. This means they do not have to file an application for Extra Help (subsidy) and will be automatically enrolled with a Prescription drug plan.

NOTE: Your client may owe a late enrollment penalty. If they go without a Medicare Prescription drug plan (Part D), or without a Medicare Advantage plan (Part C) (like an HMO or PPO), or other Medicare health plans that offers Medicare Prescription drug coverage, or without creditable Prescription drug coverage for any continuous period of 63 days or more after your client's Initial Enrollment Period (IEP) is over. However, if they get Extra Help (subsidy), they do not pay the late enrollment penalty.

Medicare Enrollment

If your client is already receiving Social Security benefits, they are automatically enrolled in Medicare Part A and B when they turn age 65. However, because there is a premium for Part B coverage, your client will receive an initial enrollment package by mail a few months before they become eligible for Medicare (in some instances).

Note: If your client has a higher income, the law requires an adjustment to the monthly Medicare Part B (medical insurance) and Medicare prescription drug coverage premiums. Higher-income beneficiaries pay higher premiums for Part B and prescription drug coverage. However, this affects less than 5 percent of people with Medicare, so most people do not pay a higher premium.

If your client is not receiving benefits at 65, they should file online at www.ssa.gov/medicare or call Social Security for an appointment three months prior to their 65th birthday so a representative can help them decide if they should sign up for Medicare.

Remember, even someone who does not have enough work credits can apply for Medicare as long as they meet other criteria:

- They must be a U.S. citizen or a lawfully admitted noncitizen who has lived in the U.S. continuously for the five years before they apply for Medicare.
- Your client can apply online for retirement to include Medicare or can apply for Medicare only.
- They can also file for Medicare based on a spouse who has enough work credits. When they apply for Medicare, we can also take an application for retirement benefits, if needed.

If Medicare eligibility is based on being disabled, Medicare will begin after they have received monthly benefits for 24 months, unless they have amyotrophic lateral sclerosis (ALS) or End Stage Renal Disease. For example, if a person starts receiving monthly disability payments in January 2022, they will be eligible for Medicare in January 2024.

Effective Date of Part A Enrollment

When your client first becomes eligible for hospital insurance (Part A), they have a seven-month period (the IEP) in which to sign up for medical insurance (Part B). A delay in signing up may cause a delay in coverage and result in higher premiums. If your client is eligible at age 65, their initial enrollment begins three months before their 65th birthday, including the month they turn age 65 and ends three months after that birthday. If your client is eligible for Medicare based on disability or permanent kidney failure, their IEP depends on the date their disability or treatment (dialysis or transplant) began.

Effective Date of Part B Enrollment

If your client has been automatically enrolled or if they take action to sign up for Medicare Part B during the first three months of their initial enrollment period, their medical insurance protection will start with the month they are first eligible.

Beginning in 2023, if your client enrolls during the last 4 months of their initial enrollment period, their coverage will start the first day of the month after they sign up. The following chart shows when their Medicare Part B becomes effective:

The following chart shows when Medicare Part B becomes effective:

If you enroll in this month of your initial Enrollment Period	Your Part B Medicare coverage starts
1 to 3 months before you reach age 65	1 to 3 months before you reach age 65
The month you reach age 65 or 1 to 3 months after you reach age 65	The month you reach age 65 or 1 to 3 months after you reach age 65

Medicare Savings Programs

When individuals need assistance paying for Medicare Part B (and Part A if the individual is subject to a premium), Medicaid has Medicare Savings Programs that may help, depending on the state that they reside in. Qualified Medicare Beneficiary (QMB) pays the Medicare Part A and B premiums plus deductibles and coinsurance. The Special Low-Income Beneficiary (SLMB) and Qualifying Individual (QI) programs pay Medicare Part B premiums for qualified individuals. Each of these programs considers the individual's (or couple's) resources and the specific program for which the individual qualifies is based on where their income falls in an income range. Only your client's state can decide if they qualify for help under these programs.

A Medicaid case manager in the local Office of Public Assistance can determine whether an individual qualifies for one of these Medicaid programs, as well as other Medicaid programs.

It is very important to assist individuals with applications for Medicaid, because IHS, Tribal Health Programs and Urban Indian Health Centers (collectively known as the ITU system) rely on Medicare and Medicaid to supplement their funding.

General Enrollment for Part B

If your client doesn't enroll in Medicare Part B during their IEP, they have another chance each year to sign up during a general enrollment period (GEP) from January 1 through March 31. Their coverage starts the first day of the month after they sign up. However, your client may have to pay a late enrollment penalty for as long as they have Part B coverage. Their monthly premium will go up 10% for each 12-month period they were eligible for Part B but didn't sign up for it.

In 2023 and later, if the client enrolls in this month of the General Enrollment Period...

Then Part B Medicare coverage starts...

January	February
February	March
March	April

Special Enrollment Period

After your client's first chance to sign up (IEP), there are certain situations when they can sign up for Part B (and Premium-Part A) without paying a late enrollment penalty. A Special Enrollment Period (SEP) is only available for a limited time. If they don't sign up during their SEP, they'll have to wait for the next GEP, and they might have to pay a monthly late enrollment penalty.

If your client is 65 or older and is covered under a group health plan, either from their own or their spouse's current employment, they can enroll in Medicare Part B during the SEP. This means that they can delay enrolling in Medicare Part B without having to wait for the next GEP and having to pay a late enrollment penalty. The rules allow your client to do the following:

- Enroll in Medicare Part B any time while your client is covered under the Group Health Plan (GHP) based on current employment
- Enroll in Medicare Part B during the eight-month period that begins with the month your client's group health coverage ends or the month employment ends, whichever comes first.

SEP rules do not apply if employment or employment-provided group health plan coverage ends during your client's IEP. An individual may not enroll under SEP while still in their IEP.

People who receive Social Security disability benefits and are covered under a GHP from either their own or a family member's current employment also have a SEP.

Note: Beginning on or after January 1, 2023, individuals who are eligible for Medicare on any basis can enroll (or re-enroll) in Medicare Part B Supplementary Medical Insurance (SMI) and Part A Premium Hospital Insurance (HI) during any months that fall within the duration of the specific exceptional conditions. For more information on Special Situations (Special Enrollment Period) visit CMS' website at www.medicare.gov/basics/get-started-with-medicare/sign-up/when-does-medicare-coverage-start#SEP

Enrollment in Part D – Medicare Prescription Drug Plan

Medicare offers prescription drug coverage to everyone with Medicare. If your client decides not to join a Medicare drug plan when they are first eligible, and they do not have other creditable prescription drug coverage, or they do not get Extra Help (Subsidy), they will likely pay a late enrollment penalty.

To get Medicare prescription drug coverage, your client must join a plan run by an insurance company or other private company approved by Medicare. Each plan can vary in cost and drugs covered. Visit the Medicare Plan Finder at www.medicare.gov/find-a-plan to view estimated yearly costs for each plan and your client's costs per prescription drug for each month. For information about joining a plan, your client may visit www.medicare.gov or they may call 1-800-633-4227 (1-800-MEDICARE).

Extra Help (Subsidy) with Medicare Prescription Drug Plan

Your client may be able to get Extra Help (subsidy) to pay for the monthly premiums, annual deductibles, and co-payments related to the Medicare Prescription drug program. However, they must be enrolled in a Medicare Prescription drug plan to get this Extra Help (subsidy). Your client may file an application for Extra Help (subsidy) online at www.ssa.gov/medicare/part-d-extra-help.

Individuals who have Medicare and receive SSI and Medicaid or both, or who participate in the Medicare Savings Programs are deemed eligible for a subsidy. This means they do not have to file an application for Extra Help (subsidy) and will be auto enrolled with a prescription drug plan.

When a Medicare beneficiary appears to have limited income and resources but is not deemed eligible for subsidized prescription drug coverage, Social Security will periodically notify the beneficiary about the availability of Extra Help (subsidy). These individuals may file an application for Extra Help (subsidy) online or contact their local Social Security office.

Application Process

If your client is already receiving Social Security benefits at least four months prior to the month they turn 65, they will automatically be enrolled in Medicare Parts A and B upon turning age 65.

However, because a premium is charged for Part B coverage, your client has the option of refusing the Part B. Your client will receive an initial enrollment package, including the Medicare Card, by mail a few months before they become eligible. To refuse Part B, your client must check the box on the back of the card to indicate that they do not want Part B, sign, and return the card.

If your client is not already getting benefits when they turn 65, they should file online at www.ssa.gov/medicare/sign-up or call 1-800-772-1213 (TTY 1-800-325-0778) three months prior to their 65th birthday so we can help them decide if they should sign up for Medicare.

Your client should do this even if they plan to continue working or do not think they have enough work credits under Social Security, because Medicare enrollment period rules are very strict. If your client wants to file for Medicare only, they can file online or they can call the 800-number listed above between 8 a.m. and 7 p.m. Monday to Friday.

Our representatives there can make an appointment for them at their local Social Security office. When your client applies for Medicare, we often take an application for retirement benefits, if needed. If your client wants to apply, consider applying for retirement and Medicare benefits online.

If your client's eligibility for Medicare is based on being disabled, entitlement will be effective 24 months after his or her entitlement to monthly benefits begins. As an example, if entitlement to monthly disability payments begins in January 2022, then eligibility for Medicare starts in January 2024. However, because your client must pay a premium for Part B coverage, they will have the option of refusing it. Your client will want to evaluate their health insurance to make an informed decision before refusing Part B, since refusing coverage can result in premium penalties. As mentioned earlier, you want to always refer them to the state for the Medicare Savings Programs if it appears they meet income and resource limits and they indicate they cannot afford the premiums.

Online Resources

The Benefit Eligibility Screening Tool (B.E.S.T.) contains information about eligibility for Medicare, Disability, Retirement, Survivors, Special Veterans, and SSI benefits.

<https://ssabest.benefits.gov/>

Discover Retirement Options and decide when to start benefits.

www.ssa.gov/retirement

Retirement Earnings Test Calculator shows how we pay benefits while working.

www.ssa.gov/OACT/COLA/RTeffect.html

Disability Planner describes what is available and how to qualify.

www.ssa.gov/benefits/disability/

Survivors Planner explains the benefits payable if the worker dies and how family members qualify.

Visit www.ssa.gov/benefits/survivors/



Apply for Benefits

Your client can file a retirement or spouse's benefit application online or by appointment with the local Social Security office.

[**https://secure.ssa.gov/iClaim/rib**](https://secure.ssa.gov/iClaim/rib)

A disability benefit application is required in conjunction with the disability and work history report. Your client can complete both the application and report online or by appointment with the local Social Security Office.

[**https://secure.ssa.gov/iClaim/dib**](https://secure.ssa.gov/iClaim/dib)

Appointment of Representative Form is available online, but must be printed, completed, and signed.

[**www.ssa.gov/forms/ssa-1696.html**](http://www.ssa.gov/forms/ssa-1696.html)

Representatives can initiate an Appointment of Representative Form online that the client can submit electronically to SSA for processing.

[**https://www.ssa.gov/representation/**](https://www.ssa.gov/representation/)

Application claim status can be checked by going to your *my* Social Security account.

[**www.ssa.gov/apply/check-application-or-appeal-status**](http://www.ssa.gov/apply/check-application-or-appeal-status)

The Affordable Care Act (ACA) enables most U.S. citizens and legal residents to purchase health insurance.

[**www.healthcare.gov**](http://www.healthcare.gov)

Your client can apply for Medicare Part A (hospital insurance) and Part B (medical insurance) online.

[**www.ssa.gov/medicare**](http://www.ssa.gov/medicare)

If your client already has Medicare Part A, they can enroll in Medicare Part B online if they qualify for a Special Enrollment Period.

[**www.ssa.gov/medicare/sign-up**](http://www.ssa.gov/medicare/sign-up)

Extra Help (subsidy) with Medicare prescription drug costs is available; your client can easily apply online.

[**https://secure.ssa.gov/i1020**](https://secure.ssa.gov/i1020)

For More Information

Visit Social Security's American Indians and Alaska Natives (AIAN) website.

[**www.ssa.gov/people/aian**](http://www.ssa.gov/people/aian)

Business Services Online provides a suite of services for organizations.

[**www.ssa.gov/thirdparty/business**](http://www.ssa.gov/thirdparty/business)

Contact our Office of Native American Partnerships (ONAP) at

[**SSA.Tribal.Communications@ssa.gov**](mailto:SSA.Tribal.Communications@ssa.gov)

Contact Social Security's Regional Communications Directors

[**www.ssa.gov/agency/rcds.html**](http://www.ssa.gov/agency/rcds.html)

Tribal Payment Exclusions for COVID-19 Disaster Relief Funds

The Coronavirus Aid, Relief, and Economic Security Act (CARES Act) signed into law on March 27, 2020, provided for several types of disaster related assistance due to COVID-19. Later, both the Consolidated Appropriations Act, 2021 (CAA) signed into law on December 27, 2020, and the American Rescue Plan Act of 2021 (ARPA) signed into law on March 11, 2021, provided extensions and additional funding to several of these pandemic assistance programs. We recently updated our rules about what financial assistance can affect the eligibility for SSI or a monthly SSI payment amount.

Specifically, **we no longer count** the financial assistance listed below against someone’s eligibility or payment amount. We are reviewing claims going back to the beginning of the COVID-19 pandemic to update our records. As a result, if a beneficiary received one of these types of assistance, we may send them or their representative payee a letter explaining the change, or any necessary information. They do not need to do anything. We will reach out to them or their representative payee by mail if necessary.

Effects of Covid-19-Related Financial Assistance

COVID-19 Disaster-Related Assistance	Countable Income and Resources for SSI Purposes
<p><i>Coronavirus Relief Fund for Tribal Governments, and Coronavirus State and Local Fiscal Recovery Funds</i></p> <p>An emergency payment provided to tribal governments navigating the impact of the COVID-19 outbreak. The tribes are responsible for disbursing the funds to tribal members and using the funds to assist their tribal community with obtaining the critical resources needed to combat the virus.</p>	<p><i>Excluded.</i></p> <p>Payments from Tribal governments to Tribal members that are funded by the Coronavirus Relief Fund established by the CARES Act, and Coronavirus State and Local Fiscal Recovery Funds, funded by the ARPA do not count as income and resources.</p>
<p><i>Housing Assistance and Supportive Services Programs for Native Americans</i></p>	<p><i>Excluded.</i></p> <p>Payments from Tribal governments to Tribal members for these programs that are funded by the ARPA do not count as income and resources.</p>

COVID-19 Disaster-Related Assistance

Countable Income and Resources for SSI Purposes

Economic Impact Payments (EIP) also known as Recovery Rebates

Emergency stimulus payments to taxpayers and qualifying children in the household under CARES, CAA, and ARPA. “Taxpayers” for this purpose also includes Social Security and SSI beneficiaries who did not actually pay income taxes. Some taxpayers may receive less than the amounts shown in the table due to adjusted gross income limits.

Legislation	Amount per Taxpayer	Amount per each qualifying child
<i>CARES</i>	\$1,200	\$500
<i>CAA</i>	\$600	\$600
<i>ARPA</i>	\$1,400	\$1,400

Excluded.

Unemployment Insurance Benefits

Emergency unemployment benefits for qualifying individuals who are out of work because of the COVID-19 pandemic.

Excluded.

SSA will exclude all regular and pandemic unemployment during a pandemic period from income and resources. As pandemic-related programs end, we will resume normal income-counting rules for unemployment.

Education Stabilization Fund

Emergency financial aid grants to students for expenses related to the disruption of school operations due to COVID-19

Excluded.

COVID-19 Disaster-Related Assistance

Countable Income and Resources for SSI Purposes

<p><i>Paycheck Protection Program (PPP): Loan Forgiveness to Employers and Self-Employed Individuals</i></p>	<p><i>Excluded.</i> However, any regular wage payments paid to employees that are funded by this program are counted as earned income to the worker.</p>
<p><i>Economic Injury Disaster Loan (EIDL) Program: Loans/Grants to Employers and Self-Employed Individuals /Grants</i></p>	<p><i>Excluded.</i> However, any regular wage payments paid to employees that are funded by this program are counted as earned income to the worker.</p>
<p><i>Coronavirus Food Assistance Program – Direct Payments to Farmers and Ranchers</i></p>	<p><i>Excluded.</i></p>
<p><i>COVID-19 Veteran Rapid Retraining Assistance Program</i></p>	<p><i>Excluded.</i></p>
<p><i>COVID-19 Funeral Assistance</i></p>	<p><i>Excluded.</i></p>
<p><i>Emergency Rental Assistance Fund</i></p>	<p><i>Excluded.</i></p>
<p><i>Emergency Assistance for Rural Housing/Rural Rental Assistance</i></p>	<p><i>Excluded.</i></p>
<p><i>Homeowner Assistance Fund</i></p>	<p><i>Excluded.</i></p>
<p><i>Supporting Foster Youth and Families</i></p>	<p><i>Excluded.</i></p>

COVID-19 Disaster-Related Assistance	Countable Income and Resources for SSI Purposes
<i>Emergency Assistance to Children and Families through the Pandemic Emergency Assistance Fund</i>	<i>Excluded.</i>
<i>Farm Loan Assistance for Socially Disadvantaged Farmers and Ranchers</i>	<i>Excluded.</i>
<i>USDA Assistance and Support for Socially Disadvantaged Farmers, Ranchers, Forest Landowners and Operators, and Groups</i>	<i>Excluded.</i>
<i>State Stimulus Payments</i>	<i>Some exclusions may apply.</i>

Tribal Social Security Fairness Act of 2018

Signed into law on September 20, 2018, the Tribal Social Security Fairness Act of 2018 amends the Social Security Act by creating the Section 218 Agreement to allow voluntary Social Security coverage for federally recognized Indian Tribal council members. The coverage **only** applies to council members and not general members of the Tribe. This legislation became effective upon the signing of the bill.

The coverage is similar to that for state and local employees in that it is a voluntary request for coverage by a group. Tribal coverage does not have the same complexities of state and local coverage, commonly referred to as Section 218 coverage.

Under this legislation, the Tribal council is covered as a whole, not individual Tribal council members. If the Tribal Council has entered into agreement for coverage, that coverage will apply to any future council members. As specified in the legislation, the coverage cannot be terminated or altered once granted.

The Tribe will need to complete the Tribal Council Member Coverage Template Agreement to request coverage. Tribal officials need to communicate directly with Social Security Administration regional specialists to execute the agreements. Coverage will be effective the month after the month the agreement is signed by both parties unless the Tribe requests a later effective date.

The Tribal Council may also request retroactive coverage for periods for which they have already paid FICA taxes and not received a refund. The regional specialist will work with the tribe to provide instructions for this situation.

Please visit us online at www.ssa.gov/slge/specialists.htm to contact the Section 218 Regional Specialist.

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A Note to Benefit Coordinators

We appreciate the assistance you provide to Social Security beneficiaries and Supplemental Security Income (SSI) recipients. We know sometimes it can be difficult to know when to contact us and who to talk to about Social Security related issues. This **Questions and Answers Supplemental Guide** is designed to help find quick answers to common questions.

Please contact your local Social Security office with questions and suggestions.

Questions and Answers

Current Issue Questions

Effects of COVID-19 Relief Funds on SSI Income and Resources

Q. Do COVID-19 Economic Impact Payments (EIPs) affect SSI payments?

A. No. EIPs, also known as Recovery Rebates, are not counted as income or resources, so do not affect SSI payments.

Q. My monthly SSI payment amount was reduced because I receive(d) COVID-19 assistance. Is there anything I need to provide to update my record?

A. Social Security will contact you, or your representative payee if you have one, about restoring your SSI or payment amount. You are encouraged to respond as soon as possible after hearing from SSA. If SSA has not already contacted you or adjusted your payment(s), please reach out to your local office.

Q. Do COVID-19 relief funds for Tribal Governments affect SSI payments or SSI eligibility?

A. No. Payments from Tribal governments to Tribal members that are funded by the Coronavirus Relief Fund established by the CARES Act or the Coronavirus State and Local Fiscal Recovery Funds established by the American Rescue Plan Act do not count as income or resources, and do not affect SSI payments. Any retained payment amounts are excluded from resources.

The Tribal Social Security Fairness Act of 2018

Signed into law on September 20, 2018, the Tribal Social Security Fairness Act of 2018 amends the Social Security Act by creating the Section 218 Agreement to allow voluntary Social Security coverage for federally recognized Indian Tribal council members. The coverage only applies to council members and not general members of the Tribe. This legislation became effective upon the signing of the bill.

Q. What is the earliest date of coverage permitted under the Tribal Social Security Fairness Act of 2018?

A. Coverage will be effective the first day of the month after the month the agreement is signed by both parties.

Q. Can the Tribe elect a date in the future as the effective date?

A. Yes. There is no limit on how far in the future the Tribe can set their effective date. Once the Tribe signs the agreement, the effective date cannot be changed.

Q. What is needed to participate in the Tribal Social Security Fairness Act of 2018? Who completes the agreement?

A. The Tribe completes the agreement on behalf of the Tribal Council Members. Under this new legislation, the Tribe is covered as a whole, not as individual tribal members. The Tribe will provide a copy of the executed agreement, Tribal EIN, and a list of Tribal Council Members.

Q. Can a Tribe request retroactive coverage if they paid Federal Insurance Contributions Act (FICA) taxes?

A. Yes. Tribes may request retroactive coverage for periods for which they already paid Federal Insurance Contributions Act (FICA) taxes and have not received a FICA tax refund. The regional specialist will work with the tribe to provide instructions for this situation.

Questions and Answers

Q. Is there a restriction on how far back a Tribe may ask for retroactive coverage if they paid Federal Insurance Contributions Act (FICA) taxes?

A. Retroactivity can go back as far as it needs to without limit once the Tribe shows proof that FICA taxes were paid, and that the IRS did not refund FICA taxes for any of the retroactive period. Coverage will be effective the first day of the month after the month both parties sign the agreement.

Q. If a Tribal council member did not pay past FICA taxes, can they retroactively pay in?

A. No. You cannot pay into FICA retroactively under this agreement.

Q. Would a Tribal council member ever have to pay back FICA taxes as it relates to this agreement?

A. No, under the agreement, a Tribal council member would never have to pay back FICA taxes.

Q. How can a Tribe get more information?

A. Please visit us online at www.ssa.gov/slge/specialists.htm to contact your Section 218 Regional Specialist.

General Questions

Q. What is a “my Social Security” online account and how does my client get one?

A. This is a free and secure account that provides personalized tools for everyone, whether your client receives benefits or not. They can review their Social Security information and do some online business with us. To set up an account, go to www.ssa.gov/myaccount/.

Q. What Social Security business can my client do online with this “my Social Security” account?

A. We are constantly expanding our online services. To find out about all the useful services currently available online, visit www.ssa.gov/onlineservices/.

Q. Some of my clients are more comfortable talking on the phone. Can they still call Social Security for assistance?

A. Yes. Your client can call our toll-free number, 1-800-772-1213 (TTY 1-800-325-0778), or their local office (<https://secure.ssa.gov/ICON/main.jsp>) for assistance.

Q. Can I assist my client in applying for Social Security benefits online?

A. Yes. You can assist your client in applying for Social Security benefits (retirement, disability or Medicare) online by selecting the proper benefit link at www.ssa.gov. Before starting any online retirement benefit application, we first encourage your client to visit our retirement benefits web page at www.ssa.gov/retirement to better prepare for their retirement. This site provides a greater understanding of how retirement benefits work, the application process, and what to do before your client applies. If your client wants to apply for SSI, you or they can answer a few questions at www.ssa.gov/ssi to let SSA know, and a Social Security representative will make an appointment to help complete the application.

Questions and Answers

Q. Can I assist my client in applying for Social Security benefits and SSI at our Tribal Social Services office?

A. Your client has the option to file Social Security (retirement, disability or Medicare) applications online. Phone appointments with the local Social Security office can be made by calling **1-800-772-1213** (TTY **1-800-325-0778**). You can also assist your client at the local Tribal Social Services office. If they receive scheduled visits from Social Security employees, your client can apply when Social Security visits the office. If there are no scheduled visits, the Tribal Social Services office can help your client with the Social Security forms and gathering the information they need to complete them. Tribal Social Services offices are gaining more training and knowledge of Social Security programs. You or the Tribal Social Services office can help your client locate their nearest Social Security office (<https://secure.ssa.gov/ICON/main.jsp>) and verify service information.

Q. How can my client notify Social Security that they changed their address?

A. If your client gets Social Security benefits they can change their address online with a “my Social Security” account. Visit www.ssa.gov/personal-record/update-contact-information. If they cannot use the internet or they receive Supplemental Security Income (SSI), they should call our toll-free number **1-800-772-1213** (TTY **1-800-325-0778**) or contact their local Social Security office (<https://secure.ssa.gov/ICON/main.jsp>).

Q. What can I do to help someone who has no identification?

A. We can occasionally use other documents to prove identity. These documents must be original or certified copies created within the last two years. We suggest gathering as many documents as possible such as Tribal ID cards, health insurance cards, medical records, legal papers, and school records to present as proof of identification. Social Security will determine if the documents are acceptable.

Q. How can I tell if my client’s document is a certified copy?

A. Legal documents such as birth certificates, court orders, marriage certificates, and divorce decrees must be certified. You can tell that a document is certified if you can feel a raised seal on it. It will also have a stamp that begins, “I hereby certify....” We must see certified copies of all legal documents. We do not accept notarized documents.

Q. May my client use their birth certificate as ID?

A. No. A birth certificate may never be used as identification. However, it is acceptable to prove U.S. citizenship if established prior to turning age 5.

Q. May my client use a photocopy of their driver’s license to get a replacement Social Security card?

A. No. Social Security will not accept a photocopy of any document.



Questions and Answers

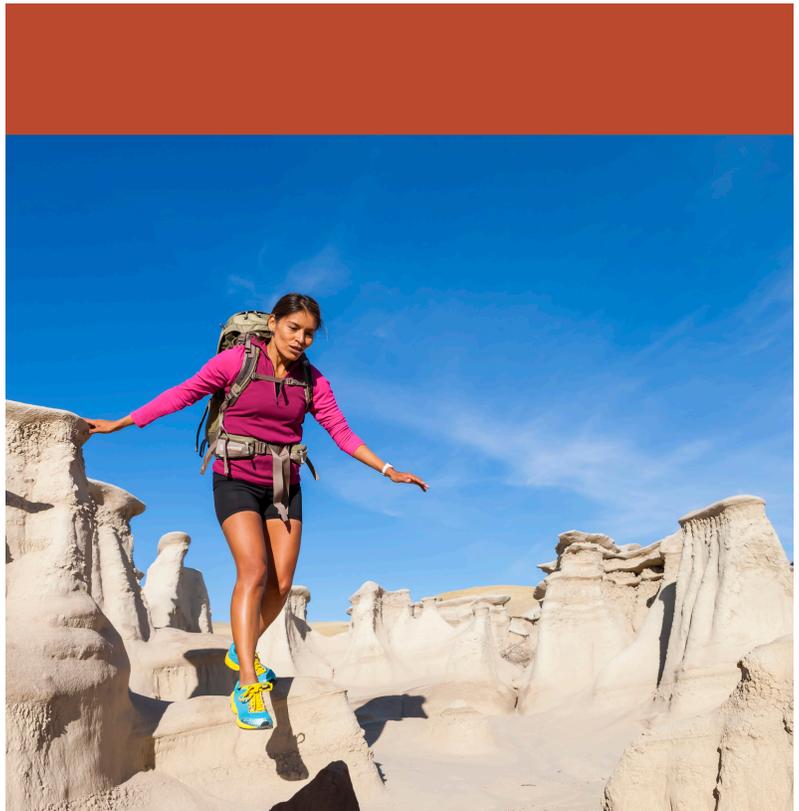
Q. I have heard a lot about identity theft. What can you tell me about that?

A. Sometimes more than one person might use the same SSN either on purpose or by accident. Social Security does not require people to report a lost or stolen SSN card. Reporting a lost or stolen card to us will not prevent its misuse. However, a person using someone's card or number can get other personal information about that person and apply for credit in their name. If your client suspects someone is using their SSN, have them take these steps to guard against identity theft:

1. Check their *my* Social Security account yearly to ensure earnings are posted correctly. If earnings are inaccurate, call us toll-free at **1-800-772-1213** (TTY **1-800-325-0778**).
2. File a complaint with the Federal Trade Commission by calling their hotline at **1-877-IDTHEFT** or visiting their website at www.IdentityTheft.gov.
3. Monitor credit reports. Get free credit reports online at www.annualcreditreport.com.

Q. What should my client do if they get a call claiming there is a problem with their Social Security number or account?

A. If your client receives a questionable communication, please advise them to hang up, or to not reply to the text message or email. Advise the client to report the matter to the Office of the Inspector General at <https://oig.ssa.gov>. Do not return unknown calls and do not respond to text messages and emails claiming to be from SSA. If Social Security detects a problem, we will mail your client a letter. We only call if your client requested a call from us or has ongoing business with us. Also, Social Security does not contact its customers to request information through text messaging, email, or social media. Be aware of scammers. Learn more about scams at www.ssa.gov/scam/.



Questions and Answers

Retirement Questions

Q. What month do retirement benefits begin?

A. A person is entitled to reduced retirement benefits beginning the first full month that they are age 62. This means that benefits are not due for the month a person turns age 62 unless their birthday is on the first or second day of the month. Social Security benefits are paid in the month after the month for which they are due. For example, if a person's 62 birthday is July 15, the first month they are due a benefit is August and they will receive their first payment in the month of September.

Q. Can my client apply for Social Security retirement benefits on the Internet?

A. Yes. Anyone can apply for Social Security retirement or spouse's benefits online at www.ssa.gov; just click on the "Apply for benefits" link at the top of the page. We first encourage your client to visit our retirement benefits web page at www.ssa.gov/benefits/retirement/ to gain a better understanding of how retirement benefits work, the application process, and what to do before starting their application.

Q. Q. What happens if a client wants to work while receiving retirement benefits?

A. A. The amount your client can earn while receiving Social Security depends on their age. Their earnings in (and after) the month they reach their full retirement age (FRA) will not affect their Social Security benefits. However, their benefits are reduced if their earnings exceed certain limits for the months before they reach their FRA. To determine how much their benefit may be reduced, visit our Retirement Planner at www.ssa.gov/planners/retire/whileworking.html.

Q. Will my client's children be eligible for monthly Social Security payments after my client retires?

A. Monthly Social Security payments may be payable to your client's children if they are:

- Unmarried, and
- Under age 18; or
- 18-19 years old and a full-time student (no higher than grade 12); or
- 18 or older with a disability that began before age 22.

Adopted children, stepchildren, grandchildren, and step-grandchildren who meet the requirements above may also be eligible for Social Security payments.

Q. Can a child receive benefits on the record of a grandparent?

A. Yes. A dependent grandchild or step-grandchild who meets the requirements above may receive benefits on the record of a grandparent if the child's natural or adoptive parents are deceased or disabled when the grandparent becomes entitled to retirement or disability benefits or dies. The child must have been living with and receiving half of their support from the grandparent for the previous year.

Questions and Answers

Q. My client's spouse does not have enough work to qualify for retirement benefits on their own work record. Can the spouse qualify on my client's work record?

- A. Even if a spouse has never worked under Social Security, when your client files for retirement or becomes entitled to Social Security disability benefits, their spouse may be eligible for as much as half of your client's full retirement age (FRA) or disability benefit amount. The spouse must be at least age 62 to begin receiving benefits, but if the spouse elects benefits before their own FRA, benefits will be reduced for each month they file early. If the spouse is under 62, they may still qualify for benefits under your client's work record, but the spouse must have your client's child in their care. The child must be under the age of 16 or disabled prior to age 22.

Q. How does a divorced spouse qualify for benefits?

- A. A person can receive benefits as a divorced spouse if they were married to the former spouse for at least 10 years; are at least age 62; are unmarried; and not entitled to a higher benefit on their own work record. The former spouse must be entitled to a retirement or disability benefit. If the former spouse qualifies for but has not applied for retirement benefits, you can receive benefits on their record if you have been divorced for at least two continuous years.

Q. Will my client automatically be enrolled in Medicare benefits if they are receiving Social Security retirement benefits?

- A. Yes. Medicare Part A (hospital insurance) and Medicare Part B (medical insurance) will automatically begin at age 65 as long as a person is being paid a Social Security or railroad retirement benefit, at least four months before they turn age 65. They will receive an initial enrollment package by mail a few months before turning age 65.

Q. What income counts toward the Social Security retirement earnings test limit?

- A. Wages received for services, plus all net earnings from self-employment (minus any net loss from self-employment) for that year are counted. We count gross wages - wages before any payroll deductions for income tax, Social Security tax, dues, insurance, or other deductions by the employer. Non-work sources of income do not count as wages for the earnings limit. Examples of income that do not count include inheritance payments, pensions, income from investments, IRA distributions, interest, 401(k) distributions, and other sources.

NOTE: This earnings test applies to most retirement, spouse, and survivor beneficiaries under FRA. This test does not apply to Supplemental Security Income (SSI) recipients. Most types of income received by SSI recipients count and are used in calculating the SSI payment due.

Q. My client has reached full retirement age (FRA) and is still working. Should these earnings be reported to Social Security?

- A. In the year your client reaches FRA, the benefits will be reduced \$1 for every \$3 that they earn over the earnings test limit through the month before they reach FRA. See www.ssa.gov/planners/retire/whileworking.html. If they expect to earn over the earnings test limit during these countable months, they should provide an earnings estimate to Social Security in the beginning of that year. Once your client's work record reflects their actual earnings from that year, Social Security will recalculate to determine if benefits were correctly paid.

NOTE: Earnings post to an individual's record by the end of the year following the year of the earnings. For example, earnings for 2023 will post to an individual's work record by the end of 2024.



Questions and Answers

Survivor Benefits Questions

Q. Will my client lose their widow or widower's benefits if they remarry?

- A. Generally, they cannot get widow or widower's benefits if they remarry before age 60. However, remarriage after age 60 (or age 50 if they are disabled) will not prevent benefit payments.

Q. Will my client's child, who receives survivors benefits, lose entitlement if they are adopted?

- A. No. The adoption of a child already entitled to survivors benefits does not terminate the child's benefits.

Disability Benefits Questions

Q. How long does it take to receive a decision about disability?

- A. The length of time that it takes to receive an initial disability decision can range from three to six months or longer. It varies depending on the nature of the disability, how quickly we obtain medical evidence, whether we need to request a Consultative Exam, and whether we randomly select the claim for a quality assurance review of the decision.

Q. Q. What is the difference between the SSDI program and the SSI program?

- A. SSDI is financed by Social Security taxes paid by workers, employers, and self-employed individuals. SSDI requires the worker to have a required amount of earnings taxable by Social Security to be eligible for benefits. Disability benefits are payable to a blind or disabled worker, widow(er), or a worker's disabled adult child who meets the definition of disability prior to age 22. The amount of the monthly benefit is based on the average lifetime earnings of the eligible worker.

SSI is financed by general funds of the U.S. Treasury such as personal income taxes, corporate, and other taxes. Benefits are payable to individuals 65 and older or to those under 65 (adults or children) who are either disabled or blind. All individuals must have limited income and resources to qualify. The monthly payment varies up to the maximum federal benefit rate and can be increased by the state in which your client lives or decreased by your client's countable income. The monthly payment will stop if your client's countable resources exceed the SSI limits (\$2,000 for an individual or \$3,000 for a couple).

Q. Why is there a five-month waiting period for SSDI benefits?

- A. The five-month waiting period ensures that Social Security is meeting our legal requirement to pay only long-term disability payments to people.

Q. If a person receives SSDI benefits and their condition worsens, can their benefits be increased?

- A. No. We base the Social Security disability benefit on the amount of the client's lifetime earnings before the disability began and not the severity of the disability.

Q. Will a disabled person automatically be enrolled in Medicare?

- A. Yes. We will enroll a beneficiary with disabilities in Medicare automatically after they have been entitled to disability benefits for two years. We start counting the 24 months from the month your client became entitled to benefits.

In addition, people with Amyotrophic Lateral Sclerosis (ALS, commonly known as Lou Gehrig's disease) get Medicare beginning with the month they become entitled to disability benefits. People with End Stage Renal Disease (ESRD) get Medicare based on when they begin dialysis or receive a kidney transplant.

Questions and Answers

Q. Can my client go to their Tribal Vocational Rehabilitation (VR) program to use their Ticket to Work?

A. No, they cannot if the Tribal VR program does not operate as a Social Security Employment Network (EN) service provider. Only an EN can accept your client's Ticket. Please check with your client's Tribal VR program to confirm if they are operating as an EN. If not, ask about their plans to become an EN as all Tribal VR programs are eligible to become EN service providers.

Q. What is my client's responsibility if they return to work?

A. If your client receives SSDI or SSI disability benefits, they must promptly report any changes in work activity. If they have a "*my Social Security*" account, they may be able to report their wages online. If they receive SSI, we also offer a toll-free automated wage reporting telephone system and a free mobile wage reporting application. To use this telephone service or Smartphone app, call us toll-free at **1-800-772-1213** (TTY **1-800-325-0778**).

Q. Where can my client learn more about employment supports (work incentives) for those receiving SSDI or SSI disability benefits?

A. Check out the Red Book, a guide to work incentives, at www.ssa.gov/redbook/eng/introduction.htm. This is a summary guide to employment supports for individuals with disabilities who receive SSDI or SSI disability benefits.

Supplemental Security Income Questions

Q. My client received a notice from Social Security saying his SSI case is being reviewed. What does this mean?

A. Social Security reviews every SSI case from time to time to make sure the individuals who are receiving payments should continue to get them. This continuing eligibility review or redetermination verifies your client's income, resources, and living arrangements. All of these things can affect the benefit amount. Your client should report any changes in these areas by the 10th of the month following the change.

Q. My client receives SSI. How do they notify Social Security that they changed their address?

A. Because a change of address for a SSI recipient often requires reevaluation of living arrangements, your client cannot complete the change of address online. SSI recipients must report any change of address by calling our toll-free number, **1-800-772-1213** (TTY **1-800-325-0778**), or contacting their local office (<https://secure.ssa.gov/ICON/main.jsp>) by the 10th of the month following the change. If the change is not reported promptly, the recipient could receive an incorrect payment and have to pay it back.

Q. If my client receives the maximum SSI FBR (Federal Benefit Rate) and their expenses increase, will their payments increase?

A. No. SSI payments are based on need, but the maximum FBR is established by law, not monthly expenses.

Questions and Answers

Q. What is the definition of disability for children filing for SSI?

A. Social Security has a strict definition of disability for children. The child, defined as an individual under age 18, must have a medical condition that results in marked and severe functional limitations. This means that the condition seriously limits the child's daily activities and has lasted or is expected to last at least one year or will end in death.

Q. If an adult on SSI is admitted to a medical treatment facility and Medicaid is not paying 50 percent of the cost of the stay, but Indian Health Service is paying the cost, will the SSI payment be reduced?

A. No, the payment will not be reduced.

Q. If an SSI recipient goes into a medical institution, whose responsibility (the institution, Indian Health Service (IHS) or the client's payee) is it to submit the physician's certification and the statement of need to request continuation of benefits for 90 days?

A. It is the responsibility of the client or client's payee to submit the required documentation to SSA for temporary continuation of benefits.

To qualify for continuation of benefits, the documentation must be provided to SSA before the discharge date or by the 90th day of medical confinement, whichever is earlier. For more information visit www.ssa.gov/ssi/spotlights/spot-temp-institution.htm.

Q. Can babies born prematurely receive SSI benefits?

A. Social Security can provide SSI payments to certain low birth weight infants, whether or not they are premature. A child who weighs less than 1,200 grams (about 2 pounds, 10 ounces) at birth can qualify for SSI based on low birth weight, if otherwise eligible. A child who weighs between 1,200 and 2,000 grams at birth AND who is considered small for his or her gestational age may also qualify. Contact your local Social Security office (<https://secure.ssa.gov/ICON/main.jsp>) for more information.



Questions and Answers

SSI AIAN Exclusions

Effective October 1973, per capita distribution payments to members of Indian Tribes who are due judgment funds according to a plan of the Secretary of the Interior are excluded from income and resources.

Effective January 1983, Indian judgment funds held in trust or distributed per capita under an approved plan are excluded from income and resources.

Effective August 1983, per capita distributions to members of an Indian Tribe of all funds held in trust by the Secretary of the Interior are excluded from income and resources.

Effective February 1988 under the Alaska Native Claims Settlement Act, cash, stock or land received from a native corporation are excluded from income and resources. Up to \$2,000 per year in payments from individual interests in Indian trust lands is excluded from income and the land itself is excluded from resources.

Effective April 2012, per capita payments received by members of the Tribes covered by the Tribal Trust Accounting and Management settlement are excluded from income and resources.

Q. Will my client's distributions from an Alaska native village or village corporation affect their eligibility for SSI or SSDI benefits?

- A. Annual distributions from Alaska native villages or village corporations can affect eligibility for SSI. Report the allotments to Social Security and let us determine how they may or may not be counted. Have your client contact their local office (<https://secure.ssa.gov/ICON/main.jsp>) and ask a claims specialist to check the Native American Precedent and Resource Center or **NAPR** for a precedent.

Q. Do the Individual Indian Monies (IIM) paid to my client from Indian trust or restricted lands count as income for SSI purposes?

- A. Individual Indian Monies (IIM) paid from Indian trust or restricted lands are not counted as income unless your client receives more than \$2,000 per year. Have your client contact their local office (<https://secure.ssa.gov/ICON/main.jsp>) to report this income and ask a claims specialist to check the Native American Precedent and Resource Center or **NAPR** for a precedent on this income they receive.

Q. Do per capita monies affect an SSI payment?

- A. Per capita distributions of all funds held in trust by the Secretary of the Interior to members of an Indian Tribe are excluded from income and resources. If the funds are not held in trust by the Secretary of the Interior, they may count under the income and resource rules. Tribally managed gaming revenue distributed via per capita payments are generally not excluded from income and resources. Have your client contact their local office (<https://secure.ssa.gov/ICON/main.jsp>) and ask a claims specialist to check the Native American Precedent and Resource Center or **NAPR** for a precedent on this income they receive.

Q. If my client receives an annual cash allotment from their Tribe (for whatever reason), do they need to report it to Social Security?

- A. Yes. If your client receives annual cash allotments from their tribe while on the SSI program, these monies need to be reported to help avoid overpayment or underpayment situations. The various Tribal monies are counted differently. Have your client contact their local office (<https://secure.ssa.gov/ICON/main.jsp>) and ask a claims specialist to check the Native American Precedent and Resource Center or **NAPR** for a precedent on the income they receive.

Questions and Answers

Q. Is there a way of getting an increase to my client's SSI payments if their Individual Indian Money (IIM) monies are not distributed as scheduled?

A. If your client has not received their IIM monies as scheduled, you should have them contact Social Security and let them determine if this will affect their SSI payment. Remind your client that any changes in income or resources for the household must be reported to Social Security as soon as possible, but no later than the 10th day of the following month. They can call **1-800-772-1213** (TTY **1-800-325-0778**) or their local office (<https://secure.ssa.gov/ICON/main.jsp>).

Q. How does SSI treat the funds received by my client under the Claims Resolution Act of 2010 (*Cobell v. Salazar*)? Under this Act, tribal members, who owned trust land, were awarded a monetary amount.

A. Settlement income received under the Claims Resolution Act of 2010 is excluded from income and retained funds are usually excluded from resources for 1 year from the date of receipt. Settlement income distributed to children went into a restricted IIM account. We exclude this restricted account from resources. Once they reach age 18, this account is no longer restricted. However, we will continue to exclude the funds and the interest earned in their unrestricted IIM account for one year from their 18th birthday. Any funds they retain after that period is a countable resource. Have your client contact their local office (<https://secure.ssa.gov/ICON/main.jsp>) to report this information and ask a claims specialist to check the Native American Precedent and Resource Center or **NAPR** for a precedent.

Medicare Questions

Q. How does Medicare and Medicaid work with my client's eligibility for medical services under Indian Health Services (IHS)? Can they use all of them at the same time?

A. Your client can use Medicare and Medicaid at an IHS clinic or reservation hospital for medical services the IHS does not cover. Additional information about Medicare and Medicaid can be found at the Centers for Medicare & Medicaid Services (CMS) website at www.medicare.gov/ or www.medicaid.gov/.

Q. Can my client still go to their community based IHS clinic or reservation hospital?

A. Your client can still go to their IHS clinic or reservation hospital. They can also go to a different clinic or hospital that accepts Medicare and/or Medicaid. For additional information about the IHS, please check their Frequently Asked Questions (FAQ) web page at www.ihs.gov/forpatients/faq/.

Q. If a client did not apply for Medicare when they turned 65, can they apply later?

A. Yes. If your client does not sign up for Medicare when they turn 65, they can sign up for free Medicare Part A (hospital insurance) at any time. They can enroll in Part B (medical insurance) during the general enrollment period (GEP), which is January 1 through March 31 of each year; however, they may have to pay a Part B late enrollment penalty. If they did not sign up because they had group health plan (GHP) coverage based on their own or their spouse's *current* employment or experience a specific exceptional condition, they may be eligible to sign up for Part B during the special enrollment period (SEP). Please visit www.medicare.gov website for details. Their "[When does Medicare coverage start](#)" page includes a [Special Enrollment Period](#) chart.



Questions and Answers

Q. My client is having difficulty paying for their Medicare premiums. Is there any help?

A. If your client cannot afford Medicare premiums or other medical costs, they may be able to get help. Visit www.medicare.gov/basics/costs/help for details.

For Medicare Part A (Hospital Insurance) and/or Medicare Part B (Medical Insurance), there are Medicare Savings Programs available to help with premiums, deductibles, coinsurance, and/or copayments. In many cases, to qualify, your client's monthly income and total resources must be at or below certain amounts. Even if your client does not think they qualify, they should still apply. To apply,

call your state Medical Assistance (Medicaid) office. Visit www.medicare.gov/talk-to-someone to find the phone number for your client's state Medicaid office. You can also call **1-800-MEDICARE (1-800-633-4227)** (TTY **1-877-486-2048**) to get the state Medicaid office phone number.

For Medicare Part D (Prescription Drug Plan), there is a "Extra Help" program to assist with premiums, deductibles, coinsurance, and other costs. Your client must have income and resources below a certain limit. If your client does not automatically receive this "Extra Help", they can apply online with Social Security at secure.ssa.gov/i1020/start or call us at **1-800-772-1212** (TTY **1-800-325-0778**).

Appeals Process Questions

Q. What is the web address to file an online appeal for a disability decision?

A. The address is <https://secure.ssa.gov/iApplsRe/start>.

Q. What is the web address to file an online appeal for a non-medical decision?

A. The address is <https://secure.ssa.gov/iAppINMD/start>.

Q. What happens after my client files an Administrative Law Judge (ALJ) hearing request?

A. After Social Security receives the request for ALJ hearing, a letter is sent to your client from the hearing office assigned to process the appeal. The letter contains the local hearing office's phone number and mailing address. It also explains the right to representation. Your client and any appointed representative will receive a Notice of Hearing at least 75 days prior to the date of the hearing. Your client should read this notice carefully and contact the local hearing office if they have any questions. The notice contains a form asking if they will be present at the hearing. Please make sure your client returns this form right away. It is critical that your client notifies your local office if they cannot appear at the time the hearing is scheduled.

Q. What can my client do to speed up the ALJ hearing process?

A. Submitting any additional information and notifying Social Security if they move or their phone number changes can help save time. Also, if your client wishes to have representation, they should do so as soon as possible. Lastly, it is extremely important that your client attend the hearing.

Q. If my client has an ALJ hearing pending, whom do they contact with changes?

A. If changes occur, contact the hearing office processing your client's request of hearing. The local hearing office phone number is located on the letter your client received acknowledging their request for hearing.

Questions and Answers

Representative Payee Questions

Q. What are the duties of a Representative Payee?

A. Since a payee acts for the beneficiary, they are responsible for everything related to benefits that a capable beneficiary would do for themselves. The main duties are to use the benefits to pay for the current and future needs of the beneficiary, properly save any benefits not needed to meet current needs and report any changes or events to us which could affect the beneficiary's payments. A payee must keep records of all payments received and how the money was spent or saved and provide these records to us upon request. Most payees are required to complete an annual Representative Payee Report. If a payee receives this report, they fill it out and mail it back promptly, or they can follow the directions they receive with the report and submit the report online.

Social Security encourages payees to go beyond just managing finances and be actively involved in the beneficiary's life.

Q. Is "Power of Attorney" the same as being the Representative Payee?

A. No. Power of Attorney is not recognized by the Treasury Department for the purpose of negotiating federal payments such as Social Security benefits or SSI. If an individual has a Power of Attorney, they will still have to file an application with us to be selected as the Representative Payee.

A representative payee is specific to Social Security. When we determine a beneficiary cannot manage their own Social Security benefits or SSI payments, our Representative Payment provisions allow us to appoint the best suited individual or organization, termed a representative payee, to receive and manage their benefits.

Q. Can my client's representative payee charge a fee for serving as their payee?

A. No. Only a qualified organizational payee, who has applied with and been approved in writing by Social Security, can collect a fee for being a representative payee.

Q. What kind of bank account should be set up for the beneficiary?

A. A checking account will provide cancelled checks written on behalf of the beneficiary that show how the funds were spent. If the payee pays the bills through the mail, a checking account is better because cashier's checks and money orders have costs. Social Security requires an account be used that minimizes fees and allows the payee to keep good records. The account title must clearly show that the money belongs to the beneficiary.

Q. Are there any activities that payees must avoid?

- A. A representative payee cannot do any of the following:
- Sign legal documents, other than Social Security documents, on behalf of the beneficiary
 - Have legal authority over earned income, pensions, or any income from sources other than Social Security or SSI
 - Use a beneficiary's money for the payee's personal expenses, or spend money in a way that would leave the beneficiary without necessary items or services such as housing, food or medical care
 - Put a beneficiary's Social Security or SSI funds in their own or another person's account.
 - Use funds from a dedicated account for daily living expenses
 - Keep any of the beneficiary's funds once they are no longer the payee
 - Charge the beneficiary for services unless Social Security tells them to do so

Questions and Answers

Incorrect Payment Questions

Q. If my client's mother passed away in April, can they keep the Social Security payment that comes in May?

A. Social Security benefits (retirement, survivors, and disability) are not pro-rated. To be entitled to a Social Security benefit for a given month, the person must be alive the entire month. No benefit is due for the month of death. Therefore, the payment that comes in May, which pays for the month of April, would not be due.

Q. How can my client set up an installment agreement to repay an overpayment?

A. Have your client call us at the toll-free number shown on the overpayment notice and we will set up the billing. If your client no longer has their notice, they may contact us at **1-800-772-1213** (TTY **1-800- 325-0778**).

Q. What should my client do if they cannot pay this month's installment payment?

A. If your client has not made a payment in 45 days, we may begin various collection actions, such as garnishing wages and reporting the debt to a credit bureau. It is best to make some payment, even if they cannot make the entire payment. If no payment is possible, have them call SSA at the toll-free number shown on the billing statement, **1-800-772-1213**, or contact their local office (<https://secure.ssa.gov/ICON/main.jsp>).

Q. It is not my client's fault that Social Security paid too much money. Do they still have to pay back the overpayment?

A. If SSA establishes it is not your client's fault that the overpayment happened, and they need all of their current income for daily living expenses, they may not have to repay it. They should request a waiver of repayment by completing Form SSA-632 - Request for Waiver, available online at www.ssa.gov/forms/ssa-632.html, and return it to their local office (<https://secure.ssa.gov/ICON/main.jsp>). They may also call us at the toll-free number shown on their overpayment notice to obtain the form.

A Social Security employee will review the information and let your client know the decision on the waiver request. Before the office can formally deny a request for waiver, your client will be contacted for a personal conference.

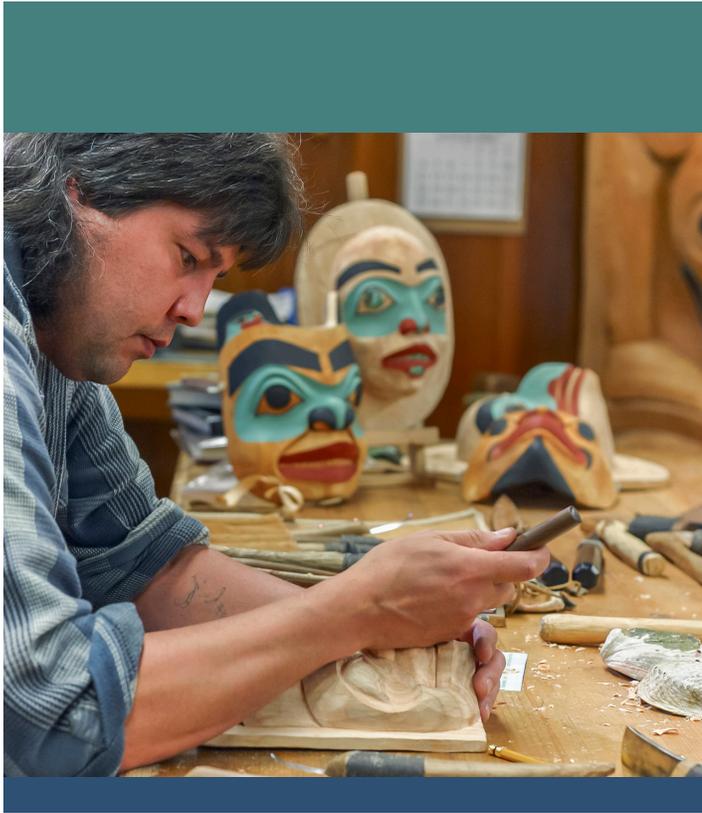
Q. What does my client do if they disagree they are overpaid or with the overpayment amount?

A. If your client disagrees they are overpaid or with the overpayment amount, they can file an appeal. The appeal must be made in writing within 60 days from the date of the notice they receive. Under certain conditions, an extension of this period can be granted. The Form SSA-561 – Request for Reconsideration is usually used to file an appeal; however, any written statement signed by your client may be used. The reason they disagree must be clearly stated. They can also file the appeal online at <https://secure.ssa.gov/iAppINMD/start>.

Questions and Answers

Q. What happens if my client does not repay their overpayment?

A. Social Security can withhold income tax refunds, send a report to the credit bureau, ask employers to garnish wages, collect the overpayment from benefits the client is receiving, or collect benefits they may receive in the future. Overpayments can also be withheld from family benefits paid on the worker's record.



Q. If a person dies before Social Security payment is made, can the estate collect the payment?

A. A deceased beneficiary may have been due a Social Security payment at the time of death. The Social Security Act provides that amounts due a deceased beneficiary may be paid to the next of kin or to the legal representative of the estate under priorities established in the law. The priority for payment follows:

- To a surviving spouse who was either living in the same household as the deceased at the time of death or who, for the month of death, was entitled to a monthly benefit on the same record as the deceased.
- To a child who, for the month of death, was entitled to a monthly benefit on the same earnings record as the deceased.
- To a parent who, for the month of death, was entitled to a monthly benefit on the same earnings record as the deceased.
- To a surviving spouse not entitled on the same earnings record.
- To a child not entitled on the same earnings record.
- To a parent not entitled on the same earnings record.
- To the legal representative of the deceased person's estate

An underpayment must be paid in this order. If no one qualifies in the first category, then we proceed to the second category, and so on. In order for a payment to be due, the deceased beneficiary must have lived throughout the entire month for which the payment was issued. To claim an underpayment, your client will need to file the Form SSA-1724 at their local office. They may also contact 1-800-722-1213 (TTY 1-800-325-0778) for instructions. Evidence of relationship or representation may be required.

NOTE: The SSI underpayment procedures only allow underpayments in limited situations. The underpayment cannot be paid to the estate.

Acronyms

- ACA** – Affordable Care Act
- AFSC** – Air Force Specialty Codes
- AIAN** – American Indians and Alaska Natives
- ALJ** – Administrative Law Judge
- ALS** – Amyotrophic Lateral Sclerosis
- ATM** – Automated Teller Machine
- BEST** – Benefit Eligibility Screening Tool
- BIA** – Bureau of Indian Affairs
- BPQY** – Benefits Planning Query
- BQL** – Blood Quantum Letter
- CAL** – Compassionate Allowance
- CDR** – Continuing Disability Review
- CE** – Consultative Examination
- DDS** – Disability Determination Services
- DoD** – Department of Defense
- DXSM** – Direct Express Mobile application
- EN** – Employment Network
- EPE** – Extended Period of Eligibility
- ESRD** – End-Stage Renal Disease
- FBR** – Federal Benefit Rate
- FDIC** – Federal Deposit Insurance Corporation
- FRA** – Full Retirement Age
- GEP** – General Enrollment Period
- GHP** – Group Health Plan
- IEP** – Initial Enrollment Period
- IFSP** – Individualized Family Service Plan
- IHS** – Indian Health Service
- IIM** – Individual Indian Monies
- ITU** – Tribal Health Programs and Urban Indian Health Centers
- MOS** – Military Occupational Specialty
- NEC** – Navy Enlisted Classification
- PCS** – Permanent Change of Station
- SEP** – Special Enrollment Period
- SGA** – Substantial Gainful Activity
- SSA** – Social Security Administration
- SSDI** – Social Security Disability Insurance
- SSI** – Supplemental Security Income
- SSN** – Social Security Number
- TBI** – Traumatic Brain Injury
- TTY** – Text Telephone
- TWP** – Trial Work Period
- VA** – Veterans Affairs
- VR** – Vocational Rehabilitation
- VSD** – Video Service Delivery
- WIPA** – Work Incentives Planning and Assistance





Securing today
and tomorrow