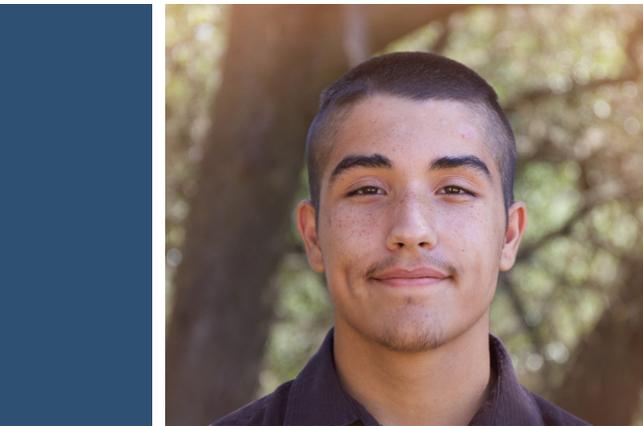




Securing today
and tomorrow

Social Security Administration Tribal Benefits Coordinator Guide



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. Feel free to 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 Senior Advisor (Former Acting Commissioner) and Tribal Consultation Official

It is my honor to continue in service as your tribal liaison, bridging Social Security to sovereign tribal nations. As the Senior Advisor for the Commissioner and Tribal Consultation Official, I am dedicated to leveraging agency resources to serve 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 benefit coordinators with an up-to-date picture of how Social Security serves Indian Country communities.

In August 2017, we appointed Reneé Ferguson as the American Indian and Alaska Native Executive Champion to support my commitment to service delivery and outreach initiatives. Under Reneé's leadership, we continue to reinforce the need for building relationships in Native American communities and take a more direct approach to improving cultural awareness across Social Security.

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

Nancy A. Berryhill

Senior Advisor for the Commissioner



Message from the American Indian and Alaska Native Executive Champion

It has been a pleasure to personally meet many of you as we continue our walk to meet the needs of tribal communities. The Tribal Benefits Coordinator Guide is one way of providing the tools and resources specific to the communities you serve.

I continue my commitment to providing accurate information to tribal communities to ensure timely communication on tribal issues. I seek to strengthen the voice of tribal leaders by enhancing outreach and cultural awareness opportunities.

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

I look forward to collaborating with you, and thank you for your continued support.

Renee Ferguson

AIAN Executive Champion

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Acronyms

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

Current Issues:

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 does not apply to general members of the tribe, just the council members. 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 the individual tribal 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.

The list of Regional Contacts is available at Social Security's American Indians and Alaska Natives (AIAN) page under **Tribal Security Fairness Act of 2018**. (ssa.gov/people/aiian/materials/pdfs/TribalSocialSecurityFairnessActof2018.pdf)



Contacting Social Security

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 your clients need proof of their Social Security, Medicare, or SSI benefits; let them know that they can get a benefit verification letter online with a *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 the up-to-date information they need online, perhaps even from a computer in your office.

With *my* Social Security, those who receive benefits can easily view, print, or save an official letter that includes proof of their benefit amount and type, 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 and U.S. mailing address. The client can go to www.ssa.gov/myaccount/ and input some personal information to verify their identity. Then choose a username and password to complete creating their account.

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

- Change their address and phone number
- Start or 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 or Supplemental Security Income (SSI)

Online Applications

www.socialsecurity.gov

Your clients can apply online for Social Security retirement, spouses' benefits, Medicare, disability benefits, or Supplemental Security Income (SSI). If you are assisting someone with applying for disability benefits, you may also help them complete the disability report, which is also available online. The applicant must electronically sign and attest to the accuracy of the information provided. After the application is complete, your clients have several ways to check the status of their applications by:

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

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

Telephone Assistance

Your clients can call us using our toll-free number at 1-800-772-1213, Monday through Friday from 7 a.m. until 7 p.m. People who are hearing impaired may call our Text Telephone (TTY) number at 1-800-325-0778. Automated services are available with a touch-tone phone. Services available include scheduling an appointment, address changes, and signing up for direct deposit of Social Security payments directly to the bank.

Social Security Office Locator

www.socialsecurity.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 field office locator. You just type in your ZIP Code and find the nearest Social Security office.

Video Service Delivery

www.ssa.gov/open/geospatial.html

We have Video Service Delivery (VSD) centers set up in some communities so clients do not have to drive to their local office.

At a VSD center, a person can connect to a Social Security representative by using the video phone. The Social Security employee can see, talk to, and assist them in a way similar to a face-to-face meeting in an office. A client does not have to know how to use a computer for this service.

VSD American Indians and Alaska Native (AIAN) Site Map

For more information on the nearest Social Security field office, resident station and Video Service Delivery (VSD) site, please access SSA's AIAN map, at www.ssa.gov/open/geospatial.html.



The Social Security Card

Your nine-digit Social Security number is your first and continuous connection with Social Security. It helps us identify and accurately record your covered wages or self-employment earnings. We also use it to monitor your record once you start getting benefits.

A Social Security number is important because you need it to get a job, collect Social Security benefits and get some other government services. You should **keep your Social Security card in a safe place with your other important papers** and avoid giving it out unnecessarily.

Applying for an Original SSN

Newborns

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

Age 12 or Older Applications

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

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.

Non-Citizen Applications

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

Applying for a Replacement Card

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 certified copies (certified by the issuing agency) proving your U.S. citizenship, age, and identity.

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

Request a Social Security Replacement Card Online

We added a new service delivery option for certain Social Security replacement card requests. Customers can use their **my Social Security** account to complete a replacement card request online in most states and the District of Columbia, without the need to visit us in person. To be eligible, a person must meet all of the following:

- Have or create a mySocial Security online account
- Be a U.S. citizen
 - All non-citizens will need to go to a Social Security office and submit other evidence for a replacement card.
- Be 18 years or older at the time they request the replacement card

- Request a replacement card themselves that requires no change to their record
- Have a U.S. mailing address
- Have a valid current driver's license or state-issued non-driver identity card from a participating area

Visit www.ssa.gov/myaccount to find out this service is available in your area.

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

Age – If your client 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, as proof of identity, Social Security must see their:

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

If your client does not have one of these specific documents or they cannot get a replacement for one of them within 10 days, we will ask to see other documents, including:

- 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

Documents noted above used for identification must also include identifying information like name, age, date of birth, and photo.

Retirement

Calculating Retirement Benefits

Monthly retirement benefits are paid to workers who are at least age 62 and are insured. A person becomes insured by paying Social Security taxes. Taxes paid earn credits toward benefits. Generally, a person needs 40 work credits to be insured. For example, in 2019, a person earned one work credit for each \$1,360 in earnings. The amount to earn a work credit changes each year. The most that a person can earn is four credits per year. Someone earning \$5,440 or more in 2019 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.socialsecurity.gov/OACT/COLA/QC.html#qcseries.

Because retirement benefits are meant to replace part of the earnings a person had before they retired, an individual who works over a set 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 they reach full retirement age, they can earn as much as they want and receive retirement payments each month.

If a person takes Social Security retirement 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 www.ssa.gov/planners/retire/whileworking.html.

Work History Affects Retirement Benefits

The amount Social Security pays is based on how much people earned when they worked, so higher earnings result in higher benefits. We use the average of their highest 35 years.

You can use the Retirement Estimator, at www.ssa.gov/benefits/retirement/estimator.html to get an estimate of future retirement benefits.

Please keep in mind that these are just estimates. Your client may be able to work and receive retirement benefits depending on the amount of income they receive. For a full explanation, see our publication, How Work Affects Your Benefits, at www.socialsecurity.gov/pubs/EN-05-10069.pdf.

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 benefit. This is called the Windfall Elimination Provision. They can learn more online at www.ssa.gov/planners/retire/wep.html or by calling Social Security.

Family Retirement Benefits

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

Spouses

Spousal 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 that 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, widow's or widower's benefit may be offset due to receipt of that pension. This offset is referred to as the Government Pension Offset, or GPO. They can learn more online at www.ssa.gov/planners/retire/gpo.html or by calling Social Security. Social Security will provide them a complete list of reporting responsibilities when they file for benefits.

Unmarried Children and Grandchildren

More and more people find themselves raising grandchildren. Social Security will pay benefits to grandchildren if the child's natural or adoptive parents are either deceased or disabled.

Under certain circumstances, Social Security may pay benefits to grandchildren or step-grandchildren whose natural or adoptive parents are deceased or disabled when the grandparent providing most of the grandchild's support becomes entitled to their own retirement or disability benefits, or dies. Refer to www.ssa.gov/people/kids/ for additional information.

When your client receives Social Security retirement benefits, his or her children may also qualify for benefits. An unmarried child, including an adopted child, or, in some cases, a stepchild, grandchild, or step-grandchild — may qualify 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 qualify if the disability started before age 22. The child's disability must also meet the definition of disability for adults

Benefits for Divorced Spouses

If you are divorced, but your marriage lasted 10 years or longer, you can receive benefits on your ex-spouse's record (even if they have remarried) if:

- You are unmarried;
- You are age 62 or older;
- Your ex-spouse is entitled to Social Security retirement or disability benefits; **and**
- The benefit you are entitled to receive based on your own work is less than the benefit you would receive based on your 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 you start receiving benefits at full retirement age. The benefits do not include any delayed retirement credits the ex-spouse may receive.

If you remarry, you generally cannot collect benefits on your former spouse's record unless your later marriage ends (whether by death, divorce, or annulment).

If your ex-spouse has not applied for retirement benefits, but can qualify for them, you can receive benefits on their record if you have been divorced for at least two years.

If you are **eligible for retirement benefits** (www.ssa.gov/planners/credits.html) on your own record **and** divorced spouse's benefits, we will pay the retirement benefit first. If the benefit on your ex-spouse's record is higher, you will get an additional amount on your ex-spouse's record so that the combination of benefits equals that higher amount.

If you continue to work while receiving benefits, the **retirement benefit earnings limit** (www.ssa.gov/planners/retire/whileworking.html) still applies. If you are eligible for benefits this year and are still working, you can use our **earnings test calculator** (www.ssa.gov/OACT/COLA/RTeffect.html) to see how those earnings would affect your benefit payments.

If you will also receive a pension based on work not covered by Social Security, such as government work, your **Social Security benefit on your ex-spouse's record** (www.ssa.gov/planners/retire/gpo.html) may be affected.

The amount of benefits you get has no effect on the amount of benefits your 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 employee via phone, VSD (Video Service Delivery), or face-to-face at the local Social Security office.

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

Your client 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 employee asking them 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:

- Widows/Widowers
- Divorced widows/Divorced widowers
- 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 as short a period as 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.

Eligibility for Survivors Benefits

The following are eligible to receive survivors benefits:

- Reduced widows or widowers benefits can begin as early as age 60.
- Widows and widowers may receive full benefits at age 65 if they were born on or before January 1, 1940.
- If a divorced widow or widower meets Social Security's definition of disability, they can begin receiving benefits as early as age 50.
- Widows or widowers 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 what percentage the survivors are entitled to. 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 widow or widower, at full retirement age or older, generally receives 100 percent of the worker's full retirement amount, assuming the worker did not receive a reduced benefit prior to death.

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

A widow or widower, any age, who is disabled or has a child younger than age 16 in their care, receives 75 percent 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 widow's or widower's benefit. This is called the Government Pension Offset. They can learn more online at www.ssa.gov/planners/retire/wep.html or by calling Social Security.



Disability Benefits

Disability Benefits are for those who have a medical condition or combination of impairments preventing substantial work for at least 12 months, or is expected to result in death. Federal law requires that we use a strict definition of disability even though other programs are able to offer partial or short-term disability.

If your client is still working when they file, we will decide if they are able to perform significant and productive physical or mental work. This is termed the ability to engage in substantial gainful activity (SGA). For example, in 2019, monthly earnings of more than \$1,220 or \$2,040 for blind earners was considered SGA. The SGA amount changes each year. For self-employed clients, we determine SGA based on three tests, all of which must be considered 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 subsidies provided by their employer. More information about SGA is available at: www.ssa.gov/OACT/COLA/sga.html.

Social Security Disability Programs

We pay benefits through two different programs: the Social Security Disability Insurance (SSDI) program and the SSI program. There are many differences between the two programs, but to be eligible for SSDI, a person must have a current work history based on their age at the time they became disabled.

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

Amount of Benefits

When your client is approved to receive SSDI benefits, cash payments begin with the sixth full month after the date the disability began (with certain limitations on retroactivity).

The amount of the monthly benefit is based on the applicant's average lifetime earnings. Your client's Social Security Statement can provide an estimate of how much they would receive if they became disabled.

Benefits for your Client's Family

If your client receives Social Security disability benefits, some of their family members may be able to receive benefits. Those members include:

- 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
- 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 doesn't reduce your client's benefit or any benefits due to a current spouse or children.

The SSI program does not pay benefits to dependents or survivors.

Windfall Elimination Provision

Retirement or disability pensions from work that was not covered by Social Security, such as a city agency, may reduce your client's Social Security benefit. This is called the Windfall Elimination Provision, or WEP. They can learn more online at www.socialsecurity.gov/planners/retire/wep.html or by calling Social Security. The family's benefits can be affected by factors including 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.

Disability Application Process

Filing Process

The process for filing for Social Security disability or SSI 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.

Documentation

In preparation for the disability application, it is helpful to gather some information ahead of time, whether your client is filing online, at the Social Security office, or over the phone. Some of the information for adult applications includes:

- Original or certified copy of their birth certificate or other proof of age
- 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)
- 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 a person who 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

Disability Benefits for Children

If your client is applying for disability benefits for children, Social Security will need to know:

- Original or certified copy of their birth certificate or other proof of age
- 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 name 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
- Proof of current income for the child and family members living in the household (for example, pay stubs, self-employment tax returns, unemployment, other program benefits, or child support)

- Proof of resources for the child and parents living in the household (for example, bank account statements, life insurance policies, certificates of deposit, stocks, or bonds)
- Names, addresses, and phone numbers of any employers the child has worked for
- An original or certified copy of the child's birth certificate, if Social Security hasn't seen it recently
- Names and SSN for all the children and adults who live in the household

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

For SSI childhood disability cases, Social Security also needs:

- Proof of current income for the child and family members living in the household (for example, pay stubs, self-employment tax returns, unemployment, other program benefits, or child support)
- Proof of resources for the child and parents living in the household (for example, bank account statements, life insurance policies, certificates of deposit, stocks, or bonds)

Disability Evaluation

Disability applications are sent to the state Disability Determination Services (DDS) for evaluation of the medical conditions. For an SSI childhood disability determination, the case is evaluated based upon whether it causes marked and severe functional limitations. For adult disability determinations, the DDS reviews the case 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. The exam is paid for by Social Security. If your client does not go to the CE, their claim may be denied.

After the DDS makes a decision, the case is returned to the Social Security office for processing. Of course, some cases are processed more quickly and some take longer, especially those involving a CE. If your client is filing an application for SSI, Social Security may need to update their record after the medical decision has been made to determine whether there have been any changes to income, resources, or living arrangements since the application was filed. If the application was for SSI disabled child benefits, Social Security may also ask about parental living arrangements, income, and resources.

Compassionate Allowances

Compassionate Allowances (CAL) are a way to quickly identify diseases and other medical conditions that, by definition, meet Social Security's standards for disability benefits. These conditions primarily include certain cancers, adult brain disorders, and a number of rare disorders that affect children. The CAL initiative helps us reduce waiting time to reach a disability determination for individuals with the most serious disabilities. The Compassionate Allowances program identifies claims where the applicant's disease or condition clearly meets Social Security's statutory standard for disability. By incorporating cutting-edge technology, the agency can easily identify potential Compassionate Allowances to quickly make decisions. The Social Security Administration (SSA) uses the same rules to evaluate CAL conditions when evaluating both Social Security Disability Insurance (SSDI) or Supplemental Security Income (SSI) programs.

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, go to: www.ssa.gov/compassionateallowances/index.htm.

Medicare Coverage for Disabled Individuals

Disabled individuals will get Medicare coverage automatically after they have received disability benefits for 24 months.

Continuing Disability Review (CDR)

We review most people's medical conditions every three years unless we believe that the condition will improve sooner. We will send forms to your client or their Representative Payee to complete. The forms should be returned to the local Social Security office, where they are reviewed and sent to the state Disability Determination Services (DDS). The DDS will obtain records to make the determination regarding your client's disability. A notice will be sent to your client once the review is completed. This may take several months. If the medical review determination is not favorable to the beneficiary, refer to the Appeals section for information.

It is very important that the medical review be completed timely. Finding out quickly that the situation has changed, may keep clients from having delayed, missing payments or being paid incorrectly. We can always correct an underpayment situation by paying the additional benefits due, but it may be stressful when a beneficiary finds out that they have received more in benefits than due and are asked to pay it back. Additionally, sometimes the loss of the monthly SSI can result in the loss of state-administered Medicaid.

Child Under Age 18

A CDR 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 we do the review, we'll ask the child's payee to show evidence that the child is receiving treatment for their condition. If the child's payee refuses to show us evidence that the treatment is being provided, we may decide to look for a new payee.

Work that they have done during the review period must be documented. If they have reported the work and furnished their pay stubs, this part of the determination will already be completed. If they did not report their work, we will need information about their work history, the pay stubs, as well as the medical information.

When a review is started, the local Social Security office will contact your client or their Representative Payee for sources of current medical information. It is very important that all the sources be listed so Social Security can get as much medical information as possible. We will also need a completed medical release form **SSA-827** medical release to get any additional medical information needed.

SSA will send a yearly informational brochure 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 brochure 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. Benefits available through Social Security are different than those from the Department of Veterans Affairs (VA) and require a separate application.

The expedited process is for military service members who become disabled while on active military duty on or after October 1, 2001, regardless of where the disability occurs. For more information regarding Wounded Warriors, please visit www.ssa.gov/people/veterans/.

Military Pay and Eligibility for Disability Benefits

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

Your clients cannot receive Social Security disability benefits 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 your military duty status.

Disability Application

They may apply for disability benefits at any time while in military status or after discharge, 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/people/veterans/, 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. We also have a “disability starter kit” available online to help individuals complete their application.

A VA compensation rating of 100 percent permanent and total does not guarantee that you will receive Social Security disability benefits. To be approved for Social Security benefits, you must meet Social Security’s definition of “disability”.

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.

People awarded retroactive Social Security disability insurance benefits also may become entitled to Medicare Part A for months before they receive the disability award notice. Effective 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 currently.

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 DoD with any questions related to their TRICARE coverage and Medicare Part B enrollment. They may also visit www.socialsecurity.gov/legislation/tricareinfo.html for more information.

Service Members May Remain on Active Duty

They 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 their:

- 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 should contact Social Security.

Changes in their work status may affect their Social Security benefits. Your client needs to tell us right away about any changes in their 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 field office.



Supplemental Security Income

SSI is a program based on financial need. As stated earlier, it is different than Social Security benefits. Many people who are eligible for SSI may also be entitled to receive Social Security benefits. In fact, the application for SSI is also an application for Social Security benefits. However, SSI and Social Security are different in many ways.

Unlike Social Security benefits, SSI benefits are not based on an individual's prior work or a family member's prior work. SSI payments are paid from federal general revenue funds, which Social Security administers. The distinction is important because rules and regulations for SSI benefits are very different than those for Social Security benefits.

SSI payments can be paid to elders 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. Disabled clients need to follow the process outlined in the SSI section at www.socialsecurity.gov. DDS will make a decision about the person's disability. However, if your client is found to be disabled for SSDI, they are also considered disabled for SSI.

In addition, to get SSI, your client 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 non-citizens
- File an application

SSI Guidelines

In many States, an individual who receives SSI benefits automatically qualifies for Medicaid. Information about the amount of SSI benefits may be found at www.ssa.gov/ssi/text-general-ussi.htm. Payments are made on the first day of the month. If that date falls on a weekend or holiday, the payments are made on the preceding business day.

SSI Income

SSI is a needs-based program. We consider the client's 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 can be used to meet his or her need for food or shelter. For SSI purposes, income includes the receipt of any item which can be applied, either directly or by sale or conversion, to meet basic needs of food or shelter (e.g., wages, self-employment, Social Security benefits, pensions, etc.). Although some types of income do not affect the SSI benefit, most income counts. **Individual Indian Monies (IIM) paid on Indian lands are not counted in certain cases unless the client receives more than \$2,000 per year.**

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 later unless the income makes the client totally ineligible for SSI.

Income may also include the value of food, shelter or both received from others. This can reduce the SSI payment. More information on SSI living arrangements is available at www.ssa.gov/ssi/text-living-ussi.html.

Resources

As a program based on need, SSI also considers the value of a person's resources, including those of spouses and/or parents 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:

- Real estate
- Bank accounts
- Cash
- Stocks and bonds
- Vehicles
- Life insurance policies
- Any other valuable items that could be turned into cash
- 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 and a home that serves as the individual's primary residence. However, clients must report when they sell any property. The money they receive may count as a resource the following month.

Institutions

There are additional rules about getting SSI when a person lives in certain types of institutions and receives SSI. If an institution is involved, your client will need to contact Social Security.

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 qualify if they have a physical or mental condition, or combination of conditions, that meets Social Security's definition of disability for children, and if his or her income and resources, and the income and resources of an ineligible natural or adoptive parent (and that parent's spouse, if any) 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 of your client's child and resources when deciding if he or she 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 they are 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 payments.

We limit the monthly SSI payment to \$30 when a child is in a medical facility, and health insurance pays for his or her 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 \$1,220 a month in 2019. (This earnings amount 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 very seriously limit the child's activities.
- The child's condition(s) must have been disabling, or 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 payments for their child based on a disability, we will ask your client for detailed information about the child's medical condition and about how it affects his or her 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, they 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 in your client's state. Doctors and other trained staff in that state agency 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 state agency 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 state agency may take three to five 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, however, we make SSI payments right away, and for up to six months, while the state agency decides if your client's child has a qualifying disability. The following are some conditions that may qualify:

- 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 your client's child has one of the qualifying conditions, they may get SSI payments right away. If the state agency ultimately decides that the child's disability is not severe enough for SSI, the client will not have to pay back the SSI payments that the child received.

SSI Disability Reviews

We review most people's medical conditions every three years unless we believe that the condition will improve sooner. We will send forms to your client or their Representative Payee to complete. The forms should be returned to the local Social Security office, where they are reviewed and sent to the state Disability Determination Services (DDS). The DDS will obtain records to make the determination regarding your client's disability. A notice will be sent to your client once the review is completed. This may take several months. If the medical review determination is not favorable to the beneficiary, refer to the Appeals section for information.

It is very important that the medical review be completed timely. Finding out quickly that the situation has changed, may keep clients from having delayed, missing payments or being paid incorrectly. Additionally, sometimes the loss of the monthly SSI can result in the loss of state-administered Medicaid.

The law requires that we review the child's medical condition from time to time to verify that his or her disability still meets our criteria. We must do this review:

- 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 1. If we determine their medical condition is not expected to improve by their first birthday, we may schedule the review for a later date.

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 don't count the income and resources of the client's parents beginning the month following the month he or she turns 18. We count only the disabled adult and his or her spouse's income and resources. We use the disability rules under the adult criteria when deciding whether an age 18 child is disabled as an adult.

If your client's child is already receiving SSI payments, we must review the child's medical condition when they turn age 18. We usually do this review during the one-year period that begins on the child's birthday. We will use the adult disability rules to decide whether the 18-year-old is disabled.

Even if the client's child wasn't eligible for SSI before his or her 18th birthday because the child's parent(s) had too much income, or too many resources, they may become eligible for SSI at age 18 as an adult.

For more information, read ***Supplemental Security Income (Publication No. 05-11000)***. (www.ssa.gov/pubs/EN-05-11000.pdf)

Continuing Reviews

SSI recipients (or their Representative Payee) are responsible for reporting any information, which may affect their eligibility or payment amount. However, they do not always report necessary information timely. Therefore, Social Security has established interfaces with federal and state agencies whose records contain information, which may affect SSI eligibility or payment amount for your clients. They may also require subsequent contacts with your clients.

If your client receives an appointment letter for the review and they are not able to make the scheduled appointment, call us so that we can reschedule the appointment to a time that is more convenient.

If we do the review by mail, we will send a form to complete, sign, and return. When Representative Payees are involved, they must complete and sign the redetermination form. If the client 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:

- Savings account, checking account, or other bank statements regardless of the balance, all accounts should be reported
- Pay stubs or income tax returns
- Proof of other income received (e.g., tribal lease payments, per capita payments, trust disbursements, pensions, annuities, unemployment compensation, worker's compensation, etc.)
- Life insurance policies, including any current cash surrender value
- Burial Contracts
- Rent Receipts

Unfavorable Determination

Social Security beneficiaries are notified in writing of any decisions. When our decisions are not favorable to them, they are given the chance to request that their payments continue while they make a first level appeal of the decision. Recipients can request payment continuation when they appeal a decision within 10 days of receiving the unfavorable notice.

If the appeal isn't overturned, the claimant could be responsible for repayment. See more information in ***Supplemental Security Income (Publication No. 05-11000)***. (www.ssa.gov/pubs/EN-05-11000.pdf)

Slightly different rules apply to medical cessation cases. Medical cessation is when benefits end because of medical improvements. When appealing medical cessation cases, a person may elect to have benefits continued at both the first and second levels of appeal.

The Appeals Process

Right to Appeal

If your client disagrees with their decision, it can be appealed. When your client asks for an appeal, Social Security will look at the entire decision, not just the part they disagree with. 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 received 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 levels of appeal are:

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

File an Appeal

Your client or their representative may appeal a disability decision online at www.ssa.gov/benefits/disability/appeal. Your client or their representative can appeal a decision on their Social Security or SSI disability claims by easily completing and submitting online the request for reconsideration or a hearing. To learn more about the disability process, please go to www.ssa.gov/disability.

Your client or their representative may also appeal a non-medical decision by completing and submitting the online request for reconsideration or hearing.

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

In most states, 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). 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.

Appeals Hearing

If the client disagrees with the reconsideration, the next level of the appeals process is a hearing before an Administrative Law Judge (ALJ). This is the second level of appeal for people in most states.

The judge working the case has had no part in any decision up to this point. The judge notifies the client of the time and place of the hearing. It can be many months before the hearing is scheduled. Before the hearing, Social Security

may ask the client to provide more evidence and to clarify information. The client may appoint a representative. If your client does not wish to come to the hearing, Social Security must be notified in writing. At the hearing, the judge will question your client and any witnesses, such as a vocational expert. Sometimes a video hearing is conducted rather than a face-to-face hearing.

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 case to the ALJ for further action. The Appeals Council will notify your client by mail of the actions it has taken on the 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 them about the Appeals Council's action also will tell them how to ask a court to look at their case.

Returning to Work

Social Security has special rules called work incentives that allow your clients to test their ability to return to work, while still receiving Social Security disability benefits.

They also can get help with the 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)* (www.ssa.gov/pubs/EN-05-10095.pdf) 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 as soon as possible. They should tell us when they start or stop work and if there is a change in their job duties, hours of work, rate of pay, or if there are 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 have options to report their current work activity. They can do it online from their *my Social Security* account, call us at **1-800-772-1213**, TTY **1-800-325-0778**, or visit their closest Social Security office. Your client can open a mySocial Security account free of charge 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 told us about their current work situation.

Report Changes in Work Activities

Most changes in your work activity can be made by phone, fax, mail, in person or by using *my Social Security* online. You can reach our toll free number from 7 a.m. to 7 p.m. at **1-800-772-1213**, TTY **1-800-325-0778** Monday through Friday. You can also call, visit or write your local Social Security office. You can locate your local office by visiting our website at www.socialsecurity.gov/locator.

If your client receives Disability benefits and has a *my Social Security* account, reporting wages online is possible by using *my Wage Report* application. If receiving SSI benefits, changes in wages must be reported monthly. In addition to the online tool, Social Security also offers a toll-free wage reporting telephone system and a mobile wage reporting application. These options are located on our website at www.socialsecurity.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 you report any changes in work activity, we provide you with a receipt that verifies that you have properly fulfilled your obligation of reporting. Keep this receipt with any paystubs so we can verify your monthly earnings and any allowable deductions from earnings.

Work Incentives

SSDI and SSI put employment support efforts in place 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 (e.g. vocational rehabilitation agency). With the support in place, the beneficiary may receive more pay than the actual value of the services performed.
- **Unsuccessful Work Attempts (UWA)** – an effort to do 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 needed to help them work.

- **Impairment-Related Work Expenses (IRWE)** – costs of certain impairment-related items and services that the worker needed to work.
- **SSI Blind Work Expenses (BWE)** – We do not count any earned income that your client uses to meet expenses that they need to earn that income when we decide if they are eligible for Supplemental Security Income (SSI), and figure their payment amount. To qualify they must be eligible for SSI based on blindness.
- **Plan for Achieving Self-Support (PASS)** – Is another SSI program available that allows disabled beneficiaries to set aside other income for a specified period of time or resources that are essential to the disabled beneficiaries' means of self-support.
- **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 increases your client's available choices 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 report their work activity and they have a disabling impairment. If their gross earnings are more than \$880 and if 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 re-entitlement period. During the 36-month re-entitlement 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 continue to have a disabling impairment.

Other support programs that provide vocational rehabilitation or Medicaid while working or special benefits are the following: **Section 301, Section 1619(b) and Section 1619(a)**.

Work Incentives Planning and Assistance Program

WIPA projects are community-based organizations that receive grants from SSA to provide all Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI) disability beneficiaries (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 your call, call **1-866-968-7842**, toll free, **1-866-833-2967** (TTY) M-F 8 a.m. Eastern Time.

Receiving Payments

Direct Deposit

If your clients have a bank account, they can sign up for Direct Deposit by doing any of these:

- Start or change direct deposit online (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 field office

Direct deposit is a simple, safe, and secure way to get benefits. Be sure to tell your clients to have their checkbook or 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.

Consider the Direct Express debit card as another viable option for your clientele. The Direct Express card is a debit card they can use to access their benefits. Clients do not need a bank account for Direct Express.

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. They can use the card to make purchases, pay bills, or get cash at thousands of locations.

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

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

The Direct Express® card is simple and easy to use. They can use it to:

- Make purchases – Present their 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 that allows Direct Express® Debit MasterCard® cardholders to access their balance and transaction history, locate ATMs, and set up low balance and deposit alerts.



Direct Express Fees

Most services are free. There is no cost to sign up for the card and there are no monthly fees. While there are fees for a limited number of optional transactions, it is possible to use the card free of charge.

Service	Fee
Purchases at U.S. merchant locations	Free
Cash-back with purchase	Free
Automatic low balance notification*	Free
Automatic deposit notification*	Free
Web account access	Free
ATM balance inquiry	Free
ATM denial	Free
Card Replacement-one per year	Free
Customer Service calls	Free
Mobile Application-DXSM (for Android and Apple devices)	Free
ATM cash withdrawal in U.S. (surcharge by ATM owner may apply)	One free withdrawal with each deposit to your Card Account
ATM cash withdrawal after free transaction	\$0.85 each withdrawal
Direct Express Cash Access	\$1.50 per transaction
Monthly paper statement mailed to you	\$0.75
Funds transfer to a personal U.S. bank account	\$1.50 each time
Direct Express Cardless Benefit Access	\$8.50 to \$12.00 per transaction
Card Replacement (after 1st free one each year)	\$4.00
Expedited delivery of replacement card	\$13.50 each time
ATM cash withdrawal outside of the U.S.	\$3.00 plus 3% of amount withdrawn

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.

Incorrect Payments

Overpayments

An overpayment occurs when Social Security pays a beneficiary more than he or she should have been paid for one or more months. If this happens, we will notify the overpaid person and any representative. Our notice will include the amount of the overpayment, explain how and when the overpayment occurred, how we plan to recover the overpayment, and explain his or her 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 he or she has been paid too much and the overpayment amount is correct, there are several ways to repay the benefits. We request the beneficiary to repay the overpayment in full within 30 days of the notice. If the beneficiary is receiving benefits, we will withhold the full amount of the benefit each month, unless the beneficiary requests a lesser withholding amount.

If a financial hardship exists, we will look at the repayment amount being requested, review the beneficiary's financial situation, and make a decision. Full withholding of the Social Security benefit starts 30 days after we notified 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 benefits, we can withhold the SSI overpayment from the Social Security payment.

Repayment of Overpayments – SSI Beneficiary

If a person is receiving SSI, we generally withhold 10 percent of the overpayment until the overpaid amount is recovered. A lesser amount can be requested if a financial hardship exists. Deductions from a SSI payment will not start until at least 60 days after we notify the beneficiary of the overpayment. If the person no longer receives SSI payments, then 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, then Social Security will collect the overpaid funds from a federal tax refund, wages, or future Social Security or SSI benefits.

Overpayment Appeal Rights

When your clients do not agree that they have been overpaid, or if they believe the amount is incorrect, they can file an appeal using Form SSA-561. 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 must be completed on the request form.

Waiver Requests

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

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

If the 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 Beneficiaries with a Dedicated Account

Sometimes a large amount of money for past SSI benefits (retroactive benefits) is due. Depending on how much is due, Social Security may require the use of dedicated accounts 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 benefit 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. The local Social Security office will explain all of this to the Representative Payee.

It is very important that the payee remember that this 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:

- 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 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 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 who are incapable of managing their Social Security or SSI payments. Representative Payees help people (beneficiaries) by making sure their 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. The Representative Payee and Organizational Payee process and responsibilities are available at www.ssa.gov/payee/index.htm.

If your client needs to help another person in managing their money, there are several things that 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

To appoint you as an official representative, each applicant must sign a written notice appointing you 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. Annotate in the Summary/Remarks section of the online application or disability report: "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 you as the representative, just as we would the applicant. As an appointed representative, you can act on your client's behalf by:

- Getting information from your client's Social Security file
- Helping get medical records or information to support your client's claim
- Coming with the applicant to any interview, conference, or hearing with us
- Requesting a reconsideration, hearing, or Appeals Council review
- Helping the applicant and any witnesses prepare for a hearing and questioning any witnesses

As an appointed representative, you will also receive a copy of the decisions we make on your clients' claims.

Applying to be a Representative Payee

To apply to be a payee for a beneficiary, the individual should contact the Social Security office closest to them to complete an application. Social Security will also 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. If the face-to-face interview process causes an undue hardship such as distance to an office or VSD, work prevents the applicant from visiting the FO during regular business hours, or the payee applicant is currently serving as a payee, an application over the phone is an option. At this time, we do not offer an online process to apply to be a Representative Payee.

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

Representative Payee Responsibilities

Once Social Security selects the applicant to be a Representative Payee, the payee must make sure the beneficiary's 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 is due. This list includes some examples of things that may affect the benefit amount. They should report when the beneficiary:

- 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 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
- 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, 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.

Responsibilities of Reporting

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

They should report when the beneficiary:

- Moves to or from a hospital, nursing home, or correctional facility or other institution
- If married, when the couple separates or resumes living together
- Has a change in income or resources
- Someone moves into or out of the beneficiary's household

If the Representative Payee fails to report any of the actions described above to Social Security, the beneficiary may be paid too much money. In that case, the payee may have to return the money the beneficiary 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) with certain exceptions. The following payees are exempt from the annual accounting requirement:

- A natural or adoptive parent of a minor child entitled to title II benefits and/or eligible for title XVI payments who primarily resides in the same household as the beneficiary
- A legal guardian of a minor child entitled to title II benefits and/or eligible for title XVI payments who primarily resides in the same household as the beneficiary
- A natural or adoptive parent of a disabled individual (as defined in section 223(d) of the Act) entitled to title II benefits and/or eligible for title XVI payments who primarily resides in the same household as the beneficiary

- The spouse of an individual entitled to Title II benefits and/or eligible for Title VIII or Title XVI 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 ***A Guide for Representative Payees (publication No. 05-10076)***, (www.ssa.gov/pubs/EN-05-10076.pdf) 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 funds, they must return any benefits, including interest earned and cash on hand that belongs to the beneficiary, to Social Security. The funds will be re-issued to the beneficiary 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 that 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 field 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 and provides for their personal needs. For many beneficiaries, a family member or friend serves as the payee. For a growing number of individuals, no one is available to fill this role. In an effort to ensure that beneficiaries 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, the elderly, and the disabled who are unable to manage their Social Security or SSI benefits.

Managing Benefit Payments

A Representative Payee receives and manages the beneficiary's payments and uses them for the care and benefit of the beneficiary. Social Security or SSI benefits are properly used if they are:

- 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' needs are met and that detailed and accurate records of how they use benefits are maintained.

Reporting Changes

After your client or their family begins receiving Social Security or SSI benefits, their situation may change. They will want to keep in touch with Social Security Administration 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 **my Social Security Account**. Unreported changes may cause payment errors, such as overpayments or underpayments.

Clients receiving Social Security benefits should report the following:

- Changes of mailing address
- Change of marital status
- Name change
- Disabled beneficiaries/clients should report any time they start or stop a job, including self-employment; and submit their monthly pay stubs to their local field office
- 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 website. Please refer to the fact sheet ***“What You Can Do Online”*** at www.ssa.gov/onlineservices/.

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 that the SSI payment is correct:

- A change in the number people in the household
- A move or change of address (COA)
- 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 **my Wage Report** (myWR), SSI Mobile wage reporting (SSIMWR) and 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.

Reporting Fraud, Waste, or Abuse

If you suspect someone of committing fraud, waste, or abuse against Social Security, the Office of the Inspector General is responsible for investigating your reports. A variety of situations may be considered fraud, waste, or abuse. These include:

- Making false statements on claims.
- Concealing facts or events which affect eligibility for Social Security benefits.
- Misuse of benefits by a Representative Payee.
- Buying or selling counterfeit or legitimate Social Security cards.
- Social Security Number (SSN) misuse involving people with links to terrorist groups or activities.
- Crimes involving SSA employees.
- Scams involving the impersonation of an SSA employee.
- Bribery of a SSA employee.
- Fraud or misuse of grant or contracting funds.
- Standards of conduct violations.
- Worker's compensation fraud.

You can report suspected fraud, waste or abuse by internet, telephone, mail, or facsimile.

- By internet: <https://oig.ssa.gov/report>
- By telephone: **1-800-269-0271** from 10 a.m. until 4 p.m. Eastern Standard Time. For the deaf or hard of hearing, a TTY line is available at **410-597-2101**.
- By fax: **410-597-0118**
- By mail: Social Security Fraud Hotline
P.O. Box 17785
Baltimore, MD 21235

Reporting Elder Abuse

According to a study released by the American Journal of Public Health in 2010, approximately five million elderly Americans are victims of abuse. This exceeds the number of domestic violence and child abuse victims combined. Social Security beneficiaries 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, physical, 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:

- 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 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**.

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 www.fedbar.org/Federal-Indian-Law



Medicare

www.medicare.gov

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 Social Security, and we can give them general information about the Medicare program.

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 enrolled 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 utilizes ITUs for their healthcare issues.

Part D

Part D (Prescription drug coverage) is voluntary and the costs are paid for by the monthly premiums of enrollees and Medicare. 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/or Medicaid 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.

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/benefits/medicare or call Social Security for an appointment three months prior to their 65th birthday so we 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 alien 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 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 your client's eligibility for Medicare is based on being disabled, Medicare will begin 24 months after they begin receiving monthly benefits unless they have amyotrophic lateral sclerosis (ALS) or End Stage Renal Disease. For example, if a person starts receiving monthly disability payments in January 2019, they will be eligible for Medicare in January 2021.

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.

If your client enrolls during the first three months of their IEP, their Part B will start with the month that they are first eligible. If they enroll during the last four months, their Part B will start from one to three months after they enroll.

The following chart shows when Medicare Part B becomes effective:

If your client enrolls in this month of your client's IEP	Part B coverage starts
1st	The month the client becomes eligible for Medicare
2nd	The month the client becomes eligible for Medicare
3rd	The month the client becomes eligible for Medicare
4th	One month after Enrollment
5th	Two months after Enrollment
6th	Three months after Enrollment
7th	Three months after Enrollment

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 does not enroll during the IEP, they have another chance each year to sign up during a general enrollment period from January 1 through March 31. The coverage would be effective July 1 following the enrollment. Your client's monthly premium would increase 10 percent for each 12-month period that they were eligible for, but did not enroll in, Medicare Part B.

Special Enrollment Period

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 have a SEP in which they can sign up for Medicare Part B. This means that they can delay enrolling in Medicare Part B without having to wait for the next general enrollment period and having to pay a late enrollment penalty. The rules allow your client to:

- 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.

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 on 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.socialsecurity.gov/medicare/prescriptionhelp.

Individuals that have Medicare and receive SSI and/or Medicaid, 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 field 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/benefits/medicare/prescriptionhelp 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 call the 800 number listed above between 7 a.m. and 7 p.m. on business days, or file online.

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 2014, then eligibility for Medicare starts in January 2016. 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

Plan Your Benefits

my Social Security is an online account that allows people quick access to their personal Social Security information. People age 18 and over can apply at www.socialsecurity.gov/myaccount.

Your client can go online to request:

- Get their Statement Online;
- Change their address and phone number;
- Start or change direct deposit information;
- Get a replacement SSA-1099 or SSA-1042s;
- Request a benefit verification letter;
- Request a replacement Medicare card;
- Request a replacement Social Security card (certain requirements apply);
- Report wages if your client works and receives Disability Insurance benefits.

my Social Security Statement Online is available after creating a *my Social Security* account. This is a valuable tool your clients can use to track their annual earnings.

B.E.S.T. screens for Medicare, Disability, Retirement, Survivors, Special Veterans, and SSI benefits.
<https://ssabest.benefits.gov>

Estimate Future Benefits with Social Security's Online Estimator at: www.ssa.gov/benefits/retirement/estimator.html

Discover Retirement Options and decide when to start benefits.
www.ssa.gov/planners/retire

Retirement Earnings Test Calculator shows how benefits may be received while working.
www.ssa.gov/OACT/COLA/RTeffect.html

Disability Planner describes what is available and how to qualify. www.ssa.gov/planners/disability

Survivors Planner explains how family members are protected and qualify. www.ssa.gov/planners/survivors

Apply for Benefits

Retirement benefit application can be completed easily online or in the local Social Security office. A spouses' benefit may also be applied for online with the choice of processing in a special unit or in the local Social Security office.
<https://secure.ssa.gov/iClaim/rib>

Disability benefit application is required in conjunction with the disability and work history report and is processed in the local Social Security office. <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

Online application status can be checked for a claim filed electronically by going to your *my Social Security* account.

ACA enables all U.S. citizens and legal residents to purchase health insurance. www.healthcare.gov

Medicare for medical and hospitalization insurance.
www.ssa.gov/benefits/medicare

Extra Help (subsidy) with Medicare prescription drug costs is easily applied for online. <https://secure.ssa.gov/i1020>

Business Services Online provides a suite of services for organizations www.ssa.gov/thirdparty/business

For More Information

Contact Social Security's AIAN website
www.ssa.gov/people/aiian

Contact Social Security's Regional Communications Directors
www.ssa.gov/agency/rcds.html

Tribal Courts

Tribal Courts operate a two-level court system and have general civil jurisdiction and limited criminal jurisdiction. Tribal Courts addresses 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
www.fedbar.org/Federal-Indian-Law

Questions and Answers

General

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

A. **Yes.** You or your client can still contact their local office and the national toll free service center at **1-800-772-1213** for assistance. (TTY **1-800-325-0778**).

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

A. **Yes.** You can assist your clients in applying for Social Security retirement, spouse's, or disability benefits online. To assist your client in preparing to apply for retirement or spouse's benefits, you may want to first visit our online Retirement Planners at www.ssa.gov/planners/retire/gpo.html.

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 clients use their birth certificate as ID?

A. **No.** A birth certificate may never be used as identification. However, it is acceptable to establish citizenship.

Q. May clients 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.

Q. I've 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 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. So, if you suspect someone is using another person's SSN, take these steps to guard against identity theft:

- File a complaint with the Federal Trade Commission.
- Monitor credit reports; and check your *my* Social Security account yearly to ensure income is credited correctly or call toll-free at **1-800-772-1213**. (TTY **1-800-325-0778**)

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

A. If your client gets Social Security benefits you can help them change their address online with a *my* Social Security account. If they can't use the internet, they should call our toll-free number **1-800-772-1213** (TTY **1-800-325-0778**) or visit the local Social Security office.



Questions and Answers

Retirement

Q. What month do retirement benefits begin?

A. A person can receive reduced retirement benefits beginning the first full month that they are age 62. That means that benefits are not paid 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 payment 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, spouse's, or disability benefits online; just click on the tab at the top of the page for retirement or disability benefits. They can also call **1-800-772-1213** (TTY **1-800-325-0778**).

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

A. The amount your client can earn while receiving Social Security depends on his or her age. Their earnings in (and after) the month your client reaches 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 client's children be eligible for monthly Social Security payments after my client retires?

A. Monthly Social Security payments may be payable to their 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 the grandparent for the previous year and been receiving half of their support from the grandparent.

Q. My client's spouse doesn't have enough work to qualify. Can they qualify on my work record?

A. The answer applies to both husbands and wives. Even if a spouse has never worked under Social Security, when their spouse is FRA they can receive a benefit that is equal to one-half of their FRA. Your client's spouse can begin receiving benefits as early as age 62 if they are also entitled to benefits, but the amount they receive will be reduced for each month that they file early. The spouse may also qualify for benefits before age 62 if they have your client's child, who is under the age of 16 or disabled prior to age 22, in their care.

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 also be at least age 62.

Q. Will my client automatically get Medicare benefits if they get Social Security retirement benefits?

A. **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 retirement benefit, or a railroad retirement benefit, at least four months before they turn age 65.

Individuals who are not automatically enrolled and are eligible for free Part A may file for both Part A and Part B at any time once their initial enrollment period (IEP) starts. For people who qualify for Medicare based on their attainment of age 65, the IEP is seven months long. It begins three full calendar months before age 65 and ends three months after.



If someone fails to file during their IEP, they may file during the general enrollment period (GEP) which occurs each year from January 1 through March 31. Coverage begins July 1 of the enrollment year.

NOTE: *If the person does not enroll in Part B when first eligible, 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.*

If your client is covered under a group health plan (GHP) from either their own or a spouse's **current** employment, there is a special enrollment period (SEP) available for individuals who did not enroll in Part B when first eligible (or terminated Part B coverage). These individuals can enroll in Part B anytime while still covered under the GHP or during the eight-month period that begins the month after employment ends or the GHP coverage ends, whichever happens first.

NOTE: *The SEP does not apply to people with Medicare based on End Stage Renal Disease (ESRD).*

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. The wages being counted are 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 only applies to Social Security benefits not SSI – all types of income affect SSI payments.*

NOTE: *This test applies to most Retirement, Spouse, and Survivor beneficiaries under FRA.*

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

- A. In the year your client reaches full retirement age, the benefits will be reduced \$1 for every \$3 that they earn over the limit (see www.ssa.gov/planners/retire/whileworking.html) until the month they reach full retirement age. If they expect to earn over the limit during countable months, then they should estimate that in the beginning of the year. Social Security will use the earnings reported to determine if benefits were correctly paid.

Earnings post to an individual's record by the end of the year following the year of the earnings. For example, earnings for 2019 will post to an individual's record by the end of 2020.



Questions and Answers

A Guide to Survivors Benefits

Q. Will my client lose their widow or widowers benefits if they remarry?

A. Generally, they cannot get widows or widowers benefits if they remarry before age 60. But remarriage after age 60 (or age 50 if they're disabled) won't 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.

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

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



Questions and Answers

A Guide to Disability Benefits

Q. How long does it take to be notified of a decision about disability?

A. The length of time that it takes to receive a disability decision is from three to five months or longer. It can vary depending on the nature of the disability, how quickly we obtain medical evidence, whether or not we need to request a CE, and whether the claim is randomly selected for a quality assurance review of the decision.

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 people. SSDI requires the worker to have a required amount of taxable work to be eligible for benefits. Disability benefits are payable to blind or disabled workers, widow(er)s, or adults disabled since childhood who meet 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 adults or children who are disabled or blind and have limited income and resources. The monthly payment varies up to the maximum federal benefit rate and can be increased by the state in which the client lives or decreased by your client's countable income. The monthly payment will stop if your client's 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.** The Social Security disability benefit is based 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 get Medicare?

A. We will automatically enroll a disabled beneficiary in Medicare 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 or 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

A Guide to Supplemental Security Income

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. The redetermination verifies the 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 benefits. How do they notify Social Security that they have changed their address?

A. Because a change of address for a SSI recipient often requires reevaluation of living arrangements, they cannot complete the change of address online. SSI recipients must report any change in living arrangements by calling our toll-free number, **1-800-772-1213** (TTY **1-800-325-0778**), or by calling or visiting their local office within 10 days after the month the change occurs. If not, the recipient could end up receiving an incorrect payment and having 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 benefits are based on need, but the maximum FBR is established by law, not monthly expenses.

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 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. Can I assist my client in applying for SSI, SSDI, or Medicare at our Tribal Social Services office?

A. Social Security and SSI claims can be filed online if you meet certain requirements. 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 if the local Tribal Social Services office receives scheduled visits from Social Security employees. If your client's Tribal Social Services office receives

scheduled visits from Social Security employees, they can apply when Social Security visits the office. If there are no scheduled visits, the Tribal Social Services office can help your clients 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. They can help clients contact Social Security directly by going online to locate their nearest office to visit or calling by phone.

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 benefit. 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.

Q. If my client receives an annual cash allotment from his or her tribe (for whatever reason), does he or she need to report it to Social Security?

A. If your client receives annual cash allotments from his or her 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; therefore, your client should contact Social Security to see how or if these monies will be counted.

Q. Will my client's annual Tribal or Bureau of Indian Affairs (BIA) cash allotment affect their eligibility for SSI or SSDI cash benefits?

A. Annual Tribal or BIA cash allotments can affect eligibility for SSI only. Report the allotments to Social Security and let us determine if or how they will affect your client's benefits.

Q. Are my client's BIA IIM monies counted differently than their revenue distribution (casino) monies?

A. BIA IIM and revenue distribution can be counted differently depending upon the type of disbursement made to your client. Report these to Social Security for a determination.



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 will be counted under the income and resource rules. Tribally managed gaming revenue distributed via per capita payments are not excluded from income and resources.

Q. If a person on SSI is institutionalized 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. The payment will not be reduced unless food and shelter is being provided which could cause a reduction.

Q. If an SSI recipient goes into an institution, whose responsibility (the institution, Indian Health Service (IHS) or the client's payee) is it to submit the form that can continue the benefits for 90 days?

A. The client or the client's payee should always report changes to SSA. The client or client's payee has responsibility to submit forms to SSA for temporary continuation of benefits.



Questions and Answers

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. Can babies born prematurely receive SSI benefits?

A. Social Security does provide SSI disability benefits 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 on the basis of 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 for more information.

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

Q. Can my clients go to his or her Tribal Vocational Rehabilitation (VR) program to use his or her Ticket to Work?

A. **No, they cannot.** Currently, only three Tribal VR programs are operating as Social Security Employment Networks (ENs) service providers and can accept their Ticket – they are, Jemez Pueblo, the Moapa Band of Paiute, and the Eastern Shoshone tribes. We are working to streamline the process for all Tribal VR programs to become ENs. All Tribal VR programs are automatically eligible to become EN service providers, and 35-40 of the 87 Tribal VR programs are planning to become ENs once the agreement is available. Please check with your local Tribal VR program about their plans to become an EN.



Questions and Answers

A Guide to Medicare

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

A. Medicare and Medicaid can be used at an IHS clinic or reservation hospital for medical service 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 his or her community based IHS clinic or reservation hospital?

A. They 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. If your client does not sign up for Medicare when they turn 65, they can sign up later 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, they may be eligible to sign up for Part B during the special enrollment period (SEP). Please refer to the Retirement and Disability Q & A's regarding the SEP.



Questions and Answers

A Guide to the Appeals Process

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

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

Q. What happens after my client files a hearing request?

A. After Social Security receives the request for 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 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 attends the hearing.

Q. If my client has a 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 Payees

Q. What are the duties of a Representative Payee?

A. A payee acts for the beneficiary. A payee is responsible for everything related to benefits that a capable beneficiary would do for themselves. Social Security encourages payees to go beyond just managing finances and to be actively involved in the beneficiary's life.

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

A. Power of attorney is a legal process where one individual grants a third party the authority to transact certain business for that individual. It does not diminish the rights of the individual and does not usually grant the third party the right to manage the individual's money, bank accounts, property, or possessions. The court does not usually make any decision about the individual's capability or competency when granting Power of Attorney. Power of Attorney is not recognized by the Treasury Department for the purpose of negotiating federal payments such as Social Security or SSI benefits.

If an individual has a Power of Attorney, they would still have to file an application to be the representative payee for beneficiaries' Social Security or SSI benefits.

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

A. Only a qualified organizational payee, who has applied with and been approved in writing by Social Security, can collect a fee for being a payee.

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

A. A checking account will provide cancelled checks that have been written for 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 must be titled so that it is clear to whom the money belongs.

Q. Are there activities that payees must avoid?

- A. A Representative Payee cannot:
- 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 Payments

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 payment?

- A. If your client has not made a payment in 45 days they may be selected for the various collection actions we can take, such as garnishing wages and reporting the debt to a credit bureau. It is best to make some payment, even if they can't make the entire payment. If they cannot make any payment, have them call us at the toll-free number shown on the billing statement, or call, or visit the local office.

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

- A. If it was not your client's fault that the overpayment happened, and they need all of their current income for needed 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) and returning it to the local office. They may use the online form or they may 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 deny a request for waiver, your client will be contacted for a personal conference.

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

- A. If your client disagrees 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 is usually used to file an appeal; however, any written statement signed by your client may be used.

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 is as 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.





Securing today
and tomorrow