

## Glossary

**Appeals Council.** The third—and final—level of appeal in the disability determination process, following the administrative law judge. Subsequent appeals go to federal courts.

**average indexed monthly earnings (AIME).** An average of a beneficiary's lifetime (or predisability) earnings on which the primary insurance amount, or basic Social Security benefit amount, is calculated.

**administrative law judge (ALJ).** The second level of appeal in the determination process, following reconsideration. It is the first opportunity for the claimant to appear in person and the first decision by a federal adjudicator.

**award.** An award occurs when there has been a medical allowance and all technical criteria have been met so that a benefit payment can be made.

**benefit suspension.** Benefits are suspended for various reasons, including excess income for Supplemental Security Income recipients and work above the substantial gainful activity level for Social Security Disability Insurance beneficiaries, among others. Under benefit suspension, the individual remains eligible for the program but does not collect a cash benefit.

**benefit termination.** Benefits are terminated when the individual is no longer eligible for the program.

**continuing disability review (CDR).** A review of the beneficiary's medical condition to determine whether there has been sufficient medical improvement so that the individual is no longer disabled or whether an individual has demonstrated the ability to engage in substantial gainful activity.

**constant (real) or current (nominal) dollars.** Constant (real) dollars have been adjusted for inflation to reflect what expenditures would have been if the value of the currency had not changed and the cost of living had not increased. By contrast to current (nominal) dollars are the actual dollar figures in each year, not considering the value of the currency or the cost of living. The base year for constant dollars is the year in which its value is the same as that of the current (nominal) dollar.

**Current Population Survey (CPS).** A monthly survey of 50,000 households conducted by the Census Bureau for the Bureau of Labor Statistics. The survey has been conducted for more than 50 years. The CPS is the primary source of information on the labor force characteristics of the U.S. population. Data on disability come from the annual March Supplement to the survey.

**disabled adult child.** A dependent child aged 18 or older—a son, daughter, or eligible grandchild of a retired, deceased, or disabled worker entitled to Social Security benefits—whose disability began before age 22.

**Disability Determination Services (DDS).** The state agency responsible for developing medical evidence and rendering the initial determination and reconsideration on whether a claimant is disabled or a beneficiary continues to be disabled within the meaning of the law.

**disabled widow(er).** The disabled dependent spouse of a deceased worker who was insured for Social Security purposes. Eligibility begins at age 50.

**low birth weight.** Defined for the SSI disabled children's program as a birth weight under 1,200 grams or under 2,000 grams and small for gestational age.

## Glossary (cont.)

**medical improvement review standard.** The standard, since 1984, that applies when reexamining disability cases in the Social Security and SSI disability programs. Before ceasing disability beneficiaries, it must be demonstrated that there has been medical improvement, not simply that the individual no longer meets current disability criteria. This standard is not applicable to age 18 redeterminations of SSI children.

**Listing of Impairments.** Issued by the Social Security Administration and used to identify medical conditions for purposes of determining disability. Also referred to as the medical listings.

**medical recovery.** A reason for termination that is based on evidence that the beneficiary's medical condition has improved sufficiently so that the individual is no longer medically disabled.

**Medicaid.** The program that offers medical coverage under means-tested criteria that vary from state to state. The vast majority of SSI recipients are eligible for this program. Some states offer buy-in programs for Medicaid coverage.

**Medicaid disabled.** The category used for classifying Medicaid eligibles. It includes low-income individuals of any age who are eligible as persons meeting SSA's programmatic definition of disability. Individuals who meet that definition are those receiving SSI disability benefits as well as those whose income is too high for SSI but who qualify under separate Medicaid income standards. This latter group includes Medicare beneficiaries who receive cost sharing or assistance with Supplementary Medical Insurance premiums as a Qualified Medicare Beneficiary or as a Specified Low-income Medicare Beneficiary and disabled persons using a state's buy-in program.

**Medicare.** The program that offers hospital coverage (Part A) and optional supplemental medical coverage (Part B) to Social Security disability beneficiaries 24 months after entitlement to benefits. More recently, Medicare has added the Medicare Advantage option (Part C), which offers beneficiaries the opportunity to participate in private plans, and prescription coverage (Part D) which became effective on January 1, 2006.

**Medicare disabled.** The category used for classifying Medicare eligibles. It includes disabled individuals under age 65 who are eligible by virtue of receiving Social Security or Railroad Retirement disability insurance benefits for 24 months or longer, as well as individuals under age 65 who have been diagnosed with end-stage renal disease.

**preeffectuation review.** A federal review of a state disability allowance before payment effectuation. The purpose of the review is to ensure greater uniformity and consistency of the decisions made by various adjudicators within a state agency and of decisions made by the various states.

**primary insurance amount (PIA).** The monthly amount payable to a retired worker who begins to receive benefits at full retirement age or to a disabled worker who has never received a retirement benefit reduced for age. This amount, which is derived from the worker's average monthly wage or average indexed monthly earnings, is also used as a base for computing all types of benefits payable on the basis of one individual's earnings record.

**Organisation for Economic Co-operation and Development (OECD).** An international organization that, among other things, provides statistics for international comparative work. OECD provided the international statistics for this book.

## Glossary (cont.)

**redetermination.** A redetermination of disability applies the rules used for new applicants. The medical improvement review standard does not apply. Disability redeterminations were required on some SSI childhood recipients after the 1996 welfare reform legislation and are required on SSI children who attain age 18 (redetermination is based on adult standards).

**replacement rate.** The ratio of disability benefit income to predisability income. The measure provides information about the adequacy and equity of benefit programs, as well as information about incentives to participate in the program.

**section 1619a.** The section of the 1980 Amendments that provides a work incentive for SSI recipients by permitting them to work above the substantial gainful activity level without being terminated. SSI payments continue to be offset \$1 for each \$2 earned.

**section 1619b.** The section of the 1980 amendments that provides a work incentive for SSI recipients by continuing Medicaid coverage for those whose earnings are high enough to result in the SSI cash benefit being ceased. The individual must continue to be disabled and use Medicaid services.

**Selected Social Security Area Population.** The population comprising residents of the 50 states and the District of Columbia (adjusted for net census undercount); civilian residents of Puerto Rico, the Virgin Islands, Guam, American Samoa, and the Northern Mariana Islands; federal civilian employees and persons in the armed forces abroad and their dependents; crew members of merchant vessels; and all other U.S. citizens abroad.

**substantial gainful activity (SGA).** The level of earnings that is used

- to determine eligibility for disability benefits upon application;
- to determine whether the individual is eligible to receive the disability benefit during the extended period of eligibility; and
- to establish that an individual, after completing the trial work period and extended period of eligibility, has successfully returned to work and is no longer eligible for cash benefits.

The SGA level in 2006 is \$860 a month for the nonblind and \$1,450 for the blind. The level is adjusted annually by the wage index.

**SGA recovery.** A reason for termination that is based on the individual's successful completion of the trial work period and extended period of eligibility and the demonstration that the individual has the capacity to do work that is substantial and gainful and is therefore no longer eligible for cash benefits.

**technical denial.** A denial of disability benefits for reasons other than medical, such as excess income or resources for SSI applicants or lack of insured status for Social Security applicants. Technical denials can occur before or after receiving a medical decision.

**work disability.** A disability that affects one's ability to work. Definitions vary, but a work disability typically means that the individual is limited in the amount or kind of work that can be performed. A severe work disability reflects an inability to do any work.

**Zebley.** The 1990 Supreme Court decision (*Sullivan v. Zebley*) that fundamentally changed the SSI definition of disability as it applies to children. Before *Zebley*, SSA used a "listings-only" standard for children. The Court found that this usage did not comport with the "comparable severity" criterion in the Social Security Act and mandated that SSA find a way to provide children with an "individualized functional assessment" that would parallel steps 4 and 5 for adults. In 1996, Congress replaced the "comparable severity" standard with a more strict standard of "marked and severe functional limitations."