

**Annual Report
of the
Supplemental
Security
Income Program**

**Social Security Administration
May 2008**



SOCIAL SECURITY

The Commissioner

May 30, 2008

President George W. Bush
The White House
Washington, D.C.

The Honorable Nancy Pelosi
Speaker of the House of Representatives
Washington, D.C.

The Honorable Richard B. Cheney
President of the Senate
Washington, D.C.

Dear Mr. President, Madam Speaker, and Mr. Cheney:

It is my pleasure to submit to you the 2008 Annual Report of the Supplemental Security Income Program (the twelfth such report), in compliance with section 231 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996.

Sincerely,

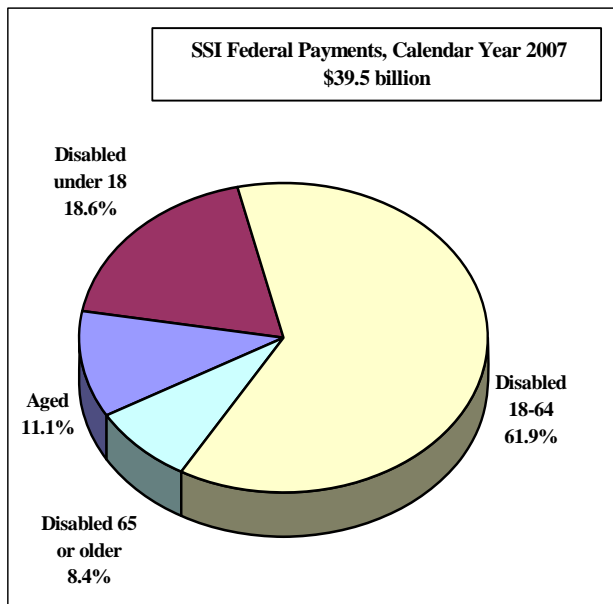
Michael J. Astrue

EXECUTIVE SUMMARY

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (Public Law 104-193) directs the Commissioner of Social Security to report annually to the President and to the Congress on the status of the Supplemental Security Income (SSI) program. A required element of these reports is to provide projections of program participation and costs through at least 25 years. This report is the twelfth of such reports, and following are its major highlights and findings.

Highlights of the SSI Program

- The SSI program is a nationwide Federal assistance program administered by the Social Security Administration (SSA) that guarantees a minimum level of income for needy aged, blind, or disabled individuals. It acts as a safety net for individuals who have little or no Social Security or other income and limited resources.
- In January 2008, 7.1 million individuals received monthly Federal SSI payments averaging \$445, up slightly from 7.0 million recipients with an average payment of \$435 in January 2007.
- Federal expenditures for cash payments under the SSI program during calendar year 2007 increased 4.6 percent to \$39.5 billion, while the funds made available to administer the SSI program in fiscal year 2007 decreased 2.1 percent to \$2.9 billion. In calendar year 2006 the corresponding Federal program expenditures and cost of administering the SSI program were \$37.8 billion and \$3.0 billion, respectively.



Major Findings of the Report

- By 2032, the end of the 25-year projection period, the Federal SSI recipient population is estimated to reach 9.5 million. The projected growth in the SSI program over the 25-year period is largely due to the overall growth in the U.S. population. The rate of participation is projected to vary somewhat by age group, with the overall participation rate of the 65 or older age groups projected to decline and the participation rate of the under 65 age groups projected to increase slightly.
- Expressed as a percentage of the total U.S. population, the number of Federal SSI recipients increased slightly from 2.26 percent in 2006 to 2.28 percent in 2007, and is projected to increase gradually to 2.53 percent of the population by 2032 due largely to the changing age distribution of the population.
- Federal expenditures for SSI payments in calendar year 2008 are estimated to increase by \$2.3 billion to \$41.8 billion, an increase of 5.7 percent from 2007 levels.
- In constant 2008 dollars, Federal expenditures for SSI payments are projected to increase to \$55.4 billion in 2032, a real increase of 1.2 percent per year.
- When compared to the Gross Domestic Product (GDP), Federal SSI expenditures are projected to decline over time, from the current level of 0.29 percent of GDP in 2007 to 0.25 percent of GDP by 2032.

CONTENTS

I. INTRODUCTION	1
II. HIGHLIGHTS	2
A. RECENT PROGRAM EXPERIENCE	2
B. SSI LEGISLATION SINCE THE 2007 ANNUAL REPORT	3
C. CURRENT ISSUES FACING THE SSI PROGRAM	3
D. KEY RESULTS FROM THE 25-YEAR PROJECTIONS	6
III. THE SUPPLEMENTAL SECURITY INCOME PROGRAM	7
A. BACKGROUND	7
B. THE BASIC PLAN	7
C. UNIFORM STANDARDS AND OBJECTIVE CRITERIA	8
D. ASSISTANCE OF LAST RESORT	10
1. Income	10
2. Resources	11
3. Filing for Other Benefits	12
4. Eligibility Issues for Residents of Public Institutions or Medical Facilities	12
5. Personal Needs Allowance	13
6. Deeming	13
a. Spouse-to-Spouse Deeming	13
b. Parent-to-Child Deeming	14
c. Sponsor-to-Alien Deeming	14
E. INCENTIVES FOR WORK AND OPPORTUNITIES FOR REHABILITATION	14
1. Earned Income Exclusion	15
2. Impairment-Related Work Expense Exclusion	15
3. Work Expenses of the Blind Exclusion	15
4. Student Earned Income Exclusion	15
5. Plan to Achieve Self-Support	15
6. Special Provisions for Disabled People Who Work	16
7. Vocational Rehabilitation/Ticket to Work Program	17
8. Expedited Reinstatement	18
F. ADMINISTRATION OF THE SSI PROGRAM	18
1. Application Process	18
2. Determination of Eligibility for Benefits	19
3. Payment of Benefits	19
4. Ensuring Continued Eligibility for Benefits	19
5. Representative Payees	20
6. Appeal Rights	20
7. Fees for Attorneys and Non-attorney Representatives	20
8. Advance Payments	21
a. Emergency Advance Payments	21
b. Presumptive Disability or Blindness	21
G. STATE SUPPLEMENTATION	22
1. Optional State Supplementary Payment Programs	22
2. Mandatory State Supplementary Payment Programs	22
3. Administration of State Supplementary Payments	22
4. Passalong Provisions	23

H. COORDINATION WITH OTHER PROGRAMS	23
1. Windfall Offset	23
2. Medicaid Determinations	23
3. Food Stamp Applications	24
4. Interim Assistance Reimbursement	24
IV. ESTIMATES OF PROGRAM PARTICIPATION AND FEDERAL EXPENDITURES UNDER THE SUPPLEMENTAL SECURITY INCOME PROGRAM, 2008-32	26
A. DEMOGRAPHIC AND ECONOMIC ASSUMPTIONS	26
B. NUMBERS OF PARTICIPANTS IN THE SSI PROGRAM	30
C. FEDERAL PAYMENTS UNDER SSI	44
D. FEDERAL SSI PAYMENTS AS A PERCENTAGE OF GROSS DOMESTIC PRODUCT . .	49
E. THE SSI PROGRAM'S SHARE OF SSA'S ADMINISTRATIVE COSTS AND BENEFICIARY SERVICES COSTS	51
V. APPENDICES	52
A. HISTORY OF PROVISIONS	52
1. Basic Eligibility Requirements	52
2. Other Eligibility Provisions	53
a. Citizenship and U.S. Residency	53
b. Other Benefits	55
c. Drug Addiction and Alcoholism (DA&A)	55
d. Institutionalization	56
e. Vocational Rehabilitation and Treatment	57
f. Continuing Disability Reviews and Eligibility Redeterminations	58
g. Deeming of Income and Resources	59
3. Federal Benefit Payments	61
a. Windfall Offset	61
b. Proration of Benefit	61
c. Retrospective Monthly Accounting	61
d. Uncashed Checks	62
e. Rounding of Payment Amounts	62
f. Penalties for False or Misleading Statements or Withholding of Information	62
g. Installment Payments	63
4. Federal Benefit Rates	64
5. Exclusions from Income	65
a. General Exclusions	65
b. Special Exclusions	65
6. Resources	69
a. General Exclusions	69
b. Special Exclusions	70
c. Transfer-of-Resources Penalties	72
7. Presumptive and Emergency Payments and Interim Assistance Reimbursement	72
a. Presumptive Payments	72
b. Emergency Advance Payments	72
c. Interim Assistance Reimbursement	73
8. Medicaid Eligibility	73
9. State Supplementation	75
10. Overpayment Recovery	76
B. INCOME AND RESOURCE EXCLUSIONS	78
1. Earned Income Exclusions	78
2. Unearned Income Exclusions	79

3. Resource Exclusions	80
C. HISTORICAL ALLOWANCE DATA	82
1. Technical Notes on the Disability Research File	82
2. General Considerations	83
D. HISTORICAL REDETERMINATION AND CONTINUING DISABILITY REVIEW DATA	88
1. Redeterminations	88
2. Continuing Disability Reviews	89
E. INCENTIVES FOR WORK AND OPPORTUNITIES FOR REHABILITATION	97
1. Work Incentives	97
a. Numbers of Participants in Work Incentive Programs	97
b. Average Earnings of Participants in Work Incentive Programs	99
2. Vocational Rehabilitation/Ticket to Work Program	100
F. INVOLVEMENT OF SSI RECIPIENTS IN OTHER PROGRAMS	103
G. RESEARCH ON RELATED TOPICS	105
1. Ongoing Research	105
a. SSI Policy Simulations	105
b. National Survey of SSI Children and Families	105
c. Analytic Studies	106
d. Evaluation of the Ticket to Work Program	107
e. Homeless Outreach Projects and Evaluation (HOPE)	108
f. Youth Transition Demonstration (YTD)	108
g. Disability Program Navigators (DPNs)	109
2. Bibliography of Recent Publications	109
H. GLOSSARY	125

ADDITIONAL STATEMENT BY THE SOCIAL SECURITY ADVISORY BOARD

TABLES

III.H1	SSI State Supplementation and Coordination with Other Programs	25
IV.A1	Historical and Projected Social Security Area Population based on the Intermediate Assumptions of the 2008 OASDI Trustees Report, as of July 1, 1974-2032.	27
IV.A2	SSI Federal Benefit Rate Increases and Levels: Historical and Projected on the Basis of the Intermediate Assumptions of the 2008 OASDI Trustees Report, 1974-2032.	28
IV.B1	SSI Federally-Administered Applications, Calendar Years 1974-2032	31
IV.B2	SSI Federally-Administered New Recipients, Calendar Years 1974-2032.	33
IV.B3	SSI Federally-Administered Terminations Due to Death, Calendar Years 1974-2032.	35
IV.B4	SSI Federally-Administered Terminations Due to Reasons Other Than Death, Calendar Years 1974-2032	36
IV.B5	SSI Federally-Administered Terminations for All Reasons, Calendar Years 1974-2032	37
IV.B6	SSI Recipients with Federal Benefits in Current-Payment Status as of December, 1974-2032	38
IV.B7	SSI Recipients with Federal Benefits in Current-Payment Status as a Percentage of Selected Social Security Area Population Totals, as of December, 1974-2032	40
IV.B8	SSI Recipients with Federally-Administered State Supplementary Benefits Only, in Current-Payment Status as of December, 1974-2032	42
IV.B9	SSI Recipients with Federally-Administered Benefits in Current-Payment Status as of December, 1974-2032.	43
IV.C1	SSI Federal Payments in Current Dollars, Calendar Years 1974-2008	44
IV.C2	SSI Federal Payments in Current Dollars, Fiscal Years 1978-2008	45
IV.C3	SSI Federal Payments in Constant 2008 Dollars, Calendar Years 1974-2032	47
IV.C4	SSI Federally-Administered State Supplementary Payments in Current Dollars, Calendar Years 1974-2007	48
IV.D1	SSI Federal Payments as a Percentage of GDP, Calendar Years 1974-2032.	50
IV.E1	Selected SSI Costs, Fiscal Years 1978-2008.	51
V.A1	Federal Benefit Rates Set by Legislation	64
V.C1	Disabled Adult Claims: Disposition of Applications for SSI Disability Benefits by Year of Filing and Level of Decision	84
V.C2	Disabled Child Claims: Disposition of Applications for SSI Disability Benefits by Year of Filing and Level of Decision	86
V.D1	SSI Redeterminations Completed, Fiscal Years 1986-2007	88
V.D2	SSI Disabled Adult Reviews: Disposition of Continuing Disability Medical Reviews by Fiscal Year of Initial Decision and Level of Decision	91
V.D3	SSI Disabled Child Reviews: Disposition of Continuing Disability Medical Reviews by Fiscal Year of Initial Decision and Level of Decision	94

V.E1	SSI Federally-Administered Blind or Disabled Working Recipients as of December, 1987-2007	98
V.E2	SSI Federally-Administered Blind or Disabled Individuals with SSI Recipient Status Participating in Other Work Incentives as of December, 1990-2007	99
V.E3	Average Monthly Earnings of SSI Federally-Administered Blind or Disabled Working Recipients, as of December, 1987-2007	99
V.E4	Vocational Rehabilitation Reimbursement Claims Allowed, Fiscal Years 1987-2007	102
V.F1	Percentage of SSI Federally-Administered Recipients in Current-Payment Status with Participation in Selected Programs Based on SSA Administrative Records, December, 2007.....	103

FIGURES

IV.B1	SSI Federally-Administered Applications by Age Group, Calendar Years 1975-2035	32
IV.B2	SSI Federally-Administered New Recipients by Age Group, Calendar Years 1975-2035	34
IV.B3	SSI Federally-Administered Terminations by Age Group, Calendar Years 1975-2035	38
IV.B4	SSI Recipients with Federal Benefits in Current-Payment Status, by Age Group, as of December, 1975-2035	39
IV.B5	SSI Recipients with Federal Benefits in Current-Payment Status as a Percentage of Selected Social Security Area Population Age Groups, as of December, 1975-2035	41
IV.C1	SSI Federal Payments, by Age Group, in Constant 2008 Dollars, Calendar Years 1975-2035	46
IV.D1	SSI Federal Payments, by Age Group, as a Percentage of GDP, Calendar Years 1975-2035 . .	49
V.E1	SSI Federally-Administered Blind or Disabled Working Recipients as of December, 1987-2007	98

I. INTRODUCTION

The Supplemental Security Income (SSI) program was established by Congress in 1972, with payments beginning in January 1974. It is administered by the Social Security Administration (SSA). SSI replaced the former Federal-State programs of Old-Age Assistance (OAA), Aid to the Blind (AB), and Aid to the Permanently and Totally Disabled (APTD) in the 50 States and the District of Columbia. Residents of the Northern Mariana Islands became eligible for SSI in January 1978.

Under the SSI program, each eligible person living in his/her own household and having no other countable income is provided in 2008 a monthly Federal cash payment of \$637 (\$956 for a couple if both members are eligible). Since 1975, these Federal SSI benefit rates have been increased by applying the same cost-of-living adjustment that has been applied to benefits under the Old-Age, Survivors, and Disability Insurance (OASDI) program. In addition to setting a Federal benefit standard, the legislation establishing SSI also permitted individual States to supplement the Federal payment with an additional monthly amount. As described in section III, these State supplementary payments can be either voluntary at the option of the individual States or, in certain cases, mandatory under requirements in effect when the SSI program began.

Under section 231 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, the Commissioner of Social Security is required to submit a report on the SSI program to the President and Congress no later than May 30 of each year. This is the twelfth annual report on the SSI program. The legislative mandate requires that the report include:

- A comprehensive description of the SSI program;
- Historical and current data relating to (1) claims intake and dispositions at all levels of decision making; (2) demographic information about recipients, including program cost and prior enrollment in other public benefit programs; (3) redeterminations, continuing disability reviews, and utilization of work incentives; (4) administrative costs; and (5) State supplementation program operations;
- 25-year projections of future participation rates and program costs;
- A historical summary of statutory changes to title XVI of the Social Security Act; and
- Summaries of any relevant research on the SSI program by SSA or others.

In addition, the legislation specified that the report may include views of the SSI program by the Social Security Advisory Board.

Much of the required information is the subject of extensive ongoing research. In responding to each of the specific requests for information, every effort has been made to provide the best information available at this time. SSA will continue to make improvements upon such information, in order to provide the President and Congress with the input necessary to effectively manage this important part of our society's social safety net.

II. HIGHLIGHTS

The Supplemental Security Income (SSI) program is a nationwide Federal assistance program administered by the Social Security Administration (SSA) that guarantees a minimum level of income for needy aged, blind, or disabled individuals. This section presents highlights of recent SSI program experience, a summary of important changes to the program in the last year, a discussion of current issues facing the SSI program, and a summary of the key results from the 25-year projections.

A. RECENT PROGRAM EXPERIENCE

SSI program experience during the past year included the following:

- During calendar year 2007, 1.9 million individuals applied for SSI benefits based on blindness or disability, an increase of 1 percent over 2006. An additional 143 thousand applied for SSI benefits based on age, a decrease of 5 percent from 2006. In 2007, 844 thousand applicants were awarded SSI benefits, a decrease of less than 1 percent as compared to the 849 thousand awarded benefits in 2006.
- On average during calendar year 2007, 7.0 million individuals received Federal SSI benefits on a monthly basis. This group was composed of 1.1 million aged recipients, 5.9 million disabled recipients, and 68 thousand blind recipients. Of the 5.9 million blind or disabled recipients, 0.8 million were aged 65 or older. During the year, 7.9 million aged, blind, or disabled individuals received at least 1 month's Federal SSI benefit.
- Federal expenditures for payments under the SSI program in calendar year 2007 totaled \$39.5 billion, up from \$37.8 billion in 2006.
- On average during calendar year 2007, 2.3 million individuals received Federally-administered State supplementary payments on a monthly basis. This group was composed of 0.6 million aged recipients, 1.7 million disabled recipients, and fewer than 50 thousand blind recipients. During calendar year 2007, 2.5 million individuals received at least 1 month's Federally-administered State supplementary payment.
- State expenditures for Federally-administered supplements, excluding fees for Federal administration, totaled \$4.3 billion in calendar year 2007, up from \$4.2 billion in 2006.
- The percentage of SSI recipients participating in direct deposit reached 58 percent in fiscal year 2007. SSI recipient participation in direct deposit has increased gradually in recent years after experiencing a period of sharp growth when it more than doubled from 24 percent in 1995 to 49 percent in 2000.
- The cost of administering the SSI program in fiscal year 2007 was \$2.9 billion, which was roughly 8 percent¹ of total Federally-administered SSI expenditures.
- In January 2008, 7.4 million individuals received Federally-administered monthly SSI benefits averaging \$476. Of these, 7.1 million received monthly Federal SSI payments averaging \$445, and 2.3 million received monthly State supplementation payments averaging \$156.

¹ This percentage is artificially high because fiscal year 2007 expenditures included only 11 months of payments, since the payment due on October 1 of the fiscal year was paid in fiscal year 2006. If 2007 expenditures had included the usual 12 months of payments, administrative expenses would have been an estimated 7 percent of payments.

B. SSI LEGISLATION SINCE THE 2007 ANNUAL REPORT

Since the 2007 SSI Annual Report was transmitted to the President and Congress on May 30, 2007, the following legislative changes were made to the SSI program:

Public Law 110-161, enacted December 26, 2007

Provides certain Iraqi and Afghan aliens with special immigrant status, as described in section 101(a)(27) of the Immigration and Nationality Act. As special immigrants, these Iraqi and Afghan aliens are eligible for resettlement assistance, entitlement programs, and other benefits available to refugees admitted under section 207 of such Act (admission of refugees in emergency situations) for a period not to exceed 6 months.

Public Law 110-181, enacted January 28, 2008

Provides certain Iraqi aliens who have provided service to the United States with special immigrant status, as described in section 101(a)(27) of the Immigration and Nationality Act. As special immigrants, these Iraqis are eligible for resettlement assistance, entitlement programs, and other benefits available to refugees admitted under section 207 of such Act (admission of refugees in emergency situations) for a period not to exceed 8 months.

Public Law 110-185, enacted February 13, 2008

Provides that a credit or refund (rebate) under section 6428 of the Internal Revenue Code, as amended by the Economic Stimulus Act of 2008, will not be taken into account as income for purposes of SSI, nor considered as a resource during the month of receipt or the following 2 months.

C. CURRENT ISSUES FACING THE SSI PROGRAM

During the past year, the SSI program has continued to ensure that the neediest of aged, blind, and disabled Americans are provided with a minimum-level income for food, clothing and shelter. In administering the program, SSA has continued to respond to those in need—in the field offices, on our 1-800 phone number, and in the communities—in order to verify that low-income Americans have access to this vital assistance of “last resort.” In January 2008, for example, SSA verified eligibility and certified payment of more than \$3.7 billion to 7.4 million Federally-administered SSI recipients.

At the same time, however, the Agency’s ability to manage the labor-intensive SSI program has been threatened by years of funding shortages. Since FY 2001, SSA’s annual appropriation has averaged about \$150 million less each year than the President’s request. In addition, SSA’s staffing levels are at their lowest since 1972—before the SSI program even began.¹ This severe funding shortage and the resulting decrease in field office personnel may soon threaten SSA’s ability to administer the program.

Delayed Use of Program Integrity Tools

Resource shortages have required the Agency to make difficult choices as to what work gets done and what work remains undone. Stewardship-related workloads, such as nondisability redeterminations (periodic reviews that verify a recipient’s living arrangement, income, and resources) and continuing disability reviews (or CDRs—reviews that verify a recipient is still disabled according to Agency rules), have been

¹ FY 2008 staffing is nearly 28,000 full-time equivalents (FTEs) below SSA’s historic high of 87,277 in 1978.

steadily cut back in order to maintain frontline services, such as processing initial claims and reissuance of Social Security cards.

For example, during the period FY 2004 through FY 2007, SSI nondisability redeterminations processed by the Agency have dropped by over 50 percent—from 2.3 million in FY 2004 to 1.0 million in FY 2007. Historically, SSA has cited an estimated savings of \$7 in program benefits for every \$1 spent conducting additional redeterminations above our base workload volume. Thus, this drop in the number of redeterminations suggests the potential loss of over \$3 billion in program dollars (which are general revenue funds).¹ For the FY 2009 President's budget, actuarial estimates reflect a program savings of approximately \$10 for every \$1 spent conducting additional redeterminations above our base workload volume. The revised return on investment ratio provides an even greater rationale for conducting these important reviews.

During this same period, the total number of CDRs² processed by the Agency has also dropped by more than 50 percent—from a high of 1.6 million in FY 2004 to less than 800 thousand in FY 2007. To some extent the effects of the reduced number of CDRs conducted has been ameliorated by better targeting of disabled beneficiaries whose medical condition may have improved, but improved processes can only partially mitigate the effects of reduced funding. SSA has historically saved an estimated \$10 in lifetime program benefits for every \$1 spent conducting CDRs; thus this reduction in CDR processing has potentially cost the taxpayer significant amounts of SSI program dollars.

Reduced Payment Accuracy

Payment accuracy, as measured by internal quality reviews, is perhaps SSA's most comprehensive measure of program performance. The SSI program's accuracy rate has traditionally been relatively high compared to other Federal and State means-tested programs, benefiting from SSA's organizational culture of getting the right benefit to the right person at the right time. In 2007, for example, Office of Management and Budget (OMB) analysis found SSI's improper payment rate to be less than half as much as exists in the Medicare fee-for-service, Earned Income Tax Credits (EITC), or Medicaid fee-for-service programs.³

However, SSI payment accuracy is also beginning to reflect the strain of years of underfunding. Improper SSI overpayments are climbing in response to a five-year decline of stewardship-related activities. In FY 2006, the most recent year for which SSA has complete statistics, SSI payment accuracy (measured as percentage free from overpayments) has dropped from 93.6 percent (in FY 2005) to 92.1 percent—a statistically significant change.¹ Within the five prior fiscal years, the accuracy rate had never been below 93 percent.

Decline in Collection Arrangements to Recover Debt

Just as the decreased stewardship focus has increased SSI overpayments, efforts to maintain frontline service have also eroded SSA's ability to collect this debt. In spite of advancements in systems and methods used to collect overpayments (such as cross-program recovery of SSI debt from Social Security payments, reporting to credit bureaus, and Federal tax refund offsets), lessened funding of SSI's debt collection activity has led to decreased percentages of debt in payment arrangements. Over the past five fiscal years (FY 2003–FY 2007) the percentage of SSI debt SSA is actively recovering has dropped from a high of 55 percent in FY 2003 to a low of 52 percent in FY 2007.¹

¹ FY 2003 – FY 2007 performance data on CDRs, redeterminations, payment accuracy, and debt collection is from SSA's *Performance and Accountability Report*, November 2006 and November 2007.

² The number of these CDRs involving SSI benefits dropped by more than 60 percent from FY 2004 to FY 2007.

³ Office of Management and Budget report, *Improving the Accuracy and Integrity of Federal Payments*, January 31, 2008. Medicaid fee-for-service improper payments were rated at 23.5 percent of total payments. For EITC, the error rate was 30.6 percent, and for Medicare fee-for-service, 19.6 percent. OMB rated SSI improper payments at 7.4 percent of total payments.

Ongoing Challenges

As disturbing as these administrative trends appear, they are only one element of a funding and demographic challenge that faces SSA as a whole. A growing beneficiary base, combined with limited funding and the smallest Agency workforce in more than 30 years, have stretched SSA's resources to their limits. Over the next two decades, nearly 80 million Americans will become eligible for Social Security benefits—more than 10,000 per day. Adding to this challenge, SSA has already absorbed substantial non-core workloads resulting from the *Medicare Modernization Act*, and will possibly be tasked with significant new work under various immigration proposals pending with the Congress. Against this backdrop, SSA is also struggling to reduce the huge disability hearing backlog that has resulted from years of underfunding.

These problems will require creative solutions, and SSA is committed to working with the Congress and the Executive Branch in order to find them. SSA initiatives to manage larger workloads with fewer resources include:

- **Expanded telephone service** – Over the past decade, SSA has expanded automated services to efficiently serve the public. These upgrades have allowed nearly 17 million calls per year to be addressed solely through automation, freeing live telephone agents to address more complex questions.
- **Increased Internet capability** – SSA continues to expand and simplify online services, allowing beneficiaries to conduct more business from our SocialSecurity.gov website. During FY 2007, SSA received nearly 2.9 million transactions via the Internet. This increased access pattern has continued into the present year, with the first quarter of FY 2008 showing a 23 percent growth in Internet transactions as compared to the first quarter of FY 2007.
- **Improved automation of workloads** – SSA software enhancements have continued to reduce the percentage of claims and post-entitlement work that must be manually processed. For example, processing of SSI redeterminations and CDRs has become less labor intensive with the development of specific programs that generate required forms, track workloads, and automate systems inputs.

However, while productivity improvements are a part of the solution, there are limitations to gains that can be realized through automation. The simple truth is that SSA requires a certain level of resources to operate effectively. Because of SSA's large infrastructure (including over 1,400 field and hearings offices in cities and towns across America), mandatory cost increases such as rent, guards, postage, pay raises, and employee benefits require a minimum administrative budget increase every year of at least \$400 million—far greater than what the Agency has received in recent years.

Conclusion

The SSI program has served as a vital safety net to millions of Americans for over 30 years, and the need for such last-resort assistance is unlikely to change in the coming decades. Because of the sheer amount of program outlays from general revenues, SSA considers proper oversight of this means-tested benefit to be critical. However, we are already seeing signs of how this stewardship can deteriorate in an environment where insufficient resources force the Agency to choose between payment timeliness and accuracy.

SSA remains dedicated to the most efficient and effective SSI administration possible. However, it must be acknowledged that, as a nation, we need to make difficult decisions as to our priorities. Given the proper resources, SSA can continue to maintain the high level of SSI payment accuracy that legislators and the public expect from us. But without this investment, administration of the SSI program will likely suffer from the ongoing imbalance between Agency resources and workload demands.

D. KEY RESULTS FROM THE 25-YEAR PROJECTIONS

The major findings in the 25-year projections prepared for this report are summarized below:

- Following small declines in the SSI recipient population in the late 1990s due to the combined impact of Public Law 104-121 and Public Law 104-193, modest growth in the SSI rolls resumed in 2000, and is expected to continue throughout the projection period largely due to the growth in the U.S. population. By 2032, the Federal SSI recipient population is estimated to reach 9.5 million. Expressed as a percentage of the total U.S. population, the number of Federal SSI recipients is projected to increase slightly from 2.28 percent of the population in 2007 to 2.53 percent by 2032 due largely to the changing age distribution of the population.
- Federal expenditures for SSI payments in calendar year 2008 are estimated to increase by \$2.3 billion to \$41.8 billion, an increase of 5.7 percent from 2007 levels. In constant 2008 dollars, SSI program outlays are projected to increase to \$55.4 billion in 2032, a real increase of 1.2 percent per year.
- When compared to the Gross Domestic Product (GDP), Federal SSI expenditures are projected to decline over time, from the current level of 0.29 percent of GDP in 2007 to 0.25 percent of GDP by 2032.

III. THE SUPPLEMENTAL SECURITY INCOME PROGRAM

This section presents a brief history and comprehensive description of the SSI program. This section also includes information on the administration of the program and coordination with other programs.

A. BACKGROUND

Federal entitlement programs for the aged, blind, or disabled have their roots in the original Social Security Act of 1935. That Act established an old-age social insurance program to be administered by the Federal Government and an old-age means-tested assistance program to be administered by the States. Similar programs for the blind or disabled were added to the Act in later years. Means-tested assistance provided a safety net for individuals who were either ineligible for Social Security or whose benefits could not provide a basic level of income.

This means-tested assistance comprised three separate programs—Old-Age Assistance (OAA), Aid to the Blind (AB), and Aid to the Permanently and Totally Disabled (APTD). Despite substantial Federal financing, these programs were essentially State programs. Federal law established only broad guidelines for assistance. The Federal Government provided matching funds to support whatever payment levels the States established, with no maximum or minimum standards. Consequently, each State was responsible for setting its own standards for determining who would get assistance and how much they would receive.

Beginning in the early 1960s, this State-operated, Federally-assisted welfare system drew criticism that was directed at the “crazy quilt” eligibility requirements and payment levels. Other criticism centered on specific requirements, such as lien laws and provisions that required certain relatives to bear responsibility for the maintenance of needy family members.

Responding to these concerns, Congress passed and the President approved the SSI program in 1972, reversing the Federal and State roles with regard to adult assistance. Under the new arrangement, SSI would provide a uniform Federal income floor while optional State programs supplemented that floor. The new program was historic in that it shifted from the States to the Federal Government the responsibility for determining who would receive assistance and how much assistance they would receive.

B. THE BASIC PLAN

The main objective of the SSI program is to provide the basic financial support of needy aged, blind, or disabled individuals. Congress designed the SSI program based on the following principles:

- Eligibility requirements and benefit standards that are nationally uniform and eligibility determinations based on objective criteria;
- An assistance source of last resort for the aged, blind, or disabled whose income and resources are below specified levels;
- Incentives and opportunities for those recipients able to work or to be rehabilitated that would enable them to reduce their dependency on public assistance;
- An efficient and economical method of providing assistance;
- Inducements to encourage States to provide supplementation of the basic Federal benefit and protection for former recipients of State adult assistance programs who were converted to the SSI program; and

- Appropriate coordination of the SSI program with the food stamp, medical assistance, and other programs.¹

C. UNIFORM STANDARDS AND OBJECTIVE CRITERIA

Prior to the SSI program, the eligibility of aged, blind, or disabled individuals for Federally-funded adult assistance depended on the State in which they lived. Benefit amounts varied from State to State. The SSI program replaced the State-run programs with a national program with uniform standards and objective eligibility criteria. These standards include:

- A uniform limitation on the dollar amount or value of income and resources that an individual can have and still qualify for SSI assistance. The countable income limits for individuals and couples are equal to their respective Federal benefit rates² and hence are increased annually according to changes in the cost of living. Effective January 1, 2008, the Federal benefit rate is \$637 a month for individuals and \$956 a month for couples. The resource limit is \$2,000 in countable resources for individuals and \$3,000 for couples.
- A uniform standard of 65 as the minimum age requirement for assistance based on age.
- A uniform definition of disability and blindness. The definitions for individuals age 18 or older are the same as those used for the Social Security Disability Insurance (SSDI) program. In order to be considered disabled, an individual must have a medically determinable physical or mental impairment which is expected to last or has lasted at least 12 continuous months or is expected to result in death and (1) if age 18 or older, prevents him/her from doing any substantial gainful activity³ or (2) if under age 18, results in marked and severe functional limitations. However, individuals for whom addiction to drugs or alcoholism is a contributing factor material to the determination of their disabilities are not eligible for benefits. In order to be considered blind, an individual must have central visual acuity of 20/200 or less in the better eye with the use of a correcting lens or have tunnel vision of 20 degrees or less.
- Uniform standards for citizenship and residency. In order to be eligible for SSI, an individual must be a citizen (or national) of the United States, an American Indian born in Canada who is under section 289 of the Immigration and Nationality Act (INA), an American Indian born outside the United States who is a member of a Federally recognized Indian tribe under section 4(e) of the Indian Self-Determination and Education Assistance Act, a noncitizen who was receiving SSI benefits on August 22, 1996, or be a qualified alien in one of the following categories:
 - Certain noncitizens who are blind or disabled and were lawfully residing in the United States on August 22, 1996;
 - Refugees (eligibility generally limited to the 7-year period after their arrival in the United States);
 - Asylees (eligibility generally limited to the 7-year period after the date they are granted asylum);

¹ For example, as explained in section III.H, SSI recipients in most States are also automatically eligible for Medicaid, which generally provides for their medical needs.

² See table IV.A2 for historical and estimated future Federal benefit rates.

³ “Substantial gainful activity” (SGA) is used to describe a level of work activity that is both substantial—i.e., involves the performance of significant physical and/or mental duties which are productive—and gainful—i.e., performed for remuneration or profit. SGA rules do not apply to the SSI blind. Generally earnings from work activity of over \$940 a month is evidence of ability to engage in SGA. If an SSI *applicant* is earning over \$940 a month, he/she generally would not be considered disabled. However, if an SSI *recipient* is earning over \$940 a month, he/she could continue to be eligible for SSI. (See “Incentives for Work and Opportunities for Rehabilitation” section III.E.) The SGA level of \$940 was increased from \$900 effective January 1, 2008 (72 FR 60708). Yearly increases in the SGA level are based on increases in the national average wage index.

- Noncitizens who have had their deportations withheld under section 243(h) of the INA as in effect prior to April 1, 1997, or who have had their removals withheld under section 241(b)(3) of the INA (eligibility generally limited to the 7-year period after the date that deportation or removal is withheld);
- Cuban and Haitian entrants as defined by Federal statute, including: 1) section 501(e) of the Refugee Education Assistance Act of 1980; 2) former parolees and other aliens who became residents under the Cuban Adjustment Act of 1966; 3) aliens who became permanent residents under the Nicaraguan and Central American Relief Act; and 4) aliens who became permanent residents under the Haitian Refugee Immigration Fairness Act (eligibility for these categories is generally limited to the 7-year period after the date that entrant status is granted);
- Amerasian immigrants admitted pursuant to section 584 of the Foreign Operations, Export Financing, and Related Programs Appropriations Act, 1988, and subsequent amendments (eligibility generally limited to the 7-year period after their arrival in the United States);
- Noncitizen active duty Armed Forces personnel, honorably discharged veterans, and their spouses and dependent children; or
- Lawful permanent residents who have earned, or can be credited (from their spouses or parents) with, 40 qualifying quarters of earnings.

Qualified alien status includes noncitizens (or their parents or children) who have been battered or subjected to extreme cruelty in the United States by a spouse or parent (or a member of the spouse's or parent's family) with whom they live, and who have an approved petition, or have a petition pending, setting forth a *prima facie* case for adjustment of their immigration status. A complete list of noncitizens who are considered qualified aliens can be found in the Glossary under "Qualified Alien". However, to be eligible to receive SSI benefits, these noncitizens also must be in one of the categories listed above.

In addition, certain noncitizens may be eligible for SSI regardless of their immigration status if they have been determined to be victims of trafficking in persons in the United States¹. Such individuals are treated for SSI purposes as refugees. That is, they are eligible for SSI for 7 years after a determination is made that they are trafficking victims.

Finally, certain Iraqi or Afghan noncitizens granted special immigrant status under emergency conditions are also treated as refugees for SSI purposes. Unlike trafficking victims, however, Iraqi and Afghan noncitizen eligibility is time-limited to 6 months (or 8 months for certain Iraqis providing assistance to the U.S. Government).

In addition to having to be a U.S. citizen (or national) or in one of the potentially eligible noncitizen categories, an individual must reside in the 50 States, the District of Columbia or the Northern Mariana Islands. An individual also must be physically present in the United States² for 30 consecutive days, if he/she had been outside of the United States for 30 or more consecutive days. There are two exceptions to the residency and physical presence requirements:

¹ Generally defined as the recruitment, harboring, transportation, provision, or obtaining of a person for labor or services through the use of force, fraud, or coercion for the purpose of subjection to involuntary servitude, peonage, debt bondage, or slavery.

² Fifty States, the District of Columbia or the Northern Mariana Islands.

- Blind or disabled children who are citizens of the United States may continue to be eligible for payments if they are living outside the United States with a parent who is on duty as a member of the U.S. Armed Forces. This exception also applies to blind and disabled children of military personnel who are born overseas, become blind or disabled overseas or applied for SSI benefits while overseas.
- Students studying abroad for not more than 1 year also may continue to be eligible for payments if the studies are sponsored by a U.S. educational institution but could not be conducted in the United States.

D. ASSISTANCE OF LAST RESORT

As a means-tested program, SSI takes into account all income and resources that an individual has or can access. The amount of an individual's countable income and resources are the measure of his/her need for assistance.

1. Income

The amount of an individual's income is used to determine both eligibility for, and the amount of, his/her SSI benefit. As countable income increases, an individual's SSI benefit amount decreases. Generally, ineligibility for SSI occurs when countable income equals the Federal benefit rate plus the amount of applicable Federally-administered State supplementary payment (State supplementation is discussed later).

The monthly Federal benefit rate¹ is reduced dollar-for-dollar by the amount of the individual's "countable" income—i.e., income less all applicable exclusions. Countable income is determined on a calendar month basis. The result of this computation determines SSI eligibility and the amount of the benefit payable. These benefit rates are adjusted annually (in January) to reflect changes in the cost of living.

When an individual lives in the household of another and receives support and maintenance in kind (i.e., generally room and board) from the householder, the Federal SSI benefit rate is reduced by one-third in lieu of counting the actual value of the support and maintenance as unearned income. The value of food or shelter-related items the individual receives in kind from persons other than the householder (including in-kind assistance from outside the household in which he/she lives) is counted as unearned income.² However, the amount that is countable is limited to an amount equal to one-third of the applicable Federal benefit rate plus \$20.

SSI law defines two kinds of income—earned and unearned. Earned income is wages, net earnings from self-employment, remuneration for work in a sheltered workshop, royalties on published work, and honoraria for services. All other income is unearned including, for example, Social Security benefits, other pensions, and unemployment compensation. The distinction between earned and unearned income is significant because different exclusions apply to each type of income.

However, not everything an individual receives is considered to be income. Generally, if the item received is not food or shelter or cannot be used to obtain food or shelter, it will not be considered as income. For example, if someone pays an individual's medical bills, or offers free medical care, or if the individual receives money from a social services agency that is a repayment of an amount he/she previously spent, that value is not considered income to the individual. In addition, some items that are considered to be income are excluded when determining the amount of an individual's benefit.

¹ See table IV.A2 for historical and estimated future Federal benefit rates.

² SSA simplified the SSI program (70 FR 6340) by generally eliminating clothing from the definition of income and from the definition of in-kind support and maintenance effective February 7, 2005.

Income Exclusions¹

The principal *earned* income exclusions are:

- The first \$65 per month plus one-half of the remainder;
- Impairment-related work expenses of the disabled and work expenses of the blind;
- Income set aside or being used to pursue a plan to achieve self-support (PASS) by a disabled or blind individual; and
- Infrequent or irregularly received income (the first \$30 received in a quarter).

The principal *unearned* income exclusions are:

- The first \$20 per month;²
- Income set aside or being used to pursue a PASS by a disabled or blind individual;
- State or locally funded assistance based on need;
- Rent subsidies under the Department of Housing and Urban Development (HUD) programs;
- The value of food stamps; and
- Infrequent or irregularly received income (the first \$60 received in a quarter).

2. Resources

The value of an individual's resources is used to determine whether he/she is eligible for SSI in any given month. SSI law states that eligibility is restricted to individuals who have countable resources, determined monthly, that do not exceed \$2,000 (\$3,000 for a couple). The law does not define what resources are, but does stipulate what items are not considered resources.

Regulations stipulate that a resource is cash or other liquid asset or any real or personal property that individuals (or their spouses) own and could convert to cash to be used for their support and maintenance. This definition is consistent with the general philosophy of the SSI program that only items that can be used for an individual's food or shelter should be used in determining his/her eligibility and benefit amount. Not all resources an individual owns are counted. The value of an item may be totally excluded or counted only to the extent that its value exceeds specified limits.

If an individual disposes of resources at less than fair market value within the 36-month period prior to his/her application for SSI or at any time thereafter, he/she may be penalized. The penalty is a loss of benefits for a number of months (up to a 36-month maximum) obtained by dividing the uncompensated value of disposed-of-resources by the Federal benefit rate plus the maximum State supplementary payment, if any, applicable to the individual's living arrangement. The penalty does not apply if, among other things, the individual can show that the resources were disposed of exclusively for a purpose other than establishing SSI eligibility.

¹ A complete list of the SSI income exclusions can be found in section V.B.

² Any portion of this \$20 amount not used to exclude unearned income may be used to exclude earned income.

Resource Exclusions¹

The principal resource exclusions are:

- The home and land appertaining to it, regardless of value;
- Life insurance policies whose total face value does not exceed \$1,500;
- Burial funds not in excess of \$1,500 each for an individual and spouse (plus accrued interest);
- Household goods, if needed for maintenance, use and occupancy of the home, and personal effects;²
- An automobile, if used to provide necessary transportation;³
- Property essential to self-support;
- Resources set aside to fulfill a PASS; and
- Amounts deposited into either a Temporary Assistance for Needy Families (TANF) or “Assets for Independence Act” individual development account (IDA), including matching funds, and interest earned on such amounts.

3. Filing for Other Benefits

As the “program of last resort,” SSI benefits are provided to eligible individuals only to the extent that their needs are not met by other sources. That is, after evaluating all other income and resources, SSI pays what is necessary to bring an individual to the statutorily prescribed income “floor.” In keeping with this principle, SSI law requires that SSI applicants and recipients file for other payments for which they may be eligible, such as annuities, pensions, retirement or disability benefits, workers’ compensation, and unemployment insurance benefits.

SSA must provide an individual with written notice of potential eligibility for other benefits and of the requirement to take all appropriate steps to pursue these benefits. The individual has 30 days from receipt of the notice to file for the benefits involved.

4. Eligibility Issues for Residents of Public Institutions or Medical Facilities

State and local governments—rather than the Federal Government—traditionally have taken the financial responsibility for residents of their public institutions. The SSI program continues this long-standing public assistance policy. People who are residents of public institutions for a full calendar month are generally ineligible for SSI unless one of the following exceptions applies:

- The public institution is a medical treatment facility and Medicaid pays more than 50 percent of the cost of care, or in the case of a child under age 18, Medicaid and/or private health insurance pays more than 50 percent of the cost of care—in these situations, the SSI payment is limited to \$30;

¹ A complete and more detailed list of the SSI resource exclusions can be found in section V.B.

² The \$2,000 value limit on household goods and personal effects was removed effective February 7, 2005 (70 FR 6340).

³ SSA also changed the evaluation of automobiles as an excludable resource, effective February 7, 2005 (70 FR 6340). Under the old rules, one automobile could be excluded (regardless of value) if necessary for employment, medical treatment or essential daily activities. If not excludable under this criteria, one automobile could be excluded to the extent its current market value did not exceed \$4,500. The revised exclusion, applicable to any one automobile used for transportation, simplifies the evaluation of this resource.

- The public institution is a publicly operated community residence which serves no more than 16 residents;
- The public institution is an emergency shelter for the homeless (payments are limited to no more than 6 months in any 9-month period);
- The recipient was eligible under section 1619(a) or (b)¹ for the month preceding the first full month in the public institution and is permitted by the institution to retain any benefits (payable for up to 2 months); or
- A physician certifies that the recipient's stay in a medical facility is likely not to exceed 3 months and continued SSI eligibility is needed to maintain and provide for the expenses of the home to which the individual will return. In these situations, the recipient may continue to receive the full benefit for any of the first 3 full months of medical confinement if all other conditions for payment are met.

5. Personal Needs Allowance

When individuals enter medical treatment facilities in which more than half of the bill is paid by the Medicaid program, their monthly Federal payment standard is generally reduced to \$30, beginning with the first full calendar month they are in the facility. In the case of an individual under age 18, the \$30 payment standard is also applicable if more than half of the bill is paid by private insurance or a combination of Medicaid and private insurance. The theory behind this provision is that the individual's basic needs are being met by the medical facility. In these cases, the SSI program provides up to \$30 a month, which is intended to take care of small comfort items not provided by the institution.

6. Deeming

In certain situations the income and resources of others are counted in determining whether an individual's income and resources fall below the levels established by law. This process is called "deeming" and is applied in cases where an eligible individual lives with an ineligible spouse, an eligible child lives with an ineligible parent, or an eligible noncitizen has a sponsor.² In concept, the practice takes into account the responsibility of the spouse, parent, or sponsor to provide for the basic needs of the eligible individual.

a. Spouse-to-Spouse Deeming

When an eligible individual lives in the same household with a spouse who is not eligible for SSI, the ineligible spouse's income and resources are deemed to be available to the eligible individual. In determining the amount of income and resources available to the eligible individual, all applicable exclusions are used. In addition, a living allowance is provided for the ineligible spouse, as well as any ineligible children under age 18³ living in the household. The allowance reduces the amount of income to be deemed. Spouse-to-spouse deeming is intended to result in the same amount of income available to the couple as would be available if both members of the couple were aged, blind, or disabled and eligible for SSI.

Deeming does not apply when the eligible individual is not living in the same household as the ineligible spouse. However, if the ineligible spouse's absence is temporary or is due solely to an active duty assignment as a member of the U.S. Armed Forces, deeming would continue to apply.

¹ See section III.E.6 of this report for a description of the special section 1619 provisions for disabled individuals who work.

² Deeming also applies to an individual who lives with an essential person (a concept carried over from the former State assistance plans). However, there are fewer than 100 of these cases remaining.

³ Under age 22, if a student, effective June 16, 2008 (73 FR 28033). Previously, under age 21, if a student.

b. Parent-to-Child Deeming

A child under age 18 is subject to deeming from an ineligible natural or adoptive parent (and that parent's spouse, if any) living in the same household. Deeming does not apply if a child lives in a household with only the spouse of a parent (i.e., a stepparent) and the natural or adoptive parent has permanently left the household. Certain amounts of the parent's income are excluded, living allowances are provided for the parent(s) and an allocation is set aside for each ineligible child under age 18 who is living in the household. Deeming to a child would continue if the parent is absent from the household but the absence is temporary or is due solely to active duty assignment as a member of the U.S. Armed Forces. If a child lives in a household in which all members are receiving public assistance benefits, that child is not considered to be receiving any support and deeming would not apply.

c. Sponsor-to-Alien Deeming

The income and resources of noncitizens are deemed to include those of their sponsors. The way the income and resources are deemed and the length of the deeming period depend on whether the sponsor signed a legally enforceable affidavit of support¹ or the previous version of the affidavit. Generally, individuals who entered the country before 1998 did so under the old version of the affidavit.²

Under the old version of the affidavit, deeming of the sponsor's income and resources lasts until the noncitizen has been in the United States for 3 years.³ Living allowances equal to the Federal benefit rate are provided for the sponsor, and allowances equal to one-half of the Federal benefit rate are provided for each of the sponsor's dependents. Allowances are also provided for the sponsor and his/her family members in determining deemed resources. These allowances reduce the amount of the sponsor's income and resources deemed to the noncitizen.

For noncitizens admitted into the United States under a legally enforceable affidavit of support, deeming generally applies until the noncitizen becomes a U.S. citizen. Deeming ends before citizenship if the noncitizen has earned, or can be credited with, 40 qualifying quarters of earnings. Children and spouses of workers may be credited with quarters earned by the worker. A quarter otherwise earned after 1996 does not count as one of the required 40 if the noncitizen or worker received Federal means-tested public benefits during the relevant period.

Also for this group of noncitizens, deeming does not apply for specified periods if the noncitizens or their children or parents have been battered or subjected to extreme cruelty while in the United States or if sponsors leave the noncitizens indigent by not providing them with sufficient support.

E. INCENTIVES FOR WORK AND OPPORTUNITIES FOR REHABILITATION

SSI benefits provide a basic level of assistance for individuals who are blind or disabled with limited earnings ability due to their impairments. Nonetheless, for recipients who want to work, the SSI program is designed to encourage and support their work attempts in order to help them achieve greater degrees of independence. The SSI program includes a number of work incentive provisions that enable recipients who are blind or disabled to work and retain benefits or to increase their levels of work activity without the loss of SSI disability status or Medicaid. These incentives provide higher amounts of income or

¹ Legally enforceable affidavits of support are required by Public Law 104-208.

² The Immigration and Naturalization Service now known as the United States Citizenship and Immigration Services (USCIS) began using the new, legally enforceable affidavits on December 19, 1997. However, if a potential immigrant had a visa issued before that date, the sponsor would sign an old version of the affidavit even if the affidavit was signed after December 19, 1997.

³ For a temporary period—January 1994 through September 1996—the deeming period was 5 years.

resource exclusions as recognition of the expenses associated with working or as inducements to seek rehabilitation services and support for work efforts.

The SSI program also includes provisions to help disabled beneficiaries obtain vocational rehabilitation and employment support services. These provisions were revised by legislation establishing the Ticket to Work program, which is described in section III.E.7.

1. Earned Income Exclusion

The first \$65 (\$85 if the individual has no income other than earnings) of any monthly earned income plus one-half of remaining earnings are excluded for SSI benefit computation purposes. This general earned income exclusion is intended to help offset expenses incurred when working. It assures that SSI recipients who are working will be rewarded for their efforts by having greater total income than those who do not work.

2. Impairment-Related Work Expense Exclusion

The costs of certain impairment-related services and items that a disabled (but not blind) individual needs in order to work are excluded from earned income in determining SSI eligibility and benefit amounts.

In calculating these expenses, amounts equal to the costs of certain attendant care services, medical devices, equipment, prostheses, vehicle modifications, residential modifications to accommodate wheelchairs and similar items and services are deductible from earnings. The costs of routine drugs and routine medical services are not deductible unless these drugs and services are necessary to control the disabling condition. They are paid for by the individual, and they are not reimbursable from another source such as Medicaid.

3. Work Expenses of the Blind Exclusion

Any earned income by a blind individual that is used to meet expenses needed to earn that income is excluded from earned income in determining SSI eligibility and benefit amounts. A deductible expense need not be directly related to the worker's blindness; it need only be an ordinary and necessary work expense of the worker.

Some frequently excluded work expenses include transportation to and from work, meals consumed during work hours, job equipment, licenses, income or FICA taxes, and costs of job training.

4. Student Earned Income Exclusion

The student earned income exclusion is an additional exclusion for an individual who is under age 22 and regularly attending school. It is intended to help defray the cost of educational training. Under current regulations, up to \$1,550 of earned income per month but no more than \$6,240 per year may be excluded.¹

5. Plan to Achieve Self-Support

A plan to achieve self-support (PASS) allows a disabled or blind individual to set aside income and resources to get a specific type of job or to start a business. This may involve setting aside funds for education or vocational training. Funds can even be set aside to purchase work-related equipment or pay for

¹ Increased from \$1,510 and \$6,100, respectively, effective January 1, 2008 (72 FR 60705). Under current regulations this exclusion is increased yearly based on changes in the cost of living.

transportation related to the work goal. The income and resources that are set aside are excluded under the SSI income and resources tests.

The individual must have a feasible work goal, a specific savings or spending plan, and must provide for a clearly identifiable accounting for the funds which are set aside. The PASS must be approved by SSA. The individual must then follow the plan and negotiate revisions as needed. SSA monitors the plans once approved by reviewing them periodically to ensure the individual's progress towards attaining the work goal.

6. Special Provisions for Disabled People Who Work

This work incentive generally is referred to by its section number in the Social Security Act, section 1619. Under section 1619(a), disabled individuals who would cease to be eligible because of earnings over the substantial gainful activity level can receive special cash benefits as long as they:

- Continue to have the disabling condition;
- Have income under the amount which would cause ineligibility for any payment under SSI income counting rules; and
- Meet all other nondisability requirements for SSI payment.

In many States, being a recipient of the special benefit permits the individual to be eligible for Medicaid benefits.

Under section 1619(b), "SSI recipient" status for Medicaid eligibility purposes also is provided to individuals:

- Whose earnings preclude any SSI payment but are not sufficient to provide a reasonable equivalent of the SSI, social services, and Medicaid benefits that the individuals would have in the absence of earnings; and
- Whose ability to continue working would be seriously inhibited by the loss of social services and Medicaid benefits.

To qualify for extended Medicaid coverage under section 1619(b) an individual must:

- Have a disabling condition;
- Need Medicaid in order to work;
- Not be able to afford equivalent medical coverage and publicly funded personal or attendant care which would be lost without assistance;
- Meet all nondisability requirements for SSI payment other than earnings; and
- Have received a regular SSI cash payment in a previous month within the current period of eligibility. (In some States, the individual must have qualified for Medicaid the month preceding the first month of 1619 eligibility.)

In determining whether individuals' earnings are not sufficient to provide them with the equivalent benefits they would be eligible for if they stopped working, their earnings are compared to a threshold amount for their State of residence. Section 1619(b) status continues if the earnings are at or below the threshold.

If earnings exceed the State threshold, an individualized assessment of the need for Medicaid is made and 1619(b) status may continue.

7. Vocational Rehabilitation/Ticket to Work Program

Since the beginning of the SSI program, State Vocational Rehabilitation (VR) agencies have provided services to those blind or disabled SSI recipients whom they accepted as clients. SSA has traditionally reimbursed the VR agency for services provided in situations where the services result in the individual's working at the substantial gainful activity level for a continuous period of 9 months, and in certain other limited situations.

The Ticket to Work and Work Incentives Improvement Act of 1999 ("the Ticket legislation") established a Ticket to Work and Self-Sufficiency program ("Ticket to Work program") under which a blind or disabled beneficiary may obtain vocational rehabilitation, employment and other support services from a qualified private or public provider referred to as an "employment network" (EN), or from a State VR agency. In addition, the Ticket legislation provided for a new procedure for compensating ENs under an outcome or outcome-milestone payment system¹. By expanding the pool of providers and giving the providers incentives for achieving success, this program seeks to expand a disabled beneficiary's access to these services in order to assist the beneficiary in finding, entering, and retaining employment and reducing his/her dependence on cash benefits. Regulations issued by the Commissioner became effective January 2002.

After being phased in beginning in 2002, the Ticket to Work program has been in operation nationwide since November 2003. Under this program SSA provides eligible individuals who receive SSI benefits due to blindness or disability with a Ticket to Work document ("ticket"). These individuals may use the ticket to obtain the vocational rehabilitation services, employment services and other support services needed to return to work, or go to work for the first time. The Ticket to Work program provides that as long as the beneficiary is "using a ticket" as defined by the Commissioner, SSA will not initiate a continuing disability review to determine whether the beneficiary has medically improved. Therefore the beneficiary's efforts under the Ticket to Work program to increase self-sufficiency will not be interrupted by a decision that his/her medical condition has improved. Individuals not eligible for a ticket may still request services from a State VR agency, which must decide whether they are eligible for services under the Rehabilitation Act of 1973.

ENs and State VR agencies are the only providers of VR services to disabled SSI recipients that can be compensated for those services by SSA. All ENs are compensated through the outcome-based system. State VR agencies are compensated under the traditional VR reimbursement system for those cases where they have not elected to participate as an EN. Any services provided by the State VR agencies to SSI recipients who are not yet eligible for a ticket will be compensated under the traditional VR reimbursement system.

Individuals receiving SSI benefits who improve medically and, therefore, are no longer considered disabled or blind can continue to receive SSI benefits if they are actively participating in the Ticket to Work program, or another approved program of VR services, employment services, or other support services, and SSA determines that continuation or completion of the program will increase the likelihood that they will be permanently removed from the SSI rolls. SSI benefits and Medicaid generally continue until the approved program is completed or until the individual ceases to participate in the program.

¹ State VR agencies generally have the option on a case-by-case basis of electing to be paid under an EN payment system or under the traditional cost reimbursement payment system.

In 2008, SSA revised the Ticket to Work regulations to enhance beneficiary choice and improve the effectiveness of the program. The revisions extended the program to all adult SSDI and SSI blind or disabled beneficiaries, removed disincentives for Employment Networks to participate in the program, provided incentives for them to support beneficiaries through a more gradual return to work and positioned them to better support ongoing retention of employment.

8. Expedited Reinstatement

A disabled or blind individual whose eligibility for SSI payments ended because of earnings can request expedited reinstatement of his/her SSI benefits without filing a new application. To qualify for expedited reinstatement, the individual must make the request within 60 months after his/her eligibility ended and must have a disabling medical condition that: (1) is the same as (or related to) the disabling medical condition that led to the previous period of eligibility and (2) prevents him/her from performing substantial gainful activity. In determining whether the individual is disabled or blind, the medical improvement review standard is applied. Normal nonmedical requirements for SSI eligibility still apply.

An individual requesting expedited reinstatement may receive up to 6 months of provisional benefits while his/her request is pending. These benefits generally are not considered an overpayment if the request is denied. Provisional benefits may include Medicaid but do not include any State supplementary payments. Provisional benefits also may be received by the individual's spouse at a couple's rate if the spouse was previously eligible for SSI as a spouse.

F. ADMINISTRATION OF THE SSI PROGRAM

The framers of the SSI program chose SSA to administer the SSI program because the basic system for paying monthly benefits to a large number of individuals was already in place in the form of the Social Security program, and SSA had a long-standing reputation for dealing with the public in a fair and humane manner.

1. Application Process

Individuals can apply for SSI benefits at any one of the approximately 1,300 SSA field offices around the country or through SSA teleservice centers. The claims process includes the application interview, the obtaining of necessary evidence and documentation, and the adjudication of the claim. Although many of the eligibility requirements for the Social Security program and the SSI program are different, the application process is very similar. Many times, individuals file for benefits under both programs at the same time.

SSA corroborates information provided by applicants for SSI through independent or collateral sources. Generally, the basic responsibility for obtaining evidence lies with the claimant, although SSA often gives advice and assistance on ways to obtain the needed information. Because of the special circumstances of the SSI population (for example, financial need, old age, or illness), SSA makes special efforts to assist claimants in obtaining the necessary proofs.

With regard to disability and blindness claims, SSA makes determinations of all of the nonmedical eligibility factors whereas each State's Disability Determination Services (DDS) makes determinations of the medical eligibility factors.¹

¹ The applicant can appeal unfavorable determinations of either the nonmedical or medical eligibility factors. The administrative review process consists of several steps, which must be requested within certain time periods.

2. Determination of Eligibility for Benefits

SSI applications have no retroactivity and become effective in the month after the month of filing or the month after all eligibility requirements are met, whichever is later. Eligibility for benefits is determined on a current monthly basis. The amount of the monthly benefit generally is determined using income in the second month preceding the month for and in which the benefit is paid (a method called retrospective monthly accounting). However, at the start of a period of eligibility or re-eligibility, the benefits for the first and second months are both determined using the income received in the first month. (One-time, non-recurring income would only be counted in the month received.)

3. Payment of Benefits

SSI benefits generally are paid on the first day of each month. If the first of the month falls on a weekend or legal public holiday, benefit payments are delivered on the first working day preceding such Saturday, Sunday, or holiday. While SSA strongly encourages all SSI beneficiaries to receive their monthly benefits by direct deposit, benefit payments are also made by check if individuals do not wish to have their benefits sent directly to a financial institution. Monthly benefit payments include both the Federal SSI and State amounts if the recipient lives in a State in which SSA administers the State supplementary payment. (See section III.G.)

4. Ensuring Continued Eligibility for Benefits

SSI recipients are required to have their nonmedical eligibility factors redetermined periodically, generally every 1 to 6 years depending on their specific situation.

In addition to these nonmedical reviews, medical reviews are conducted on disabled or blind recipients in order to determine if they continue to be disabled or blind. For administrative efficiency the medical reviews are done most often on those disabled or blind recipients whose medical conditions are considered likely to improve. Medical reviews are required for disabled or blind recipients, for example, under the following circumstances:

- When earnings of recipients exceed the substantial gainful activity level;¹
- At least once every 3 years for recipients under age 18 whose medical conditions are considered likely to improve;
- Within 12 months after birth for recipients whose low birth weight is a contributing factor material to the determination of their disability, unless the Commissioner determines that the impairment is not expected to improve within 12 months of the child's birth; and
- Within 1 year after attainment of age 18 and using the adult eligibility criteria, for recipients whose eligibility for SSI benefits was established under the disabled child eligibility criteria.

Applicants and recipients are required to report events and changes of circumstances that may affect their SSI eligibility and benefit amounts. Such reports are required, for example, when an individual has a change in the amount of his/her income or resources, changes living arrangements, or leaves the United States. Failure or delay in submitting a required report can result in monetary penalties or ineligibility for SSI benefits.

¹ A medical review cannot be initiated while the SSI recipient is "using a ticket" under the Ticket to Work program.

The basic “failure to report” penalty is \$25 for the first such failure or delay, \$50 for the second such failure or delay, and \$100 for each subsequent failure or delay. However, in cases of fraud or false representation of material facts, SSA’s Inspector General can assess civil monetary penalties in amounts as large as \$5,000. SSA also has the authority to suspend eligibility to SSI benefits for periods of 6, 12, or 24 months.

Additionally, SSA may use an accelerated rate of overpayment recovery to encourage accurate reporting. Overpayments to SSI recipients are generally recovered by withholding from the monthly benefit an amount equal to 10 percent of the individual’s countable monthly income. For many recipients whose only income is SSI, this amounts to 10 percent of their monthly SSI payment. However, if SSA determines that misrepresentation or concealment of material information has occurred, 100 percent of the monthly SSI benefit may be subject to recovery.

5. Representative Payees

When SSI recipients are incapable of managing their benefits or are declared legally incompetent, SSA appoints representative payees for them, and their SSI benefits are sent to the representative payees. In many cases the representative payee is a spouse, a parent, or other close relative who will act in the recipient’s best interest. In some cases, an SSA-approved organization may be appointed and some organizations have been authorized by SSA to collect a fee from the benefit for acting as payee. The fee cannot exceed the lesser of 10 percent of the benefit amount or a specified amount (\$35 a month in 2008 (\$68 a month for disabled recipients who also have a drug addiction or alcoholism condition)).

Representative payees may use an SSI recipient’s benefit only for the use and benefit of the recipient and must account for all benefits received. Representative payees also are required to report any changes that may affect SSI recipients’ eligibility and payment amount and may be held liable for certain overpayments that occur. In cases in which a child is due a retroactive payment that exceeds six times the Federal benefit rate, the representative payee is required to establish a dedicated account at a financial institution to maintain the retroactive payment. Expenditures from the account must be used primarily for certain expenses related to the child’s impairment.

6. Appeal Rights

Recipients must be informed in writing in advance of adverse actions SSA plans to take and must be given the opportunity to request that their benefits continue while a decision at the first level of appeal is pending. Recipients can qualify for payment continuation when they appeal an adverse action within 10 days of receiving the advance notice. Slightly different rules apply to medical cessation cases. When appealing medical cessation cases, individuals may elect to have their benefits continued at both the reconsideration and hearing levels of appeal.

7. Fees for Attorneys and Non-attorney Representatives

At any time, an individual may appoint a representative in any dealings with the Social Security Administration. If such a representative is an attorney, he/she must be in good standing, have the right to practice law before a court, not be disqualified or suspended from acting as a representative in dealings with Social Security, and not be prohibited by any law from acting as a representative. If the individual is not an attorney, he/she must meet qualifications specified by the Commissioner (e.g., be of good character and able to provide valuable service to claimants).

A representative may charge and receive a fee for his/her services, but the Social Security Administration generally decides how much the fee will be. The representative may request authorization to charge and receive a fee under either the fee agreement or fee petition process. The fee that may be authorized under the fee agreement process is currently limited to the lesser of 25 percent of the retroactive payment or \$5,300¹. There is no limit on the amount of the fee that may be authorized under the fee petition process; under this process a reasonable fee is authorized for specific services provided by the representative. A representative cannot charge or receive more than the fee amount authorized. The SSI program has traditionally differed from the Social Security program in that amounts could not be withheld from an individual's SSI benefits to pay for attorney fees. SSI claimants were responsible for paying such fees directly to their attorneys. However, beginning February 28, 2005, direct payment of attorney fees has temporarily been extended to the SSI program under the same process and in the same manner as fees are directly paid in the Social Security program.² As in the fee process for the Social Security program, attorneys are now charged an assessment of the smaller of 6.3 percent of each authorized fee withheld or \$79. The flat-rate cap is adjusted based on annual cost-of-living adjustments, rounded down to the next lower dollar. In addition, the Commissioner is conducting a nationwide demonstration project providing for extension of fee withholding for non-attorney representatives under Social Security and SSI. In order to be eligible to participate in the demonstration project, non-attorney representatives will have to meet specified prerequisites that include: having a bachelors' degree or equivalent; having experience in representing claimants before SSA; having liability insurance; passing a criminal background check; and, passing an examination given by SSA that tests relevant knowledge of the Social Security Act and recent court decisions. The SSI fee withholding and direct payment of fees, and the demonstration project provisions, are temporary in that their authority ends after 5 years.

8. Advance Payments

The SSI program has provisions which help to respond to the immediate needs of new claimants. These procedures are in addition to State and local programs designed to help those in need, pending decisions on their SSI status.

a. Emergency Advance Payments

A new claimant who faces a financial emergency, and for whom there is a strong likelihood of being found eligible, may receive up to 1 month of SSI benefits, the Federal payment amount plus any applicable State supplement. The amount paid is recovered from later SSI payments (in full from the first payment or in increments over no more than a 6-month period, depending upon the circumstances). However, if the claim is subsequently not allowed because of not finding disability or blindness, repayment would be waived. If the claim is disallowed for other reasons, the amount paid would be an overpayment and processed as such.

b. Presumptive Disability or Blindness

Up to 6 months' payments may be made to an individual applying for benefits based on disability or blindness when the available evidence reflects a high degree of probability that his/her impairment will meet the definition of disability or blindness and he/she is otherwise eligible. These payments are not considered overpayments if the individual is later determined not to be disabled or blind. If the claim is disallowed for other reasons, the amount paid would be an overpayment and processed as such.

¹ Fee agreements prior to February 1, 2002, were limited to the lesser of 25 percent of the retroactive payment or \$4,000.

² P.L. 108-203, enacted March 2, 2004, granted temporary extension of the attorney fee payment system to title XVI claims for a period of 5 years.

G. STATE SUPPLEMENTATION

In designing the SSI program, Congress recognized that States¹, in many instances, would want to provide a higher level of income maintenance than was available under the Federal program. At the same time States were given the option either to provide no supplementation to the Federal assistance payments or to supplement those payments based on their views of the needs of their citizens. Congress also mandated that States assure that their citizens would not receive lower benefits under the Federal program than they had under the former State program. The following paragraphs describe the various forms of State supplementation that currently exist. Table III.H1 summarizes State-specific participation in these programs as well as other programs requiring State and Federal coordination as discussed in section III.H.

1. Optional State Supplementary Payment Programs

For individuals who first became eligible for SSI in 1974 or later, each State could supplement Federal payments to whatever extent it found appropriate with respect to the needs of its citizens and resources of the State. Currently, 46 States have optional State supplementary payment programs.

Some States provide supplementary payments to all individuals eligible for SSI benefits, while others may limit them to certain SSI recipients such as the blind or residents of domiciliary-care facilities, or may extend them to persons ineligible for SSI because of excess income. States' flexibility in setting supplementary payments, however, has been significantly restricted by the passalong provisions (see Passalong Provisions section below).

2. Mandatory State Supplementary Payment Programs

States are required² to maintain the December 1973 income levels of individuals who were transferred from the former State adult assistance programs to the SSI program in 1974, except for Texas which has a constitutional bar against mandatory State supplementation. Over the years, many individuals who were converted to SSI from the State benefit rolls in December 1973 have died and others have had their incomes increased above the December 1973 level. As a result, there are few individuals who continue to receive mandatory State supplementary payments.

3. Administration of State Supplementary Payments

A State may administer its supplementary program or enter into an agreement under which SSA will make eligibility determinations and payments on behalf of the State. Under State administration, the State pays its own program benefits and absorbs the full administrative costs. Under Federal administration, States are required to pay SSA a \$9.95 fee for each supplementary payment issued in fiscal year 2008. Fees are projected to rise in succeeding fiscal years, based on changes in the consumer price index.

States that administer their own supplementary payment programs to title XVI recipients establish their own eligibility criteria for the supplementary payments. States with Federally-administered programs may supplement the Federal benefit among a limited number of geographical and living arrangement variations for title XVI recipients.³

¹ References to State include, in addition to the 50 States, the District of Columbia. The applicable State supplementation provisions would also apply to the Northern Mariana Islands if it began making State supplementary payments.

² Requirement does not affect West Virginia, since, in 1973, SSI Federal benefit rates exceeded the applicable income standards under the State's adult assistance programs.

³ Includes, for this purpose, those eligible for title XVI benefits but for income.

4. Passalong Provisions

When the SSI program began in 1974, Congress did not require States to maintain their efforts with regard to levels of State supplementary payments. However, in 1976 in reaction to States reducing their supplementary payment amounts when SSI payments were increased, Congress mandated that States pass along SSI benefit increases resulting from cost-of-living adjustments.

To meet the passalong (or maintenance-of-effort) requirement, a State may either maintain each State payment level from year-to-year—the “payment levels” method—or it may spend the same amount of money, in the aggregate, that it spent for supplementary benefits in the 12-month period preceding the increase in the SSI benefit rate—the “total expenditures” method. Currently, 40 States use the levels method and 10 use the expenditure method. West Virginia has no optional supplementary plan and was not required to establish a mandatory plan because Federal SSI income standards exceeded all payments made under the State’s adult assistance programs in 1973.

H. COORDINATION WITH OTHER PROGRAMS

SSI benefits are not the only form of assistance available to needy aged, blind, or disabled individuals. Medicaid, food stamps, and temporary State assistance also are important in keeping individuals from sliding further into poverty. SSA plays a limited but important role in helping States with regard to administration of Medicaid and Food Stamp programs, and provisions in the SSI statute ensure that payments made by States or under the Social Security program are not duplicated by SSI benefits.

1. Windfall Offset

If a person receives SSI payments, and is later determined to be entitled to retroactive Social Security benefits, such retroactive benefits are reduced by the amount of SSI payments the person would not have been eligible for had the Social Security benefits been paid in the month they were due. This process is called the “windfall offset” and was enacted to prevent windfall payments to individuals when Social Security and SSI payments were paid for the same period.

2. Medicaid Determinations

Generally, SSI recipients are categorically eligible for Medicaid. A State may either use SSI eligibility criteria for determining Medicaid eligibility, or use its own criteria as long as the criteria are no more restrictive than the State’s January 1972 medical assistance standards. Forty States use SSI criteria and 11 States use eligibility criteria more restrictive than those of the SSI program.

States also may enter into agreements with SSA for SSA to make Medicaid eligibility determinations on their behalf, as long as the eligibility requirements of the State’s Medicaid plans are the same as those for the SSI program. Under these agreements, SSA determines only when an individual is eligible for Medicaid; SSA does not determine Medicaid ineligibility. SSA has Medicaid determination agreements with 33 States.

Continued Medicaid eligibility is provided for certain Social Security beneficiaries who lose SSI eligibility due to entitlement to Social Security benefits, or due to a change in Social Security benefits resulting from:

- Cost-of-living adjustments;
- Actuarial increases in disabled widow(er)s benefits before age 60;

- Changes in the definition of disability for widow(er)s benefits; or
- Increases in or entitlement to childhood disability benefits.

3. Food Stamp Applications

SSI recipients in all States, except California,¹ may be eligible for food stamps. Under agreements entered into by the Secretary of Agriculture and the Commissioner of SSA, Social Security offices notify Social Security and SSI applicants and recipients of their potential benefits under the Food Stamp program and make food stamp applications available to them.

The law also provides for Social Security offices to take food stamp applications from potentially eligible or eligible SSI households which are not already receiving food stamps and which do not have a food stamp application pending. Food stamp applications from SSI households may be taken in connection with initial SSI claims or at the time of a redetermination. Food stamp applicants have the option of applying at Social Security offices or applying at State food stamp offices if expedited service is required. Social Security offices forward the food stamp applications and any supporting documents to the local food stamp offices within 1 day of taking the application. Eligibility is determined by the food stamp office.

4. Interim Assistance Reimbursement

SSA may enter into agreements under which States or local governments are reimbursed for basic needs assistance provided during the period that either an eligible individual's SSI application for benefits was pending, or the individual's SSI benefits were suspended and subsequently reinstated (the interim period).

Under these interim assistance reimbursement agreements, if the individual has given SSA written authorization, SSA first reimburses the State, then pays the remainder in installments to the recipient or his/her representative payee.² In certain disabled children cases, SSA pays the remainder in installments into special dedicated financial institution accounts for the children. Thirty-nine States have interim assistance agreements with SSA.

¹ California "cashes out" food stamps and SSI recipients there receive a cash payment in their State supplementary payment in lieu of food stamps.

² In those cases where the retroactive benefits are less than a certain amount, SSA sends an individual's first SSI benefit check relating to the interim period to the State or local jurisdiction that had provided the interim assistance. The State then deducts the amount it is owed and is required to forward the remainder to the claimant within 10 days. Beginning February 2005, when an authorized representative fee may be paid directly, SSA reimburses the State and then pays the approved fee. Any remainder will be paid in installments, or the full remainder will be paid to the recipient. This change is a 5-year demonstration project.

Table III.H1.—SSI State Supplementation¹ and Coordination with Other Programs

United States and District of Columbia	Optional State program— Administered by:			Method of mandatory passalong of benefit increases from cost-of-living adjustments		Medicaid eligibility determination—		Agreement with SSA to determine eligibility	Interim assistance reimbursement agreement with SSA
	State	Federal (SSA)	Federal & State	“Payment levels”	“Total expenditures”	Based on:			
						Federal criteria	State criteria		
Alabama ²	*			*		*		*	
Alaska	*				*	*			*
Arizona	*			*		*		*	
Arkansas ³				*		*		*	
California ⁴		*		*		*		*	
Colorado	*				*	*		*	*
Connecticut ²	*			*			*		*
Delaware ⁴		*		*		*		*	*
District of Columbia ⁴		*			*	*		*	*
Florida ²	*			*		*		*	*
Georgia ⁴	*			*		*		*	*
Hawaii ²		*			*		*		*
Idaho	*			*		*			
Illinois	*			*			*		*
Indiana ²	*			*			*		*
Iowa ⁴			*	*		*		*	*
Kansas ³				*		*			*
Kentucky ²	*			*		*		*	*
Louisiana ⁴	*			*		*		*	
Maine	*			*		*		*	*
Maryland ⁴	*			*		*		*	*
Massachusetts ⁴		*		*		*		*	*
Michigan ⁴			*	*		*		*	* 5
Minnesota ²	*			*			*		*
Mississippi ³				*		*		*	
Missouri	*			*			*		*
Montana ⁴		*		*		*		*	*
Nebraska	*				*	*			*
Nevada ²		*		*		*			*
New Hampshire	*			*			*		* 5
New Jersey ⁴		*		*		*		*	*
New Mexico	*			*		*		*	* 5
New York ⁴			*	*		*		*	*
North Carolina	*			*		*		*	*
North Dakota ²	*			*			*		*
Ohio ⁴	*			*			*		*
Oklahoma	*				*		*		
Oregon	*				*	*			*
Pennsylvania ⁴			*	*		*		*	*
Rhode Island ²		*		*		*		*	* 5
South Carolina ²	*			*		*		*	
South Dakota ⁴	*			*		*		*	
Tennessee ³				*		*		*	*
Texas ⁶	*			*		*		*	
Utah ²		*		*		*			*
Vermont ²			*	*		*		*	*
Virginia ²	*				*		*		*
Washington	*				*	*		*	*
West Virginia ⁶					*	*		*	
Wisconsin	*				*	*		*	*
Wyoming	*			*		*		*	
Total number of States	31	10	5	40	10	40	11	33	39

¹ See body of text for description of the various forms of State supplementation.

² State has no recipients receiving mandatory minimum State supplementation.

³ Mandatory minimum State supplementation program is Federally-administered. No optional program.

⁴ Mandatory minimum State supplementation program is Federally-administered.

⁵ State provides assistance only in initial application cases. No assistance provided during periods that SSI benefits are suspended or terminated.

⁶ State does not have a mandatory minimum State supplementation program.

IV. ESTIMATES OF PROGRAM PARTICIPATION AND FEDERAL EXPENDITURES UNDER THE SUPPLEMENTAL SECURITY INCOME PROGRAM, 2008-32

As described in section III, eligibility for payments under the SSI program depends on satisfying a collection of requirements related to the socioeconomic status of the individual, as well as the evaluation of disability or blindness for all persons under age 65, and for certain individuals at ages 65 or older. Consequently, future SSI program participation and expenditures will depend on a variety of difficult-to-predict factors including the performance of national and local economies, distribution of personal income, the prevalence of disability in the general population, and the determination of disability as defined in the Social Security Act. Nonetheless, for planning purposes it is important to develop the best possible projections of future SSI program participation and expenditures.

This section includes projections of program participation and expenditures under the SSI program for a period of 25 years as required by the provisions of Public Law 104-193 which mandate this report. The current projection model uses estimates of the general population by single year of age and gender. Transitions into payment status are projected separately for: (1) new recipients resulting from an application for program benefits and (2) returns to payment status from suspended status. Movements out of payment status are projected separately for (1) terminations due to death and (2) suspensions of payment for all other reasons.¹ The assumptions and methods used in preparing these projections are reexamined each year in the light of recent experience and new information about future conditions, and are revised if warranted. The presentation of projection results in the remainder of this section provides SSI recipient information by selected age groups. Where certain recipient categories have overlapping age distributions, recipient category totals are also shown.

A. DEMOGRAPHIC AND ECONOMIC ASSUMPTIONS

The estimates of program participation and Federal expenditures presented in this section have been prepared using the intermediate demographic and economic projections developed for the 2008 Annual Report of the Board of Trustees of the Federal Old-Age and Survivors Insurance and Federal Disability Insurance (OASDI) Trust Funds.² The most significant economic parameter is the Consumer Price Index for Urban Wage Earners and Clerical Workers (hereafter denoted as CPI)³, which is used for indexing the SSI Federal benefit rate. Detailed discussion of these demographic and economic parameters is presented in sections V.A and V.B of the Trustees Report.⁴ The most significant parameters utilized for the projections presented in this report are summarized in the following two tables. Table IV.A1 presents population projections summarized for the age subgroups that are used in the presentation of SSI participant projections discussed in the next section. Table IV.A2 presents a complete history of the cost-of-living adjustment factors and Federal benefit rates since the inception of the program, along with projections of such amounts consistent with the economic assumptions underlying the SSI expenditure estimates discussed in section IV.C.

As described in section III.D.1, the monthly Federal benefit rate is adjusted in January of each year for all recipients to reflect the increase in the level of consumer prices (the CPI) generally from the third quarter of the second prior calendar year to the third quarter of the prior calendar year. This cost-of-living adjustment is identical to the adjustment applied to Social Security benefits under the OASDI program after initial benefit eligibility. In previous years, occasional ad hoc increases were also applied to the Federal benefit rates, either in place of or in addition to the automatic adjustments. The history of legislation affecting the Federal benefit rates is presented in table V.A1.

¹ The two main reasons other than death for termination of SSI payments are (1) failure to satisfy income and resource limitations of the SSI program and (2) recovery from a qualifying disability.

² House Document 110-104, published April 10, 2008.

³ Historical values of the CPI are developed and published by the Bureau of Labor Statistics.

⁴ *Ibid*, Section V.A, *Demographic Assumptions and Methods* and Section V.B, *Economic Assumptions and Methods*.

Table IV.A1.—Historical and Projected Social Security Area Population based on the Intermediate Assumptions of the 2008 OASDI Trustees Report, as of July 1, 1974-2032
[In thousands]

Year	Age groups ¹						Total all ages
	0-17	18-34	35-49	50-64	65-74	75 or older	
Historical data:							
1974	71,044	59,770	36,417	32,792	13,832	8,899	222,754
1975	70,079	61,731	36,392	33,152	14,137	9,117	224,609
1976	69,099	63,647	36,504	33,434	14,449	9,387	226,519
1977	68,199	65,381	36,834	33,712	14,774	9,648	228,548
1978	67,381	66,988	37,371	33,960	15,119	9,896	230,715
1979	66,627	68,601	37,982	34,126	15,443	10,167	232,945
1980	66,060	70,178	38,545	34,256	15,747	10,449	235,236
1981	65,702	71,436	39,374	34,337	16,036	10,752	237,637
1982	65,458	72,184	40,767	34,307	16,326	11,076	240,119
1983	65,335	72,676	42,339	34,229	16,581	11,405	242,565
1984	65,362	73,059	43,849	34,150	16,815	11,718	244,953
1985	65,544	73,306	45,371	34,032	17,093	12,029	247,374
1986	65,814	73,455	46,950	33,880	17,409	12,338	249,846
1987	66,071	73,559	48,600	33,776	17,701	12,642	252,348
1988	66,315	73,666	50,286	33,760	17,941	12,947	254,915
1989	66,710	73,635	52,032	33,829	18,141	13,275	257,622
1990	67,464	73,265	53,810	33,932	18,358	13,623	260,452
1991	68,511	72,576	55,598	34,107	18,606	13,957	263,356
1992	69,610	71,770	57,319	34,511	18,818	14,287	266,315
1993	70,638	71,007	58,898	35,121	18,971	14,604	269,239
1994	71,546	70,265	60,487	35,769	19,063	14,913	272,043
1995	72,302	69,571	62,181	36,360	19,092	15,244	274,748
1996	72,938	69,036	63,653	37,198	19,059	15,594	277,477
1997	73,447	68,672	64,645	38,543	18,971	15,944	280,221
1998	73,817	68,438	65,455	40,054	18,841	16,265	282,871
1999	74,171	68,324	66,242	41,524	18,697	16,548	285,505
2000	74,555	68,382	66,865	43,009	18,608	16,866	288,284
2001	74,933	68,659	67,308	44,542	18,577	17,213	291,231
2002	75,279	69,074	67,555	46,149	18,593	17,514	294,164
2003	75,562	69,506	67,632	47,794	18,679	17,777	296,950
2004	75,842	69,923	67,680	49,499	18,839	18,027	299,810
2005	76,160	70,335	67,804	51,271	19,061	18,232	302,863
2006	76,458	70,746	67,855	53,062	19,387	18,330	305,836
2007	76,673	71,341	67,625	54,771	19,908	18,357	308,675
Projected:							
2008	76,805	72,220	67,151	56,354	20,605	18,355	311,490
2009	76,916	73,203	66,581	57,938	21,307	18,353	314,299
2010	77,074	74,154	65,971	59,596	21,916	18,386	317,097
2011	77,307	75,025	65,367	61,048	22,701	18,446	319,893
2012	77,618	75,777	64,844	62,068	23,849	18,541	322,697
2013	77,997	76,411	64,421	62,927	25,060	18,693	325,508
2014	78,436	76,919	64,141	63,766	26,175	18,887	328,324
2015	78,906	77,316	64,096	64,431	27,277	19,116	331,142
2016	79,384	77,665	64,267	64,861	28,369	19,413	333,959
2017	79,854	78,008	64,568	65,092	29,404	19,846	336,772
2018	80,311	78,377	64,889	65,207	30,391	20,402	339,577
2019	80,795	78,745	65,138	65,283	31,450	20,961	342,371
2020	81,315	79,063	65,321	65,367	32,613	21,469	345,149
2021	81,823	79,380	65,526	65,375	33,665	22,137	347,906
2022	82,298	79,722	65,897	65,147	34,459	23,113	350,637
2023	82,758	80,038	66,495	64,698	35,182	24,165	353,336
2024	83,232	80,242	67,264	64,161	35,949	25,150	355,998
2025	83,710	80,335	68,143	63,593	36,710	26,127	358,619
2026	84,165	80,411	69,045	63,035	37,412	27,126	361,194
2027	84,595	80,535	69,863	62,555	38,009	28,161	363,719
2028	84,998	80,739	70,561	62,169	38,495	29,230	366,192
2029	85,373	81,021	71,126	61,919	38,842	30,329	368,610
2030	85,723	81,373	71,549	61,890	38,995	31,442	370,973
2031	86,051	81,787	71,880	62,062	38,936	32,565	373,280
2032	86,360	82,231	72,170	62,354	38,718	33,700	375,532

¹ Age as of last birthday.

Notes: 1. Totals do not necessarily equal the sums of rounded components.

2. Historical data are estimated and subject to revision.

Table IV.A2.—SSI Federal Benefit Rate Increases and Levels: Historical and Projected on the Basis of the Intermediate Assumptions of the 2008 OASDI Trustees Report, 1974-2032

Year	Benefit rate increase ¹	Federal benefit rate		
		Individual	Couple	Essential person ²
Historical data:				
Initial benefit paid January 1, 1974 ³	—	\$140.00	\$210.00	\$70.00
1974.....	⁴ 4.3%	146.00	219.00	73.00
1975.....	8.0	157.70	236.60	78.90
1976.....	6.4	167.80	251.80	84.00
1977.....	5.9	177.80	266.70	89.00
1978.....	6.5	189.40	284.10	94.80
1979.....	9.9	208.20	312.30	104.20
1980.....	14.3	238.00	357.00	119.20
1981.....	11.2	264.70	397.00	132.60
1982.....	7.4	284.30	426.40	142.50
1983.....	⁴ 7.0	304.30	456.40	152.50
1984.....	3.5	314.00	472.00	157.00
1985.....	3.5	325.00	488.00	163.00
1986.....	3.1	336.00	504.00	168.00
1987.....	1.3	340.00	510.00	170.00
1988.....	4.2	354.00	532.00	177.00
1989.....	4.0	368.00	553.00	184.00
1990.....	4.7	386.00	579.00	193.00
1991.....	5.4	407.00	610.00	204.00
1992.....	3.7	422.00	633.00	211.00
1993.....	3.0	434.00	652.00	217.00
1994.....	2.6	446.00	669.00	223.00
1995.....	2.8	458.00	687.00	229.00
1996.....	2.6	470.00	705.00	235.00
1997.....	2.9	484.00	726.00	242.00
1998.....	2.1	494.00	741.00	247.00
1999.....	1.3	500.00	751.00	250.00
2000.....	⁵ 2.5	⁶ 513.00	769.00	257.00
2001.....	3.5	⁶ 531.00	796.00	266.00
2002.....	2.6	545.00	817.00	273.00
2003.....	1.4	552.00	829.00	277.00
2004.....	2.1	564.00	846.00	282.00
2005.....	2.7	579.00	869.00	290.00
2006.....	4.1	603.00	904.00	302.00
2007.....	3.3	623.00	934.00	312.00
2008.....	2.3	637.00	956.00	319.00
Projected:				
2009.....	2.7	654.00	982.00	328.00
2010.....	2.5	671.00	1,006.00	336.00
2011.....	2.8	690.00	1,034.00	345.00
2012.....	2.8	709.00	1,063.00	355.00
2013.....	2.8	729.00	1,093.00	365.00
2014.....	2.8	749.00	1,124.00	375.00
2015.....	2.8	770.00	1,155.00	386.00
2016.....	2.8	792.00	1,188.00	396.00
2017.....	2.8	814.00	1,221.00	408.00
2018.....	2.8	837.00	1,255.00	419.00
2019.....	2.8	860.00	1,290.00	431.00
2020.....	2.8	884.00	1,326.00	443.00
2021.....	2.8	909.00	1,364.00	455.00
2022.....	2.8	934.00	1,402.00	468.00
2023.....	2.8	961.00	1,441.00	481.00
2024.....	2.8	988.00	1,481.00	495.00
2025.....	2.8	1,015.00	1,523.00	509.00
2026.....	2.8	1,044.00	1,566.00	523.00
2027.....	2.8	1,073.00	1,609.00	537.00
2028.....	2.8	1,103.00	1,654.00	552.00
2029.....	2.8	1,134.00	1,701.00	568.00
2030.....	2.8	1,166.00	1,748.00	584.00
2031.....	2.8	1,198.00	1,797.00	600.00
2032.....	2.8	1,232.00	1,848.00	617.00

¹ Increases prior to 1984 were effective for the payment due on July 1 of the year. Increases shown for 1984 and later are effective for the payment due on January 1 of the year.

² A concept carried over from the former State assistance plans. There are currently fewer than 100 of those cases remaining.

³ Benefits paid in January, 1974 were based on the Federal benefit rates established by Public Law 92-603, enacted October 30, 1972: \$130.00 for individuals; \$195.00 for couples; and \$65.00 for essential persons. Retroactive payments were subsequently made to adjust initial payments to the higher Federal benefit rates established by Public Law 93-233, enacted December 31, 1973.

⁴ Ad hoc increases as specified in the law.

⁵ Originally determined as 2.4 percent, but pursuant to Public Law 106-554, enacted December 21, 2000, is effectively now 2.5 percent.

⁶ Benefits originally paid in 2000 and through July 2001 were based on Federal benefit rates of \$512.00 and \$530.00, respectively. Pursuant to Public Law 106-554, monthly payments beginning in August 2001 were effectively based on the higher \$531 amount. Lump-sum compensation payments were made based on an adjusted benefit rate for months prior to August 2001.

Estimates presented in the sections that follow are based on the demographic and economic parameters described in this section. For the purpose of making these estimates, it is assumed that no changes will occur during the projection period in the present statutory provisions and regulations under which the SSI program operates.

B. NUMBERS OF PARTICIPANTS IN THE SSI PROGRAM

This section presents projections of the numbers of persons receiving Federal SSI payments by category and age group.¹ SSI recipients are categorized as (1) aged or (2) blind or disabled. The following paragraphs discuss the age groupings and recipient categories in more detail.

- The *aged* category includes those individuals whose eligibility for SSI benefits is established based on meeting the age-65²-or-older requirement, and other SSI eligibility requirements including income and resource limits. In December 2007, there were 1.205 million aged recipients of Federally-administered SSI payments.
- The *blind or disabled* category includes those individuals whose eligibility is established based on meeting the definition of blindness or disability and the applicable income and resource limits as well as any other SSI eligibility requirements. This category is often subdivided into two subcategories based on age: *blind or disabled adults* (age 18 or older) and *blind or disabled children* (under age 18). In December 2007, there were 6.155 million blind or disabled recipients of Federally-administered SSI payments.
 - The *blind or disabled adults* subcategory includes those individuals age 18 or older who meet the definition of blindness or disability for individuals age 18 or older and SSI income and resource limits. Included in this category are students age 18 to 21 who must meet the adult definition of disability and differ from other adults only in that they qualify for a special student earned income exclusion. After attainment of age 65, these individuals generally continue to be classified as blind or disabled adults (rather than aged). In December 2007, there were 5.034 million blind or disabled recipients of Federally-administered SSI payments age 18 or older, including 7 thousand students who used the special student earned income exclusion and 812 thousand disabled or blind recipients age 65 or older.
 - The *blind or disabled children* subcategory includes those individuals whose eligibility is established based on meeting the definition of blindness or disability for individuals under age 18. These children are subject to parent-to-child deeming until they reach the age of 18. At age 18 these individuals continue to be eligible for SSI if they meet the definition of blindness or disability for individuals age 18 or older as well as other eligibility criteria and, as a result, are reclassified as blind or disabled adults. In December 2007, there were 1.121 million blind or disabled recipients of Federally-administered SSI payments who were under age 18.

Table IV.B1 presents historical and projected numbers of persons applying for SSI benefits, by calendar year of application. Figure IV.B1 presents the same information in graphical form. Recent historical data indicate that applications have grown fairly rapidly beginning in calendar year 2002, and that this growth continued through calendar year 2005. The rate of growth in applications, however, slowed significantly in 2005 and 2006, and for the 2007 Annual Report we projected a slight decline in the numbers of applications for calendar year 2007. The actual result for 2007 represented an increase relative to the number that was estimated last year, with the numbers of applications for 2007 coming in 1.9 percent higher than was estimated in the 2007 Annual Report.

¹ Recipient flows are projected on a calendar-year-age basis, with activity throughout a given year tabulated according to age at the end of the calendar year. Tabulations of recipients in current-payment status are provided as of December of each calendar year at which time calendar year of age and age last birthday are the same. However, the tabulations that reflect activity throughout the calendar year are summarized according to calendar year of age and will not correspond precisely to tabulations summarized according to age last birthday. For example, applications for the 0-17 age group for a given calendar year include applications only for those individuals who are under 18 at the end of the calendar year.

² Individuals may apply for SSI benefits based on age as of the day preceding their 65th birthday.

Table IV.B1.—SSI Federally-Administered Applications,¹ Calendar Years 1974-2032
 [In thousands]

Calendar year	Blind or disabled, by age group					Aged, by age group			Totals		
	0-17	18-34	35-49	50-64	65-74	75 or older	65-74	75 or older	Blind or disabled	Aged	All
Historical data:											
1974 ^{2, 3} ..	125	590	626	1,303	158	20	1,434	1,496	2,822	2,931	5,752
1975 ^{2, 4} ..	94	276	258	443	15	5/	238	145	1,086	382	1,468
1976	82	260	250	384	8	5/	175	80	984	254	1,239
1977	100	286	246	401	7	1	174	84	1,040	259	1,298
1978	94	276	256	413	7	5/	170	88	1,046	258	1,304
1979	106	282	268	426	7	5/	178	84	1,090	262	1,352
1980	122	310	272	438	8	1	187	89	1,151	276	1,427
1981	78	206	173	271	5	5/	88	42	733	130	864
1982	88	246	206	278	11	1	93	48	830	141	971
1983	102	258	225	311	5	1	122	68	902	190	1,092
1984	103	267	247	321	7	5/	178	108	944	286	1,230
1985	114	294	297	409	7	5/	151	73	1,122	223	1,345
1986	122	316	334	426	7	1	150	81	1,205	231	1,437
1987	108	287	299	331	7	1	134	66	1,033	200	1,233
1988	114	282	301	317	7	1	131	69	1,021	200	1,221
1989	116	297	323	329	7	5/	146	76	1,072	222	1,294
1990	149	335	380	356	6	5/	156	71	1,226	227	1,454
1991	237	391	453	391	7	5/	159	68	1,479	227	1,706
1992	339	453	522	407	8	5/	163	64	1,728	226	1,955
1993	473	506	570	416	7	5/	158	61	1,973	218	2,191
1994	517	492	571	402	6	5/	136	52	1,989	188	2,177
1995	473	435	524	363	6	5/	121	44	1,801	165	1,966
1996	431	393	500	345	9	1	108	44	1,678	153	1,831
1997	306	317	438	307	8	1	82	35	1,377	117	1,494
1998	318	317	453	331	9	1	96	39	1,428	136	1,563
1999	338	317	470	336	6	5/	107	39	1,468	145	1,614
2000	337	321	486	341	6	5/	102	39	1,493	140	1,633
2001	351	346	502	354	4	5/	98	35	1,558	134	1,691
2002	385	388	550	384	4	5/	105	38	1,711	142	1,853
2003	400	404	565	408	4	5/	100	36	1,781	135	1,916
2004	420	438	604	452	4	5/	101	37	1,919	138	2,057
2005	429	439	604	477	5	5/	112	44	1,954	156	2,110
2006	415	437	584	484	4	5/	109	41	1,925	150	2,075
2007	421	442	578	502	5	5/	105	39	1,948	143	2,091
Projected:											
2008	423	456	577	527	6	5/	109	38	1,988	147	2,135
2009	422	457	569	533	5	5/	114	39	1,986	153	2,139
2010	420	458	561	540	5	5/	117	39	1,984	156	2,140
2011	418	459	555	548	6	5/	126	39	1,984	164	2,149
2012	417	459	549	553	6	5/	135	39	1,985	174	2,158
2013	419	459	543	558	6	5/	140	39	1,986	178	2,165
2014	422	458	540	562	6	5/	144	39	1,988	183	2,171
2015	424	458	539	564	6	5/	149	39	1,992	188	2,180
2016	427	460	541	565	7	5/	154	40	1,999	194	2,193
2017	430	462	543	564	7	5/	158	41	2,006	200	2,205
2018	432	464	545	563	7	5/	163	42	2,012	206	2,217
2019	435	466	546	563	7	5/	169	44	2,017	212	2,229
2020	437	468	546	563	7	5/	174	44	2,022	218	2,240
2021	440	470	548	561	8	5/	179	46	2,027	225	2,252
2022	443	472	552	558	8	5/	182	49	2,032	231	2,262
2023	445	474	557	552	8	5/	186	50	2,036	236	2,272
2024	447	474	564	547	8	5/	189	52	2,041	241	2,282
2025	450	475	572	541	8	5/	192	54	2,045	247	2,292
2026	452	475	579	536	8	5/	195	56	2,051	251	2,302
2027	454	476	585	533	8	5/	196	58	2,056	255	2,311
2028	456	477	591	531	8	5/	197	60	2,063	258	2,321
2029	457	479	595	531	8	5/	198	62	2,071	260	2,331
2030	459	482	598	533	8	5/	196	65	2,080	261	2,340
2031	460	484	601	535	7	5/	194	67	2,089	260	2,349
2032	462	487	604	538	7	5/	191	69	2,098	260	2,358

¹ Based on data reported in the Integrated Workload Management System (formerly known as the District Office Workload Report).

² "All" column estimated by the Office of Research, Evaluation, and Statistics using a 10-percent sample and published in the SSI Annual Statistical Report.

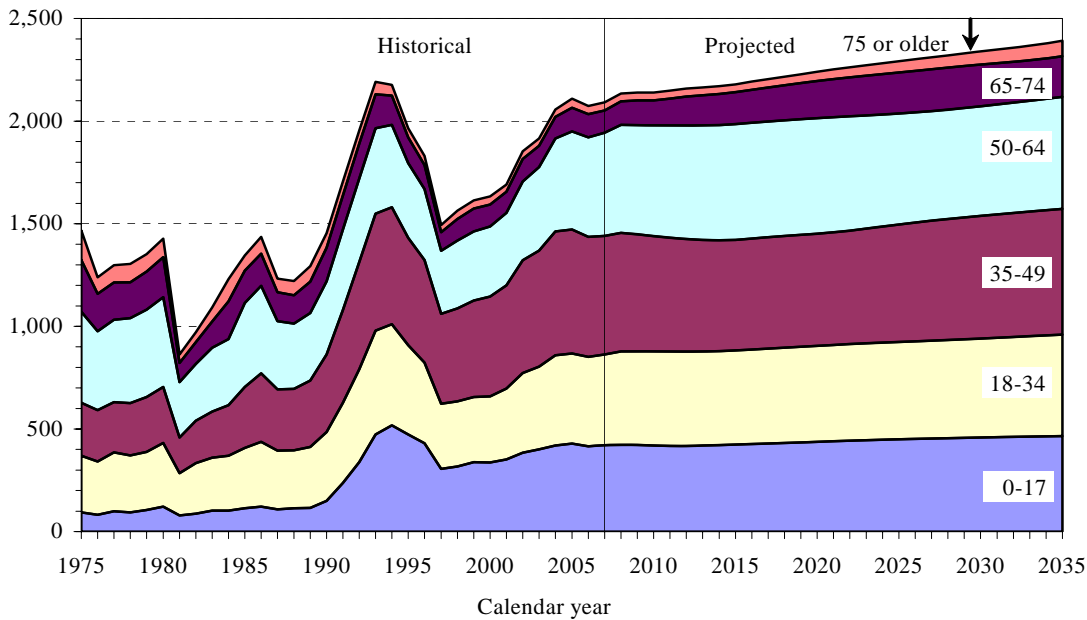
³ Includes conversions from State programs and applications received in 1973.

⁴ Estimated totals revised from prior SSI Annual Reports.

⁵ Fewer than 500.

Note: Totals do not necessarily equal the sums of rounded components. Historical split among age groups is estimated on a calendar year of age basis.

Figure IV.B1.—SSI Federally-Administered Applications by Age Group, Calendar Years 1975-2035
[In thousands]



The fairly rapid growth in applications from 2002 to 2004 was largely attributable to two main factors: (1) the downturn in the economy that began early in 2001 and (2) the signature proxy process¹ introduced by SSA in June 2004. In the short term, our projections are for the numbers of applications to increase by 2 percent in 2008 and then stay roughly level, with the overall level of applications reflecting a permanent upward shift due to the signature proxy process. In the longer term, applications are estimated to grow roughly in line with overall population growth.

The adjudication of these applications involves an evaluation of levels of income and resources available to the applicants, as well as other eligibility factors including marital and citizenship status and living arrangements. In addition, over 90 percent of the applications are for disability benefits which generally require an evaluation of an alleged impairment by the appropriate State Disability Determination Services. An unfavorable disability determination may then be appealed by the applicant through several administrative levels of appeal. If all administrative levels of appeal are exhausted, the applicant may in turn carry his/her appeal to the Federal courts. Data on recent historical experience for this disability decision process are presented in section V.C.

Table IV.B2 and figure IV.B2 present historical and projected numbers of persons who start receiving SSI payments as a result of this decision process. Individuals are counted as of the first month that they move into SSI payment status. For this reason, we refer to these individuals as “new recipients” rather than “awards.”² During the 2002 to 2004 period, growth in new recipients did not keep pace with the growth in applications. From 2005 to 2007, the numbers of new recipients declined even though the level of applications during this period was higher than in the preceding years. There are two important contributing factors to the slower growth for new recipients as compared to applications: (1) since 2001 there has been

¹ The signature proxy process eases the application process by eliminating the requirement for a signed paper application from SSI applicants filing claims via the telephone. Previously some portion of those telephone applicants never followed through with a signed paper application. Since the introduction of the signature proxy process, there has been a significant increase in the numbers of denials where the applicant does not meet the nonmedical criteria.

² In addition, these counts differ slightly from other similar totals identified as “awards” and published by the Office of Research, Evaluation, and Statistics (ORES) in the *Annual Statistical Supplement to the Social Security Bulletin*. The ORES totals are similar in concept to those used in this report, but differ slightly due to the timing of the action being tabulated. For example, ORES does not count a disability benefit as being awarded until the disability decision is made. In contrast, under the procedures used in this report, individuals first coming on the SSI rolls through a finding of presumptive disability would be counted as a “new recipient” in the first month of presumptive disability payment.

Table IV.B2.—SSI Federally-Administered New Recipients, Calendar Years 1974-2032
[In thousands]

Calendar year ¹	Blind or disabled, by age group					Aged, by age group			Totals ²		All
	0-17	18-34	35-49	50-64	65-74	75 or older	65-74	75 or older	Blind or disabled	Aged	
Historical data:											
1974 ³	63	390	381	925	141	18	1,211	1,268	1,919	2,479	4,398
1975.....	58	133	105	272	16	4/	216	131	584	347	931
1976.....	43	105	88	207	9	4/	147	70	452	218	669
1977.....	48	104	84	184	8	1	140	69	429	209	637
1978.....	43	92	76	154	6	4/	127	66	370	193	563
1979.....	44	87	62	133	4	4/	116	53	330	169	499
1980.....	41	92	61	142	4	4/	125	59	341	184	524
1981.....	37	77	49	106	3	4/	80	37	272	117	389
1982.....	38	63	51	90	4	4/	72	31	245	103	348
1983.....	47	88	62	117	3	4/	95	51	317	146	463
1984.....	47	109	78	142	4	4/	131	78	380	209	589
1985.....	48	104	80	148	4	4/	106	46	384	152	536
1986.....	55	127	109	153	5	4/	110	51	449	161	610
1987.....	48	119	106	157	5	4/	116	52	435	167	602
1988.....	50	101	108	146	5	1	112	56	412	167	579
1989.....	48	113	115	155	5	4/	127	62	436	189	625
1990.....	76	136	134	182	5	4/	149	66	533	215	748
1991.....	126	146	172	200	6	4/	139	54	650	193	844
1992.....	221	199	221	233	6	4/	133	48	881	181	1,062
1993.....	235	194	221	225	6	4/	136	49	881	185	1,066
1994.....	204	164	207	215	6	4/	116	42	796	157	953
1995.....	177	147	207	218	5	4/	105	36	755	141	895
1996.....	145	134	193	203	6	1	93	35	681	128	809
1997.....	116	111	171	178	4	4/	68	25	580	93	673
1998.....	135	117	181	194	7	1	78	30	634	108	742
1999.....	140	114	186	195	5	4/	88	33	640	120	760
2000.....	145	112	180	191	5	4/	84	31	633	115	748
2001.....	157	121	185	198	4	4/	79	28	665	107	772
2002.....	171	128	195	212	4	4/	82	29	710	111	821
2003.....	180	132	194	214	4	4/	77	27	724	104	828
2004.....	183	138	202	231	4	4/	78	27	757	105	862
2005.....	178	131	192	238	4	4/	81	29	744	111	854
2006.....	175	128	190	243	3	4/	81	28	739	109	849
2007.....	172	128	186	252	3	4/	75	27	741	103	844
Projected:											
2008.....	180	139	198	274	5	4/	80	27	796	107	904
2009.....	176	138	193	276	5	4/	83	27	787	110	897
2010.....	176	140	191	284	5	4/	87	28	797	114	911
2011.....	176	142	190	289	6	4/	95	28	802	123	924
2012.....	177	142	187	291	6	4/	103	28	803	131	934
2013.....	177	141	184	292	6	4/	106	28	801	134	935
2014.....	177	140	181	291	6	4/	109	28	795	138	933
2015.....	178	139	180	291	7	4/	113	29	795	142	936
2016.....	179	140	180	292	7	4/	117	29	798	146	943
2017.....	179	140	181	292	7	4/	120	30	799	150	949
2018.....	180	141	181	292	7	4/	123	31	801	154	955
2019.....	181	141	181	292	7	4/	127	32	803	159	962
2020.....	182	142	181	291	8	4/	131	32	804	164	968
2021.....	183	143	182	291	8	4/	134	34	806	168	974
2022.....	184	143	183	289	8	4/	137	35	807	172	979
2023.....	185	144	185	286	8	4/	139	37	808	176	984
2024.....	186	144	187	283	8	4/	142	38	808	180	988
2025.....	187	144	190	280	8	4/	144	40	809	184	993
2026.....	188	144	192	278	8	4/	146	41	810	187	997
2027.....	188	145	194	276	8	4/	147	42	811	189	1,000
2028.....	189	145	196	275	8	4/	147	44	813	191	1,004
2029.....	190	146	197	274	8	4/	147	45	815	193	1,008
2030.....	190	146	198	275	8	4/	146	47	818	193	1,010
2031.....	191	147	199	275	8	4/	144	48	821	192	1,013
2032.....	191	148	200	276	7	4/	142	50	824	192	1,015

¹ Represents period in which first payment was made, not date of first eligibility for payments.

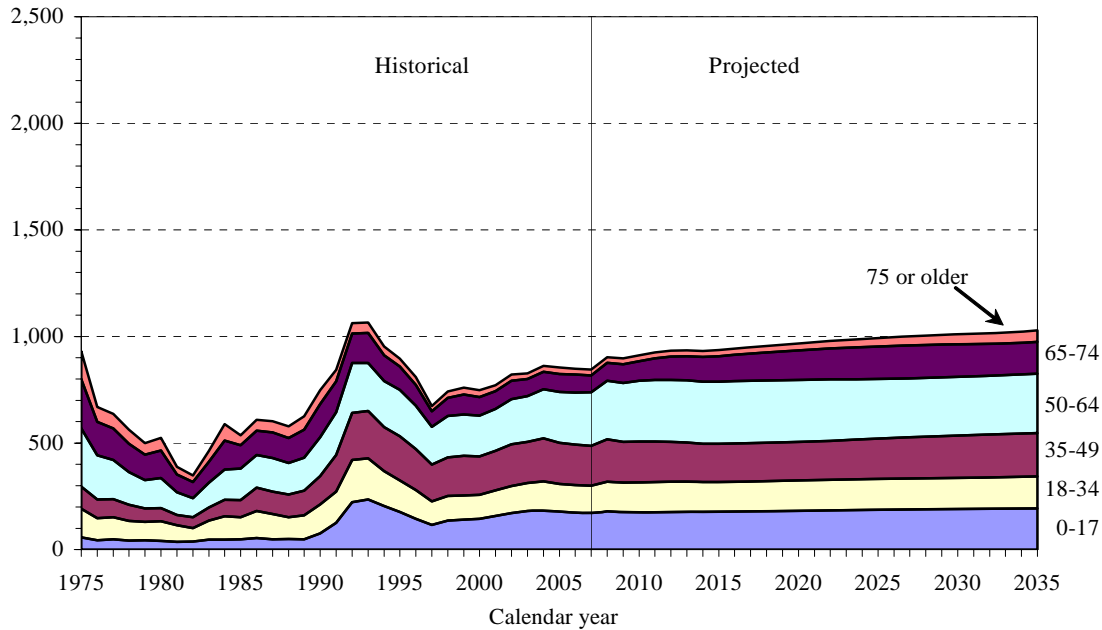
² Historical totals estimated based on 1-percent or 10-percent sample data.

³ Totals for 1974 include recipients converted from previous State programs as well as new recipients to the SSI program during 1974.

⁴ Fewer than 500.

Note: Totals do not necessarily equal the sums of rounded components. Historical split among age groups is estimated on a calendar year of age basis.

Figure IV.B2.—SSI Federally-Administered New Recipients by Age Group, Calendar Years 1975-2035
[In thousands]



substantial growth in the number of claims pending adjudication which is consistent with a longer lag time between application and the allowance decision; and (2) since the introduction of the signature proxy process there has been a significant increase in the number of denials for applications where the applicant does not meet the nonmedical criteria, causing a permanent downward shift in the allowance rate. However, the number of new recipients is projected to increase in the next 5 years due primarily to the assumption that there will be some reduction in the level of pending claims. After 2012, new recipients are projected to remain about level for a few years. Over the longer term the numbers of new recipients are estimated to increase gradually in line with the projected growth in applications.

Some of the persons receiving SSI benefits in a year will be removed from current-payment status during the year because of death or the loss of SSI eligibility. The loss of eligibility can occur either as the result of a redetermination of the individual's nonmedical factors of eligibility, including income and resources, or due to a determination that he/she is no longer disabled as defined under the Social Security Act, as a result of a continuing disability review.¹ For example, disabled children, upon attainment of age 18, lose eligibility if they do not qualify for benefits under the disabled adult eligibility criteria. For purposes of this presentation, we refer to the net reduction in the number of SSI recipients in payment status during a period as the number of SSI terminations for that period.

In the following tables, we have separated the numbers of people moving out of payment status into those leaving due to death (table IV.B3), and those leaving for all other reasons (table IV.B4). Table IV.B5 and figure IV.B3 present historical and projected numbers of total terminations by calendar year.

¹ Some historical details on income and resource redeterminations and the results of continuing disability reviews are presented in section V.D. Section V.E presents information on certain incentive programs intended to encourage disabled SSI recipients to return to work.

Table IV.B3.—SSI Federally-Administered Terminations Due to Death, Calendar Years 1974-2032
[In thousands]

Calendar year	Blind or disabled, by age group					Aged, by age group			Totals ¹		All
	0-17	18-34	35-49	50-64	65-74	75 or older	65-74	75 or older	Blind or disabled	Aged	
Historical data:											
1974	2/	3	8	34	7	2	40	97	55	137	192
1975	1	5	12	35	10	2	39	108	65	147	212
1976	2	5	9	36	12	1	34	103	64	137	201
1977	1	5	12	30	15	1	36	101	65	137	203
1978	2	5	8	34	16	2	31	95	67	126	193
1979	2	6	9	32	18	2	29	92	67	121	189
1980	3	5	9	31	22	1	27	100	71	127	198
1981	3	5	8	31	24	2	21	92	73	112	186
1982	3	4	8	28	21	2	16	80	65	96	161
1983	3	6	8	25	21	3	15	79	65	94	158
1984	3	4	9	29	18	5	13	83	67	96	163
1985	2	6	10	29	24	6	17	84	77	101	178
1986	2	8	12	28	22	8	15	83	80	98	178
1987	3	8	13	30	23	10	15	82	87	97	184
1988	5	8	14	31	25	12	16	81	95	97	191
1989	3	8	16	33	23	12	15	78	95	93	187
1990	4	9	18	36	22	14	16	75	103	92	194
1991	4	9	20	39	23	17	17	74	112	91	203
1992	4	11	22	38	22	15	16	69	111	84	195
1993	6	13	27	41	23	17	16	72	127	88	215
1994	6	14	27	41	23	17	16	69	127	85	212
1995	6	13	30	43	24	18	16	65	135	81	216
1996	7	12	30	44	24	18	16	67	135	83	218
1997	5	10	24	43	24	19	15	64	127	79	206
1998	5	9	24	43	25	20	14	64	127	78	205
1999	5	9	25	45	25	21	13	63	131	76	207
2000	5	8	27	46	25	21	12	61	132	73	205
2001	5	8	28	47	25	22	11	60	135	71	207
2002	5	8	28	49	24	21	11	58	135	70	205
2003	5	9	28	51	26	21	10	56	138	66	204
2004	5	8	27	52	25	22	10	56	140	65	205
2005	5	8	28	54	25	22	9	54	141	63	204
2006	5	8	27	55	25	22	9	54	143	62	205
2007	5	8	26	57	25	23	8	54	145	62	207
Projected:											
2008	5	8	25	59	25	22	8	52	145	60	205
2009	5	9	25	62	26	24	8	52	151	59	210
2010	5	9	25	65	26	24	8	51	154	59	213
2011	5	10	24	67	26	25	8	51	156	59	215
2012	5	10	24	68	27	25	8	51	159	59	218
2013	5	10	23	70	28	26	8	51	161	59	220
2014	5	10	23	70	29	26	8	51	163	59	222
2015	5	10	23	71	30	27	8	50	164	59	223
2016	5	10	22	71	31	27	9	50	166	59	224
2017	5	10	22	71	32	27	9	50	167	59	226
2018	5	10	22	71	33	28	9	50	168	59	227
2019	5	10	22	70	34	28	10	50	169	59	228
2020	5	10	22	70	35	29	10	49	169	60	229
2021	4	10	22	69	36	29	10	50	170	60	230
2022	4	10	22	68	36	30	10	50	171	61	231
2023	4	10	22	67	37	31	11	51	171	61	233
2024	4	10	22	66	38	32	11	51	172	62	234
2025	4	10	22	65	38	33	11	52	172	63	236
2026	4	10	22	64	39	34	11	53	173	64	237
2027	4	10	23	63	39	35	11	54	173	65	239
2028	4	10	23	62	39	36	11	55	174	67	240
2029	4	10	23	62	39	37	11	57	174	68	242
2030	4	10	23	61	39	38	11	58	175	69	244
2031	4	10	23	61	38	40	11	60	175	71	246
2032	4	10	23	61	38	41	11	61	176	72	248

¹ Historical totals estimated based on 1-percent or 10-percent sample data.

² Fewer than 500.

Note: Totals do not necessarily equal the sums of rounded components. Historical split among age groups is estimated on a calendar year of age basis.

Table IV.B4.—SSI Federally-Administered Terminations Due to Reasons Other Than Death, Calendar Years 1974-2032
[In thousands]

Calendar year	Blind or disabled, by age group					Aged, by age group		Totals ¹			
	0-17	18-34	35-49	50-64	65-74	75 or older	65-74	75 or older	Blind or disabled	Aged	All
Historical data:											
1974	5	33	34	69	12	2	27	29	154	56	210
1975	7	50	44	104	15	2	88	91	221	180	401
1976	11	70	61	139	24	1	107	133	306	240	546
1977	13	65	56	110	19	1	76	92	265	168	433
1978	11	64	49	97	18	1	64	86	241	150	391
1979	12	59	43	96	23	1	58	85	234	144	378
1980	19	48	43	80	23	1	44	77	214	121	334
1981	17	43	39	72	21	1	49	86	192	134	326
1982	19	48	43	79	23	1	50	87	212	137	348
1983	18	43	36	63	14	1	25	61	175	86	261
1984	13	51	37	77	21	1	37	60	200	98	298
1985	11	42	37	68	13	2	23	54	172	77	249
1986	18	49	47	73	16	3	34	60	206	94	300
1987	19	51	48	75	17	3	32	57	214	89	302
1988	19	52	51	74	15	5	33	59	216	93	309
1989	19	55	52	72	16	4	33	58	218	91	308
1990	14	52	57	73	17	8	40	68	221	108	330
1991	20	50	70	84	18	5	33	58	248	91	339
1992	39	68	94	103	19	8	34	56	329	90	419
1993	34	73	97	106	22	8	37	55	340	92	433
1994	41	73	101	107	18	8	32	49	348	81	429
1995	47	81	111	115	20	7	32	48	382	80	461
1996	47	89	128	119	21	8	29	49	413	78	491
1997	128	105	147	115	18	8	24	40	522	64	586
1998	67	89	112	110	19	8	22	38	406	61	466
1999	119	111	120	116	20	9	24	43	495	68	563
2000	84	99	111	112	22	9	22	38	437	61	498
2001	65	95	111	118	20	9	22	38	418	60	478
2002	78	100	122	133	20	9	20	35	463	55	517
2003	72	95	122	135	20	9	20	36	453	56	509
2004	85	101	136	156	23	9	24	38	510	62	572
2005	64	101	129	157	20	8	15	30	479	45	524
2006	56	96	131	162	21	8	19	30	473	50	522
2007	46	108	124	160	20	8	18	29	466	48	513
Projected:											
2008	54	104	118	170	21	9	18	32	476	50	526
2009	54	95	112	169	20	8	20	33	459	53	513
2010	57	105	114	177	20	8	20	33	480	54	534
2011	52	112	112	180	21	9	21	33	486	54	540
2012	54	114	112	183	22	9	22	33	495	55	550
2013	59	125	117	192	23	10	23	34	526	57	583
2014	60	132	116	197	25	10	24	35	540	59	599
2015	58	137	115	198	26	11	25	36	547	61	607
2016	58	140	115	199	28	11	25	37	551	62	613
2017	62	143	117	201	29	12	26	38	564	64	628
2018	74	144	117	200	30	12	27	38	578	64	642
2019	84	145	119	201	32	13	28	38	593	65	658
2020	81	146	119	200	33	13	29	38	591	67	658
2021	79	146	119	200	34	13	30	39	591	69	659
2022	79	147	120	198	34	14	30	40	592	70	662
2023	78	148	122	196	35	14	31	41	594	72	666
2024	78	148	124	194	36	14	32	42	595	74	669
2025	78	148	126	192	37	15	32	43	597	75	672
2026	79	148	128	191	37	16	33	44	598	77	676
2027	79	148	130	189	38	16	33	46	600	79	679
2028	79	148	131	188	38	17	34	48	602	81	683
2029	80	149	132	188	38	17	34	49	604	83	687
2030	80	149	133	188	38	18	34	51	606	85	691
2031	80	150	134	189	38	19	34	52	609	86	695
2032	81	150	135	190	37	19	34	54	612	88	700

¹ Historical totals estimated based on 1-percent or 10-percent sample data.

Note: Totals do not necessarily equal the sums of rounded components. Historical split among age groups is estimated on a calendar year of age basis.

Table IV.B5.—SSI Federally-Administered Terminations for All Reasons, Calendar Years 1974-2032
[In thousands]

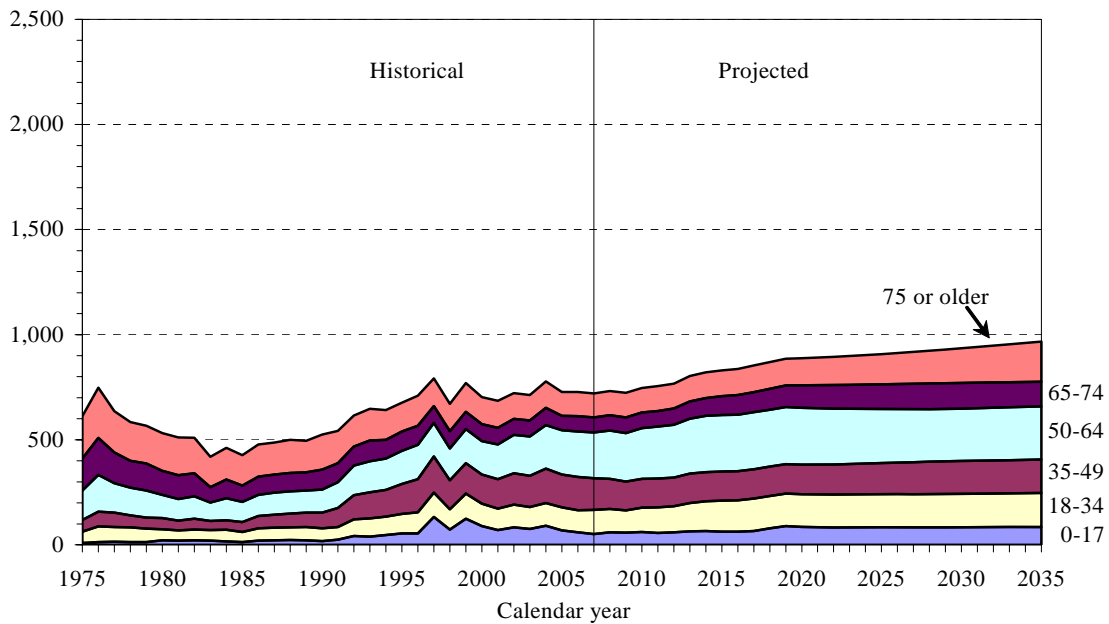
Calendar year	Blind or disabled, by age group					Aged, by age group			Totals ¹		
	0-17	18-34	35-49	50-64	65-74	75 or older	65-74	75 or older	Blind or disabled	Aged	All
Historical data:											
1974	5	36	42	103	19	4	67	126	209	193	402
1975	8	55	56	140	25	3	127	199	287	326	613
1976	13	75	71	174	35	3	141	236	371	377	748
1977	14	71	68	140	34	3	112	194	330	305	636
1978	14	70	58	130	34	3	94	181	308	276	584
1979	13	65	52	128	41	2	88	177	301	265	566
1980	22	53	52	111	45	2	70	177	284	248	532
1981	20	48	47	103	45	3	69	177	266	246	512
1982	21	52	51	107	43	2	65	168	277	233	510
1983	21	49	44	87	34	4	39	140	240	180	419
1984	16	55	46	106	39	6	50	144	267	194	461
1985	13	47	47	97	37	8	40	138	249	178	427
1986	21	58	59	101	38	11	48	143	287	192	478
1987	22	59	61	106	40	13	47	138	301	185	486
1988	24	60	65	105	39	18	49	140	311	189	500
1989	22	63	69	105	39	15	47	136	312	183	496
1990	18	61	75	109	39	22	56	144	324	200	524
1991	25	60	90	123	40	22	50	132	360	182	542
1992	42	78	115	140	41	23	50	125	440	175	614
1993	40	86	124	148	45	24	54	127	467	181	648
1994	47	87	128	148	41	24	48	118	475	166	642
1995	54	94	142	158	44	25	47	113	517	160	677
1996	54	101	158	163	45	27	45	116	548	161	710
1997	133	116	172	159	43	26	39	105	648	143	792
1998	73	98	136	153	44	29	36	102	533	138	671
1999	124	120	146	161	45	31	38	106	626	144	770
2000	89	107	138	159	46	29	35	99	569	134	703
2001	70	103	139	166	45	31	34	98	554	132	685
2002	83	108	150	182	44	30	31	93	598	124	722
2003	76	104	149	186	46	30	31	92	591	122	713
2004	90	109	163	208	48	31	34	93	650	127	777
2005	69	109	157	211	45	30	24	84	621	107	728
2006	61	104	158	217	46	31	28	84	615	112	727
2007	51	116	150	218	46	31	27	83	610	110	720
Projected:											
2008	60	112	143	229	46	31	26	84	622	110	732
2009	59	104	137	232	46	32	28	85	610	113	723
2010	62	115	138	241	46	33	28	85	634	113	747
2011	57	121	136	247	47	33	28	84	643	112	755
2012	59	124	136	251	49	34	30	84	654	113	768
2013	64	134	140	262	51	35	31	85	687	116	803
2014	65	142	139	267	54	36	32	86	703	118	821
2015	63	148	138	269	56	37	33	87	711	119	830
2016	63	150	138	270	59	38	34	87	717	121	838
2017	66	153	139	272	61	39	35	88	731	123	854
2018	79	154	139	271	63	40	36	87	746	123	869
2019	88	156	141	271	65	41	37	87	762	125	886
2020	85	156	141	270	67	41	39	87	760	126	887
2021	83	156	141	269	69	42	40	88	761	129	889
2022	83	157	142	266	71	44	41	90	763	131	894
2023	83	158	144	263	72	45	42	92	765	133	898
2024	83	158	146	260	74	46	42	93	767	136	903
2025	83	158	148	257	75	48	43	95	769	138	908
2026	83	158	151	255	76	49	44	98	771	141	913
2027	83	158	152	252	77	51	44	100	773	145	918
2028	83	158	154	250	77	53	45	103	776	148	924
2029	84	158	155	249	77	55	45	106	778	151	929
2030	84	159	156	249	77	56	45	109	781	154	935
2031	84	160	157	250	76	58	45	112	784	157	942
2032	84	160	157	251	75	60	45	116	788	160	948

¹ Historical totals estimated based on 1-percent or 10-percent sample data.

Note: Totals do not necessarily equal the sums of rounded components. Historical split among age groups is estimated on a calendar year of age basis.

Actual numbers of terminations declined in 2007 compared to 2006. This decline resulted from declines in the terminations for reasons other than death, which were offset in part by small increases in the terminations due to death. The decline in the terminations for reasons other than death were essentially due to reductions in the numbers of continuing disability reviews (CDRs) and nonmedical redeterminations processed due to constraints on Agency administrative resources. Some continued restraint on terminations over the next 10 years is expected due to continued resource limitations. Thereafter a gradual return to normal processing schedules for these reviews is assumed as resources are made available to SSA to carry out these legislatively mandated workloads.

Figure IV.B3.—SSI Federally-Administered Terminations by Age Group, Calendar Years 1975-2035
[In thousands]



Combining the number of persons coming on the SSI payment rolls during a year with the number of those already receiving benefits at the beginning of the year, and subtracting the number leaving the rolls during the year, yields the number of persons receiving Federally-administered SSI payments at the end of the specified period. Individuals receiving Federal SSI payments, who comprise the great majority of Federally-administered recipients, are presented in table IV.B6 and in figure IV.B4. The net effect of actual experience in 2007 was that the number of Federal SSI recipients at the end of 2007 was about 1.8 percent higher than the corresponding number at the end of 2006, but close to 1 percent lower than projected in last year's report.

Table IV.B6.—SSI Recipients with Federal Benefits in Current-Payment Status as of December, 1974-2032
[In thousands]

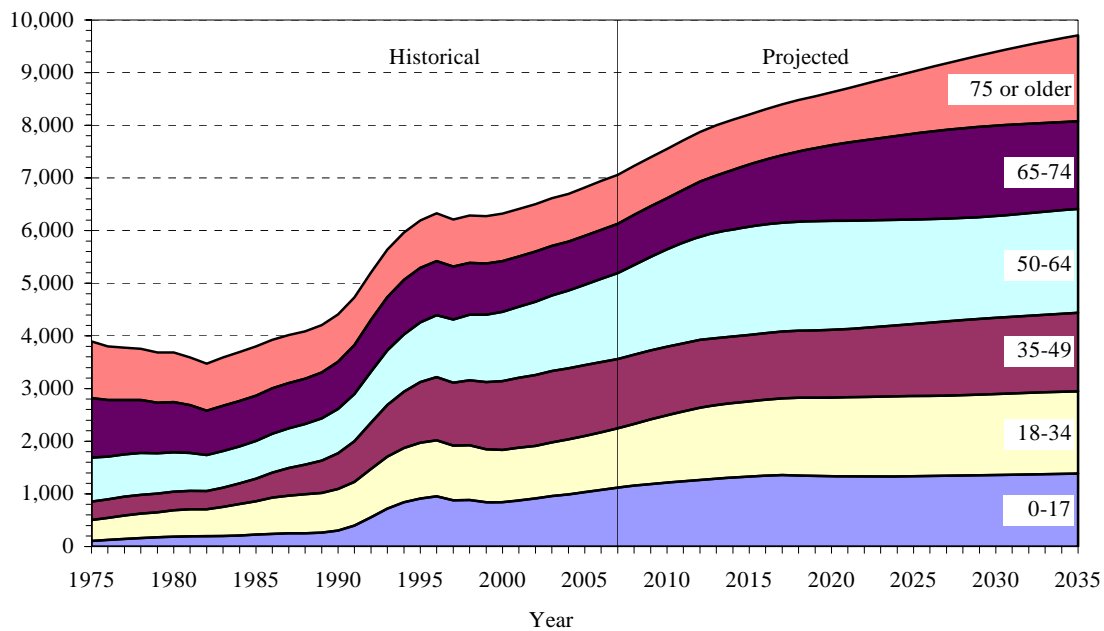
Year	Blind or disabled, by age group					Aged, by age group			Totals		
	0-17	18-34	35-49	50-64	65-74	75 or older	65-74	75 or older	Blind or disabled	Aged	All
Historical data:											
1974	70	338	321	756	109	13	1,010	1,019	1,606	2,029	3,635
1975	106	395	352	838	164	14	963	1,062	1,869	2,025	3,893
1976	124	420	352	813	208	14	864	1,003	1,932	1,867	3,799
1977	147	442	358	800	249	16	785	980	2,013	1,765	3,778
1978	165	460	361	791	277	16	728	958	2,069	1,686	3,755
1979	176	472	359	764	307	16	656	938	2,094	1,593	3,687
1980	188	500	351	750	342	17	609	925	2,149	1,533	3,682
1981	194	514	349	720	366	17	541	888	2,160	1,430	3,590
1982	191	517	346	683	386	21	459	871	2,144	1,329	3,473
1983	198	555	366	692	412	28	449	890	2,250	1,339	3,590
1984	210	595	393	700	406	48	463	884	2,352	1,347	3,699
1985	226	634	426	717	402	72	462	860	2,477	1,322	3,799
1986	240	688	475	739	397	91	465	827	2,630	1,291	3,922
1987	249	717	524	756	392	113	464	804	2,751	1,268	4,019
1988	254	738	564	774	387	127	468	777	2,844	1,245	4,089
1989	263	757	613	799	382	145	488	760	2,959	1,247	4,206
1990	306	788	677	840	389	156	508	749	3,156	1,257	4,412
1991	395	833	769	897	390	166	542	736	3,451	1,279	4,730
1992	555	920	877	970	402	173	577	727	3,898	1,304	5,202
1993	721	990	979	1,034	410	179	604	720	4,312	1,324	5,636
1994	839	1,032	1,071	1,089	425	182	610	716	4,638	1,326	5,965
1995	915	1,058	1,150	1,134	435	188	601	713	4,880	1,315	6,194
1996	954	1,066	1,198	1,176	444	192	586	711	5,029	1,296	6,326
1997	878	1,039	1,196	1,198	457	193	547	704	4,960	1,251	6,212
1998	885	1,038	1,238	1,243	464	197	521	705	5,063	1,226	6,289
1999	845	1,005	1,274	1,278	474	195	499	704	5,072	1,203	6,275

Table IV.B6.—SSI Recipients with Federal Benefits in Current-Payment Status as of December, 1974-2032 (Cont.)
[In thousands]

Year	Blind or disabled, by age group					Aged, by age group			Totals		
	0-17	18-34	35-49	50-64	65-74	75 or older	65-74	75 or older	Blind or disabled	Aged	All
Historical data: (Cont.)											
2000	844	994	1,303	1,313	484	196	483	703	5,134	1,186	6,320
2001	879	995	1,329	1,353	493	196	461	703	5,245	1,165	6,410
2002	912	1,002	1,344	1,394	502	200	447	705	5,354	1,152	6,505
2003	956	1,023	1,353	1,436	511	204	430	703	5,482	1,133	6,614
2004	990	1,044	1,350	1,476	515	208	412	699	5,584	1,111	6,695
2005	1,034	1,065	1,347	1,523	522	215	408	705	5,706	1,113	6,819
2006	1,076	1,095	1,334	1,575	529	220	405	704	5,830	1,109	6,939
2007	1,119	1,124	1,316	1,634	540	228	397	704	5,960	1,101	7,061
Projected:											
2008	1,156	1,172	1,313	1,704	552	231	399	700	6,128	1,098	7,227
2009	1,185	1,232	1,307	1,777	562	236	398	696	6,300	1,094	7,394
2010	1,211	1,283	1,300	1,850	571	243	401	695	6,457	1,095	7,552
2011	1,240	1,328	1,293	1,911	590	248	411	692	6,611	1,103	7,715
2012	1,268	1,367	1,287	1,962	616	255	428	691	6,754	1,119	7,873
2013	1,290	1,395	1,275	2,003	639	260	446	689	6,862	1,136	7,998
2014	1,309	1,413	1,263	2,034	665	264	468	687	6,949	1,154	8,103
2015	1,329	1,427	1,260	2,054	690	268	490	685	7,029	1,175	8,203
2016	1,347	1,441	1,265	2,065	719	271	513	684	7,107	1,197	8,305
2017	1,358	1,453	1,272	2,068	747	276	534	688	7,174	1,222	8,396
2018	1,353	1,469	1,280	2,069	775	282	555	695	7,227	1,251	8,478
2019	1,341	1,482	1,285	2,068	804	287	580	702	7,266	1,282	8,549
2020	1,335	1,493	1,289	2,066	835	291	606	710	7,308	1,316	8,624
2021	1,331	1,503	1,295	2,058	862	301	624	728	7,351	1,352	8,703
2022	1,329	1,513	1,308	2,043	886	313	635	755	7,392	1,390	8,782
2023	1,328	1,520	1,326	2,024	909	325	649	780	7,433	1,429	8,862
2024	1,331	1,523	1,347	2,004	931	337	663	806	7,472	1,469	8,941
2025	1,333	1,524	1,370	1,984	951	349	677	833	7,511	1,510	9,021
2026	1,337	1,524	1,392	1,965	968	362	690	861	7,548	1,551	9,099
2027	1,342	1,526	1,410	1,950	981	376	701	890	7,584	1,592	9,176
2028	1,348	1,528	1,426	1,937	992	390	710	921	7,620	1,631	9,252
2029	1,353	1,533	1,438	1,931	997	404	717	953	7,656	1,669	9,325
2030	1,358	1,538	1,447	1,933	997	419	720	985	7,691	1,705	9,396
2031	1,364	1,544	1,455	1,939	990	434	719	1,018	7,726	1,737	9,463
2032	1,370	1,549	1,463	1,949	982	448	715	1,051	7,761	1,766	9,527

Note: Totals do not necessarily equal the sums of rounded components. Historical split among age groups is estimated on a calendar year of age basis.

Figure IV.B4.—SSI Recipients with Federal Benefits in Current-Payment Status, by Age Group, as of December, 1975-2035
[In thousands]



As illustrated in figure IV.B4, the implementation of Public Law 104-121 and Public Law 104-193 resulted in a decline in the Federal recipient population from 1996 to 1997. From the end of 1997 through the end of 2000, the Federal SSI recipient population grew at an annual rate of less than 1 percent. Since 2000, the growth rate for the Federal SSI recipient population has averaged 1.6 percent per year. Our projections indicate that by 2018 we expect to gradually return to a modest growth rate of about 1 percent per year over the remainder of the 25-year projection period. In order to place this projected growth in the context of overall population growth, table IV.B7 and figure IV.B5 present Federal SSI recipients as percentages of selected Social Security Area population totals.

Table IV.B7.—SSI Recipients with Federal Benefits in Current-Payment Status as a Percentage of Selected Social Security Area Population Totals, as of December, 1974-2032

Year	Blind or disabled, by age group					Aged, by age group			Totals		
	0-17	18-34	35-49	50-64	65-74	75 or older	65-74	75 or older	Blind or disabled ¹	Aged ²	All ³
Historical data:											
1974	0.10	0.56	0.88	2.29	0.77	0.14	7.21	11.26	0.72	8.80	1.63
1975 .....	.15	.63	.97	2.51	1.14	.15	6.71	11.42	.83	8.56	1.73
1976 .....	.18	.65	.96	2.42	1.42	.14	5.90	10.46	.85	7.71	1.67
1977 .....	.22	.67	.97	2.36	1.66	.17	5.23	9.98	.88	7.11	1.65
1978 .....	.25	.68	.96	2.32	1.81	.16	4.75	9.50	.89	6.63	1.62
1979 .....	.27	.68	.94	2.23	1.97	.15	4.19	9.04	.90	6.13	1.58
1980 .....	.29	.71	.90	2.18	2.14	.16	3.82	8.68	.91	5.77	1.56
1981 .....	.30	.72	.87	2.09	2.26	.16	3.34	8.09	.91	5.26	1.50
1982 .....	.29	.71	.83	1.99	2.34	.19	2.78	7.70	.89	4.78	1.44
1983 .....	.30	.76	.85	2.02	2.46	.24	2.68	7.65	.92	4.72	1.47
1984 .....	.32	.81	.88	2.05	2.39	.40	2.73	7.40	.96	4.66	1.50
1985 .....	.35	.86	.92	2.11	2.32	.58	2.67	7.01	1.00	4.47	1.53
1986 .....	.37	.94	.99	2.18	2.26	.73	2.64	6.58	1.05	4.28	1.56
1987 .....	.38	.97	1.06	2.24	2.20	.87	2.59	6.25	1.09	4.12	1.59
1988 .....	.38	1.00	1.10	2.29	2.14	.97	2.59	5.89	1.11	3.98	1.60
1989 .....	.40	1.03	1.16	2.36	2.09	1.07	2.67	5.61	1.14	3.92	1.63
1990 .....	.45	1.08	1.24	2.47	2.10	1.12	2.74	5.40	1.21	3.88	1.69
1991 .....	.58	1.15	1.36	2.62	2.08	1.17	2.89	5.19	1.30	3.88	1.79
1992 .....	.80	1.29	1.51	2.79	2.12	1.19	3.05	5.00	1.46	3.89	1.94
1993	1.02	1.40	1.64	2.91	2.15	1.21	3.16	4.85	1.59	3.90	2.08
1994	1.17	1.48	1.75	3.02	2.22	1.20	3.19	4.72	1.70	3.87	2.18
1995	1.27	1.53	1.82	3.09	2.27	1.21	3.14	4.60	1.77	3.79	2.25
1996	1.31	1.55	1.86	3.11	2.33	1.21	3.07	4.48	1.80	3.71	2.27
1997	1.20	1.52	1.84	3.04	2.41	1.19	2.89	4.34	1.76	3.56	2.21
1998	1.20	1.52	1.88	3.05	2.46	1.19	2.77	4.27	1.78	3.47	2.21
1999	1.14	1.47	1.91	3.02	2.54	1.16	2.67	4.19	1.77	3.39	2.19
2000	1.14	1.45	1.94	3.00	2.60	1.14	2.59	4.10	1.77	3.32	2.18
2001	1.18	1.45	1.97	2.98	2.65	1.12	2.48	4.02	1.79	3.23	2.19
2002	1.22	1.45	1.99	2.97	2.69	1.12	2.40	3.97	1.81	3.16	2.20
2003	1.27	1.47	2.00	2.95	2.72	1.13	2.29	3.91	1.84	3.08	2.22
2004	1.31	1.49	1.99	2.93	2.71	1.14	2.17	3.83	1.85	2.98	2.22
2005	1.36	1.51	1.99	2.92	2.71	1.17	2.12	3.83	1.88	2.96	2.24
2006	1.41	1.54	1.97	2.92	2.69	1.19	2.06	3.81	1.90	2.91	2.26
2007	1.46	1.57	1.95	2.94	2.66	1.23	1.96	3.81	1.92	2.84	2.28
Projected:											
2008	1.51	1.61	1.96	2.98	2.62	1.25	1.90	3.79	1.96	2.78	2.31
2009	1.55	1.67	1.97	3.02	2.59	1.28	1.84	3.77	2.00	2.73	2.34
2010	1.58	1.72	1.98	3.06	2.57	1.31	1.80	3.75	2.03	2.69	2.37
2011	1.61	1.76	1.99	3.10	2.54	1.33	1.77	3.72	2.06	2.64	2.40
2012	1.64	1.80	1.99	3.14	2.51	1.36	1.74	3.69	2.09	2.59	2.43
2013	1.66	1.82	1.98	3.16	2.49	1.38	1.74	3.64	2.10	2.55	2.45
2014	1.67	1.83	1.97	3.17	2.48	1.38	1.75	3.59	2.11	2.51	2.46
2015	1.69	1.84	1.97	3.17	2.48	1.38	1.76	3.54	2.12	2.49	2.47
2016	1.70	1.85	1.96	3.17	2.48	1.38	1.77	3.47	2.12	2.46	2.48
2017	1.70	1.86	1.97	3.17	2.49	1.36	1.78	3.40	2.12	2.44	2.48
2018	1.69	1.87	1.97	3.17	2.50	1.35	1.80	3.34	2.12	2.42	2.49
2019	1.66	1.88	1.97	3.16	2.51	1.34	1.81	3.29	2.12	2.40	2.49
2020	1.64	1.89	1.97	3.16	2.51	1.33	1.82	3.25	2.11	2.39	2.49
2021	1.63	1.89	1.97	3.15	2.52	1.33	1.83	3.21	2.11	2.38	2.49
2022	1.62	1.89	1.98	3.14	2.54	1.32	1.82	3.17	2.10	2.37	2.50
2023	1.61	1.90	1.98	3.14	2.55	1.31	1.82	3.15	2.10	2.36	2.50
2024	1.60	1.90	1.99	3.14	2.56	1.31	1.82	3.13	2.09	2.36	2.50
2025	1.60	1.90	2.00	3.13	2.56	1.30	1.82	3.11	2.09	2.36	2.51
2026	1.59	1.90	2.00	3.13	2.56	1.30	1.83	3.10	2.08	2.37	2.51
2027	1.59	1.89	2.01	3.13	2.56	1.30	1.83	3.09	2.08	2.37	2.52
2028	1.59	1.89	2.01	3.12	2.56	1.30	1.83	3.08	2.08	2.37	2.52
2029	1.59	1.89	2.01	3.12	2.55	1.30	1.84	3.07	2.07	2.38	2.52
2030	1.59	1.89	2.02	3.12	2.55	1.30	1.84	3.06	2.07	2.39	2.53
2031	1.59	1.88	2.02	3.12	2.54	1.30	1.85	3.06	2.06	2.40	2.53
2032	1.59	1.88	2.02	3.12	2.54	1.30	1.85	3.05	2.06	2.42	2.53

¹ Blind or disabled recipients as a percentage of the total Social Security Area population.

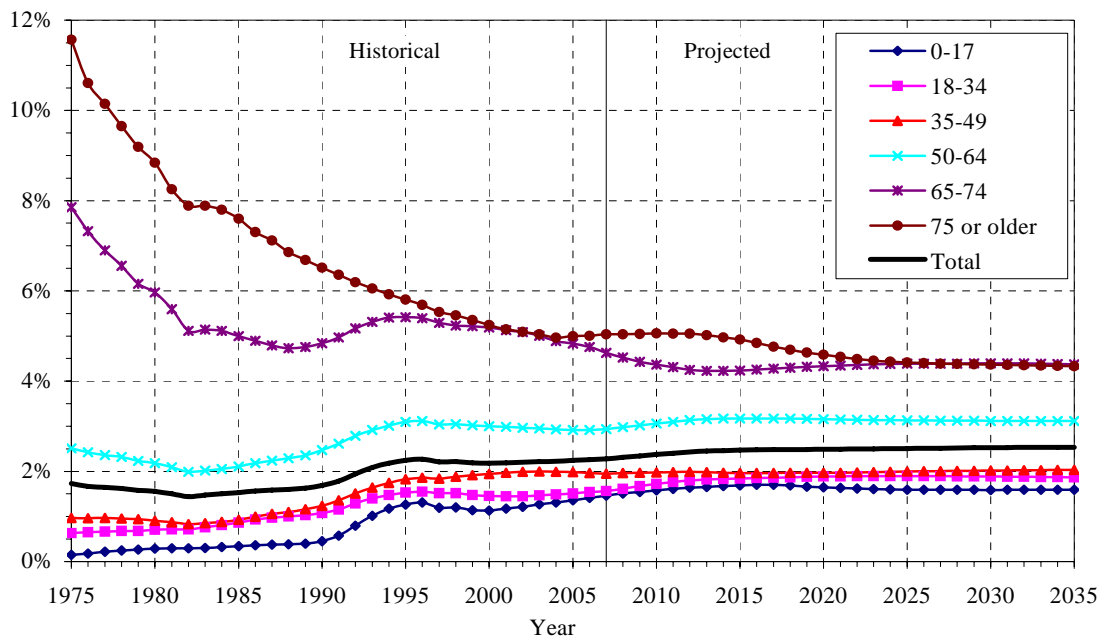
² Aged recipients as a percentage of the 65 or older Social Security Area population.

³ Total recipients as a percentage of the total Social Security Area population. Totals do not equal sums of components due to overlapping populations.

For the totals shown in table IV.B7, the percentages are calculated using the population age group totals corresponding to the age groups in the Federal recipient categories. Because the ratios for the separate recipient categories are computed as percentages of differing base populations, the percentage for the total SSI recipient population is not the arithmetic sum of the percentages for the respective recipient categories. As indicated in the table, the percentage of the total Social Security Area population who were receiving Federal SSI payments declined from 1975 through the early 1980s. In 1983, this percentage started increasing and continued to increase through 1996. Due to factors described previously, the percentage of the total population receiving Federal SSI payments declined in 1997, but leveled out over the next few years. It has increased slightly over the past few years and is expected to increase gradually over the projection period, due largely to the changing age distribution of the underlying population.

The various subcategories of Federal SSI recipients, however, follow significantly different growth patterns in relationship to their respective population totals. The aged Federal SSI recipient population declines steadily as a percentage of the 65 or older population throughout the historical period and most of the projection period, with the decline leveling off near the end of the projection period. In contrast, except for decreases in the late 1990s due to the eligibility redeterminations and continuing disability reviews mandated by Public Law 104-193, the number of blind or disabled children receiving Federal SSI payments increased steadily as a percentage of the under age 18 population, with the increase being quite steep in the early 1990s. The total blind or disabled Federal SSI recipient population as a percentage of the total population remained fairly level until the early 1980s when it started increasing and continued to increase through 1996. After the modest decrease in the late 1990s due to the implementation of legislation described in other sections, the number of blind or disabled persons receiving Federal SSI payments began a gradual increase as a percentage of the total population that is estimated to continue through 2015, reaching more than 2.1 percent of the total population. In the later years of the projection period, the percentage is expected to gradually decline under the assumption that SSA will receive the resources necessary to carry out the normal CDR and nonmedical redetermination workloads.

Figure IV.B5.—SSI Recipients with Federal Benefits in Current-Payment Status as a Percentage of Selected Social Security Area Population Age Groups, as of December, 1975-2035



Historical and projected numbers of individuals who receive only a Federally-administered State supplement are presented in table IV.B8.

Table IV.B8.—SSI Recipients with Federally-Administered State Supplementary Benefits Only, in Current-Payment Status as of December, 1974-2032

[In thousands]

Year	Blind or disabled, by age group					Aged, by age group		Totals			
	0-17	18-34	35-49	50-64	65-74	75 or older	65-74	75 or older	Blind or disabled	Aged	All
Historical data:											
1974	1	12	20	57	13	1	138	120	104	257	361
1975	1	15	25	74	21	2	144	138	139	282	421
1976	1	14	27	87	26	2	134	146	156	280	437
1977	1	16	27	94	35	2	136	150	174	286	460
1978	1	16	26	93	41	2	127	155	180	282	462
1979	1	18	25	89	49	2	121	157	184	278	462
1980	2	20	26	82	52	2	112	162	185	274	460
1981	1	19	26	75	58	2	94	155	181	248	429
1982	1	18	23	68	53	2	82	137	165	219	384
1983	1	17	19	50	44	4	65	111	136	176	312
1984	1	18	23	50	47	7	68	116	147	184	331
1985	1	21	28	53	45	8	67	115	157	182	339
1986	1	23	31	55	45	11	66	116	166	182	348
1987	1	26	36	60	43	12	72	115	178	187	366
1988	1	26	42	59	44	14	74	114	187	188	375
1989	2	28	45	60	45	16	76	115	195	192	387
1990	2	31	54	60	44	17	82	116	208	197	405
1991	2	29	54	59	42	17	78	108	203	186	389
1992	2	29	55	59	37	16	70	97	197	167	364
1993	2	29	58	59	34	15	64	88	197	151	348
1994	2	28	59	56	32	14	59	81	192	139	331
1995	3	25	59	56	32	14	54	77	188	131	320
1996	2	21	54	53	29	13	49	68	172	116	288
1997	2	20	55	53	29	13	46	65	172	111	283
1998	2	18	54	55	28	13	43	63	171	106	277
1999	2	18	57	58	28	13	43	62	177	105	282
2000	2	17	57	60	29	13	42	61	179	103	282
2001	2	17	56	62	29	12	41	59	179	100	278
2002	3	17	57	64	30	12	42	58	183	100	283
2003	3	18	58	67	30	12	42	58	188	100	288
2004	3	18	58	70	31	12	43	58	193	100	293
2005	3	18	56	73	31	12	44	58	193	102	295
2006	3	18	55	76	32	12	45	58	194	103	297
2007	2	18	53	77	32	12	46	57	195	103	298
Projected:											
2008	3	19	53	80	34	12	46	58	201	103	305
2009	3	20	53	84	35	12	46	58	207	105	311
2010	3	21	52	87	36	12	47	59	212	106	317
2011	3	22	52	91	37	12	48	60	217	108	325
2012	3	23	52	93	39	13	50	60	223	110	333
2013	3	23	52	96	41	13	52	60	229	112	340
2014	3	24	52	98	43	13	53	60	233	114	347
2015	3	24	52	99	44	14	55	60	237	115	352
2016	3	24	52	100	46	14	57	61	239	117	356
2017	3	24	52	100	47	14	58	61	241	119	360
2018	3	25	52	99	49	15	60	62	242	122	364
2019	3	25	52	99	50	15	62	63	245	125	370
2020	3	25	52	99	52	15	65	64	247	129	375
2021	3	25	52	99	53	16	66	66	249	132	381
2022	3	25	53	98	55	16	68	68	251	136	387
2023	3	26	53	97	56	17	69	71	253	140	393
2024	3	26	54	97	57	18	71	73	255	144	399
2025	3	26	55	96	59	18	72	76	257	148	405
2026	3	26	56	95	60	19	74	78	259	152	410
2027	3	26	57	94	60	20	75	81	260	156	416
2028	3	26	58	93	61	20	76	84	261	159	421
2029	3	26	58	93	61	21	76	87	263	163	426
2030	3	26	59	93	61	22	77	90	264	166	430
2031	3	26	59	93	61	23	76	93	265	169	434
2032	3	26	59	94	60	24	76	96	266	172	438

Note: Totals do not necessarily equal the sums of rounded components. Historical split among age groups is estimated on a calendar year of age basis.

The combined numbers of persons receiving either a Federal SSI payment or a Federally-administered State supplement are displayed in table IV.B9.

In examining the recent history of SSI participation and the projections of such participation in the near future, certain patterns are worth noting. The rapid increase in the total number of SSI participants in the early 1990s is a function of the growth in the numbers of disabled adults and children. The growth in the numbers of children receiving SSI resulted in large part from the Supreme Court decision in the case of

Sullivan v. Zebley, which greatly expanded the criteria used for determining disability for children. The growth in the numbers of disabled adults is a more complicated phenomenon which is not completely understood. However, extensive research conducted under contract to SSA and the Department of Health and Human Services suggested that this growth was the result of a combination of factors including (1) demographic trends, (2) a downturn in the economy in the late 1980s and early 1990s, (3) long-term structural changes in the economy, and (4) changes in other support programs (in particular the reduction or elimination of general assistance programs in certain States). The recent modest changes in program participation reflects the combined effects of recent legislation described in previous sections, along with changes in some of the factors mentioned above.

Table IV.B9.—SSI Recipients with Federally-Administered Benefits in Current-Payment Status as of December, 1974-2032
[In thousands]

Year	Blind or disabled, by age group					Aged, by age group			Totals		
	0-17	18-34	35-49	50-64	65-74	75 or older	65-74	75 or older	Blind or disabled	Aged	All
Historical data:											
1974	71	349	341	813	122	14	1,148	1,138	1,710	2,286	3,996
1975	107	410	378	911	185	16	1,107	1,200	2,007	2,307	4,314
1976	125	434	379	900	234	15	999	1,149	2,088	2,148	4,236
1977	147	458	385	893	284	18	921	1,130	2,187	2,051	4,238
1978	166	476	387	884	319	17	855	1,113	2,249	1,968	4,217
1979	177	490	384	852	357	17	777	1,095	2,278	1,872	4,150
1980	190	521	377	833	393	20	721	1,086	2,334	1,808	4,142
1981	195	533	375	795	424	19	635	1,043	2,341	1,678	4,019
1982	192	535	369	751	439	23	541	1,008	2,309	1,549	3,858
1983	198	572	386	742	456	32	514	1,001	2,386	1,515	3,901
1984	212	613	417	751	453	54	531	999	2,499	1,530	4,029
1985	227	655	454	769	447	80	530	975	2,634	1,504	4,138
1986	241	711	506	794	442	102	531	942	2,796	1,473	4,269
1987	251	743	560	816	436	124	536	920	2,930	1,455	4,385
1988	255	764	606	833	431	142	543	891	3,030	1,433	4,464
1989	265	785	658	859	427	160	564	875	3,154	1,439	4,593
1990	309	819	731	900	432	172	589	865	3,363	1,454	4,817
1991	397	863	823	956	432	183	620	845	3,654	1,465	5,118
1992	556	949	932	1,029	440	189	647	824	4,095	1,471	5,566
1993	723	1,019	1,036	1,093	445	194	667	808	4,509	1,475	5,984
1994	841	1,060	1,130	1,146	457	196	669	797	4,830	1,466	6,296
1995	917	1,083	1,209	1,190	467	202	656	790	5,068	1,446	6,514
1996	955	1,087	1,252	1,229	472	205	634	778	5,201	1,413	6,614
1997	880	1,059	1,251	1,252	486	205	593	770	5,133	1,362	6,495
1998	887	1,056	1,292	1,298	492	209	564	768	5,234	1,332	6,566
1999	847	1,024	1,331	1,336	503	208	543	765	5,249	1,308	6,557
2000	847	1,011	1,360	1,373	513	209	525	764	5,312	1,289	6,602
2001	882	1,012	1,385	1,415	522	209	502	762	5,424	1,264	6,688
2002	915	1,019	1,401	1,458	532	212	489	763	5,536	1,252	6,788
2003	959	1,040	1,410	1,503	541	216	471	761	5,670	1,233	6,902
2004	993	1,062	1,408	1,546	546	221	455	756	5,777	1,211	6,988
2005	1,036	1,083	1,404	1,596	553	228	452	763	5,900	1,214	7,114
2006	1,079	1,113	1,388	1,651	560	232	450	762	6,024	1,212	7,236
2007	1,121	1,142	1,369	1,711	572	240	443	761	6,155	1,205	7,360
Projected:											
2008	1,159	1,191	1,367	1,784	585	243	445	757	6,330	1,202	7,531
2009	1,188	1,251	1,360	1,861	597	248	444	755	6,506	1,199	7,706
2010	1,214	1,304	1,352	1,937	607	255	447	754	6,669	1,201	7,870
2011	1,244	1,350	1,345	2,002	628	261	459	752	6,828	1,211	8,039
2012	1,271	1,390	1,339	2,055	655	267	477	751	6,977	1,229	8,206
2013	1,293	1,418	1,327	2,099	680	273	498	749	7,091	1,247	8,338
2014	1,313	1,437	1,315	2,132	707	277	521	747	7,182	1,268	8,450
2015	1,333	1,451	1,312	2,153	735	282	545	745	7,266	1,290	8,556
2016	1,350	1,465	1,317	2,165	764	285	570	745	7,347	1,315	8,661
2017	1,361	1,477	1,324	2,168	794	290	592	750	7,415	1,342	8,756
2018	1,357	1,493	1,331	2,169	823	296	615	758	7,470	1,373	8,843
2019	1,345	1,507	1,336	2,167	854	302	642	765	7,511	1,407	8,918
2020	1,338	1,518	1,341	2,165	886	307	671	774	7,555	1,444	8,999
2021	1,335	1,529	1,348	2,157	915	316	690	794	7,600	1,484	9,084
2022	1,333	1,539	1,361	2,141	940	330	702	823	7,644	1,526	9,169
2023	1,332	1,546	1,380	2,122	965	342	718	851	7,686	1,569	9,255
2024	1,334	1,548	1,402	2,101	988	354	734	879	7,727	1,613	9,340
2025	1,336	1,550	1,425	2,079	1,010	367	750	908	7,767	1,658	9,425
2026	1,341	1,550	1,448	2,060	1,027	381	764	939	7,806	1,703	9,509
2027	1,346	1,551	1,467	2,044	1,041	395	776	971	7,844	1,747	9,592
2028	1,351	1,554	1,483	2,031	1,052	410	786	1,005	7,882	1,791	9,672
2029	1,356	1,558	1,496	2,024	1,059	425	793	1,040	7,918	1,832	9,751
2030	1,362	1,564	1,505	2,025	1,058	441	796	1,075	7,955	1,871	9,826
2031	1,367	1,570	1,514	2,033	1,051	456	796	1,111	7,991	1,906	9,897
2032	1,373	1,576	1,522	2,043	1,042	472	791	1,146	8,027	1,938	9,965

Note: Totals do not necessarily equal the sums of rounded components. Historical split among age groups is estimated on a calendar year of age basis.

C. FEDERAL PAYMENTS UNDER SSI

In order to estimate future amounts of Federal expenditures under SSI, the projected Federal benefit rates shown in table IV.A2 are first modified to reflect actual payment levels, taking into account historical and projected levels of adjustments for other actual or deemed income. Combining these actual payment levels with the projected numbers of persons receiving Federal SSI payments yields estimates of the amounts of Federal SSI payments. Historical amounts of such payments on a calendar year basis are shown in table IV.C1. For purposes of this presentation, these payment amounts are computed on a cash-flow basis consistent with the concepts used to define SSI obligations for the Federal Budget. As a result, for months after January 1978, SSI payments due on the first of the month are tabulated in the previous month, if the first of the month falls on a weekend or Federal holiday.¹

Table IV.C1.—SSI Federal Payments in Current Dollars,¹ Calendar Years 1974-2008
[In millions]

Calendar year	Blind or disabled, by age group					Aged, by age group			Totals		
	0-17	18-34	35-49	50-64	65-74	75 or older	65-74	75 or older	Blind or disabled	Aged	All
1974.....	\$40	\$438	\$452	\$968	\$135	\$17	\$825	\$958	\$2,050	\$1,783	\$3,833
1975.....	128	537	499	1,099	190	17	812	1,031	2,471	1,843	4,314
1976.....	176	605	541	1,147	241	17	762	1,023	2,727	1,785	4,512
1977.....	227	671	579	1,174	298	17	721	1,016	2,966	1,737	4,703
1978 ²	302	781	655	1,312	381	18	736	1,111	3,449	1,847	5,296
1979.....	340	809	650	1,296	429	21	667	1,093	3,546	1,760	5,306
1980.....	397	931	731	1,420	544	28	642	1,230	4,051	1,872	5,923
1981.....	458	1,079	821	1,542	654	32	643	1,320	4,586	1,963	6,549
1982.....	512	1,211	883	1,590	704	38	630	1,364	4,937	1,994	6,931
1983.....	574	1,372	985	1,704	774	58	624	1,440	5,466	2,064	7,530
1984.....	659	1,576	1,128	1,835	836	102	670	1,512	6,136	2,182	8,318
1985.....	736	1,709	1,250	1,924	833	160	699	1,499	6,611	2,198	8,809
1986.....	831	1,929	1,452	2,043	848	209	731	1,479	7,312	2,210	9,522
1987.....	900	2,081	1,618	2,157	846	259	765	1,444	7,860	2,210	10,069
1988.....	955	2,228	1,818	2,303	874	304	814	1,449	8,481	2,263	10,744
1989.....	1,025	2,431	2,048	2,481	936	366	881	1,479	9,286	2,361	11,647
1990.....	1,201	2,660	2,395	2,792	969	407	987	1,532	10,423	2,519	12,943
1991.....	1,678	3,129	2,966	3,305	1,060	463	1,169	1,637	12,601	2,806	15,407
1992.....	3,154	3,900	3,577	3,790	1,124	487	1,303	1,690	16,033	2,993	19,026
1993.....	3,909	4,465	4,164	4,188	1,208	513	1,471	1,759	18,447	3,230	21,677
1994.....	4,167	4,504	4,666	4,533	1,274	538	1,566	1,814	19,682	3,380	23,063
1995.....	4,657	4,777	5,155	4,896	1,357	565	1,599	1,900	21,407	3,499	24,906
1996.....	4,947	5,004	5,614	5,298	1,427	590	1,643	1,977	22,880	3,621	26,501
1997.....	4,920	5,031	5,564	5,410	1,505	614	1,586	2,046	23,044	3,632	26,675
1998.....	4,965	5,150	5,901	5,777	1,588	635	1,542	2,136	24,017	3,678	27,695
1999.....	4,835	5,132	6,185	6,037	1,660	654	1,503	2,206	24,503	3,709	28,212
2000.....	4,789	5,121	6,404	6,293	1,717	675	1,470	2,309	24,999	3,779	28,778
2001.....	5,104	5,354	6,817	6,783	1,838	713	1,470	2,454	26,608	3,924	30,532
2002.....	5,353	5,484	7,048	7,131	1,909	738	1,433	2,520	27,663	3,953	31,616
2003.....	5,686	5,715	7,243	7,532	1,984	771	1,408	2,601	28,932	4,009	32,941
2004.....	6,036	5,954	7,384	7,943	2,054	809	1,366	2,657	30,179	4,023	34,202
2005.....	6,488	6,291	7,624	8,437	2,148	871	1,358	2,778	31,859	4,136	35,995
2006.....	6,948	6,656	7,760	8,943	2,235	924	1,413	2,895	33,467	4,308	37,775
2007.....	7,346	7,067	7,871	9,539	2,333	981	1,406	2,970	35,137	4,376	39,514
2008 ³	7,848	7,577	8,066	10,299	2,464	1,041	1,430	3,060	37,295	4,490	41,785

¹ Total historical payments for 1974-77 agree with those presented in the *Annual Statistical Supplement to the Social Security Bulletin*. Total historical payments for 1978-83 are estimated.

² Includes 13 months of payments since payments due on January 1, 1978 and January 1, 1979 were both paid in calendar year 1978.

³ Partially estimated.

Note: Totals do not necessarily equal the sums of rounded components. Historical split among age groups is estimated on a calendar year of age basis.

Using this cash-flow concept causes these payments to differ from similar amounts shown in other Social Security Administration publications, such as the *Annual Statistical Supplement to the Social Security Bulletin*, in two main ways. First, the payments shown in the *Annual Statistical Supplement* are tabulated for

¹ Public Law 95-216, the Social Security Amendments of 1977, enacted December 20, 1977, added a statutory requirement that SSI payments, which are normally due on the first of the month, be delivered early when the normal delivery date falls on a Saturday, Sunday or Federal holiday. When the first of the month falls on a weekend or Federal holiday, all payments due on that day are paid in the previous month. Payments presented on a cash-flow basis are tabulated according to the month in which they are actually paid.

the month the payment is due, while the amounts shown in table IV.C1 are tabulated for the month they are actually paid. In particular, since January 1 of each year is a Federal holiday, SSI payments due on January 1 of years 1979 and later are actually paid in December of the previous year. Thus, for example, the calendar year 2007 payment amounts shown in table IV.C1 reflect payments made in January-December, 2007, and include the payments due on January 1, 2008 (which were actually paid in December, 2007), but not the payments due on January 1, 2007 (which were actually paid in December, 2006). Second, beginning in 1991, SSI obligations as accounted for in the Federal Budget are not reduced for certain recovered overpayments which are remitted directly to the Department of the Treasury. The payments shown in the *Annual Statistical Supplement* continue to report an amount which is reduced by such overpayment recoveries, as was done for the Budget prior to 1991.

Corresponding amounts of SSI outlays on a fiscal year¹ basis are presented in table IV.C2 for fiscal years 1978-2008. Fiscal years prior to 1978 are omitted from table IV.C2 since historical SSI payment amounts on a fiscal year basis for years prior to 1978 are not readily available. As with the calendar year figures, these fiscal year amounts are shown on a cash-flow basis. Consequently, fiscal years 1979 and later may contain 11, 12, or 13 months of payments, depending on whether October 1 of the current and succeeding fiscal years falls on a weekend.² Fiscal year 1978 contains 13 months of payments.

Table IV.C2.—SSI Federal Payments in Current Dollars, Fiscal Years 1978-2008
[In millions]

Fiscal year	Blind or disabled, by age group					Aged, by age group			Totals		
	0-17	18-34	35-49	50-64	65-74	75 or older	65-74	75 or older	Blind or disabled	Aged	All
1978.....	\$206	\$740	\$668	\$1,438	\$312	\$22	\$772	\$1,076	\$3,386	\$1,848	\$5,234
1979 ¹	226	711	620	1,265	331	20	656	954	3,172	1,610	4,782
1980.....	372	877	698	1,360	506	26	629	1,184	3,840	1,813	5,653
1981.....	442	1,039	797	1,508	625	31	647	1,307	4,442	1,954	6,396
1982.....	499	1,181	861	1,570	693	36	640	1,356	4,840	1,996	6,836
1983.....	596	1,416	1,024	1,783	806	56	660	1,510	5,680	2,170	7,850
1984 ¹	588	1,411	1,005	1,665	760	85	613	1,391	5,514	2,004	7,517
1985.....	713	1,662	1,215	1,895	828	145	691	1,502	6,459	2,193	8,652
1986.....	800	1,864	1,386	1,995	840	196	723	1,487	7,080	2,209	9,290
1987.....	880	2,030	1,565	2,119	845	242	755	1,448	7,681	2,203	9,884
1988.....	1,009	2,356	1,898	2,425	932	316	860	1,559	8,935	2,419	11,354
1989 ¹	1,012	2,378	1,997	2,452	910	345	862	1,473	9,094	2,335	11,430
1990 ¹	1,039	2,378	2,115	2,479	876	362	879	1,394	9,247	2,273	11,521
1991.....	1,519	2,975	2,772	3,141	1,032	447	1,120	1,608	11,886	2,728	14,614
1992.....	2,684	3,621	3,398	3,653	1,099	476	1,269	1,680	14,932	2,949	17,881
1993.....	3,817	4,377	3,977	4,033	1,175	502	1,420	1,730	17,880	3,150	21,029
1994.....	4,328	4,771	4,866	4,756	1,344	569	1,659	1,930	20,635	3,588	24,223
1995 ¹	4,554	4,719	5,031	4,822	1,341	560	1,596	1,884	21,027	3,480	24,507
1996 ¹	4,543	4,595	5,123	4,830	1,305	540	1,510	1,808	20,936	3,317	24,254
1997.....	4,933	5,004	5,529	5,340	1,478	606	1,602	2,027	22,890	3,629	26,519
1998.....	4,915	5,114	5,816	5,688	1,567	630	1,548	2,110	23,729	3,658	27,387
1999.....	4,901	5,152	6,123	5,975	1,638	648	1,506	2,180	24,438	3,685	28,123
2000.....	5,152	5,500	6,827	6,692	1,822	718	1,599	2,453	26,710	4,052	30,763
2001 ¹	4,597	4,869	6,170	6,125	1,670	652	1,352	2,236	24,083	3,588	27,671
2002.....	5,290	5,456	6,998	7,041	1,889	731	1,444	2,500	27,405	3,944	31,349
2003.....	5,558	5,623	7,170	7,390	1,957	759	1,417	2,572	28,456	3,989	32,445
2004.....	5,910	5,868	7,327	7,797	2,031	796	1,380	2,638	29,729	4,018	33,748
2005.....	6,856	6,669	8,150	8,928	2,282	916	1,463	2,945	33,800	4,409	38,208
2006 ¹	6,832	6,560	7,739	8,813	2,207	908	1,404	2,863	33,060	4,267	37,327
2007 ¹	6,659	6,427	7,207	8,630	2,135	895	1,297	2,731	31,952	4,028	35,981
2008.....	7,699	7,425	8,033	10,093	2,427	1,027	1,424	3,041	36,703	4,465	41,168

¹ Payment due on October 1 of fiscal year paid in previous fiscal year.

² Partially estimated.

Note: Totals do not necessarily equal the sums of rounded components. Historical split among age groups is estimated on a calendar year of age basis.

¹ Fiscal years 1977 and later cover the 12-month period ending September 30. For example, fiscal year 2008 payments include payments made from October 1, 2007 through September 30, 2008.

² Generally, for fiscal years 1979 and later, the number of months of payments included in the fiscal year is:

11 months if October 1 of the current, but not the succeeding fiscal year falls on a weekend;

12 months if October 1 of both the current and succeeding fiscal years falls during the week (all payments made in the fiscal year due);

12 months if October 1 of both the current and succeeding fiscal years falls on a weekend (both payments due on October 1 paid in preceding fiscal year); and

13 months if October 1 of the succeeding, but not current, fiscal year falls on a weekend.

When projecting dollar amounts over longer periods of time, the changing value of the dollar due to inflation can make meaningful comparisons of such amounts difficult. For this reason, in projecting SSI expenditures for 25 years, some means of removing inflation is generally desirable. The CPI, as discussed in section IV.A, is an appropriate means of standardizing projected SSI costs over time. Constant-dollar values of Federal SSI benefit payments (those adjusted by the CPI) are presented in table IV.C3 for both the historical period, calendar years 1974-2007, and the full 25-year projection period, 2008-32. This same information is presented in graphical form in figure IV.C1. Projections of the CPI used for this standardization are based on the intermediate economic assumptions of the 2008 OASDI Trustees Report.

The future growth in the “constant dollar” estimates is primarily attributable to the underlying growth in the U.S. population as shown in table IV.A1. However, an additional contributing factor is the projected growth in the number of SSI recipients as a percent of the population, as shown in table IV.B7.

Figure IV.C1.—SSI Federal Payments, by Age Group, in Constant 2008 Dollars, Calendar Years 1975-2035
[In billions]

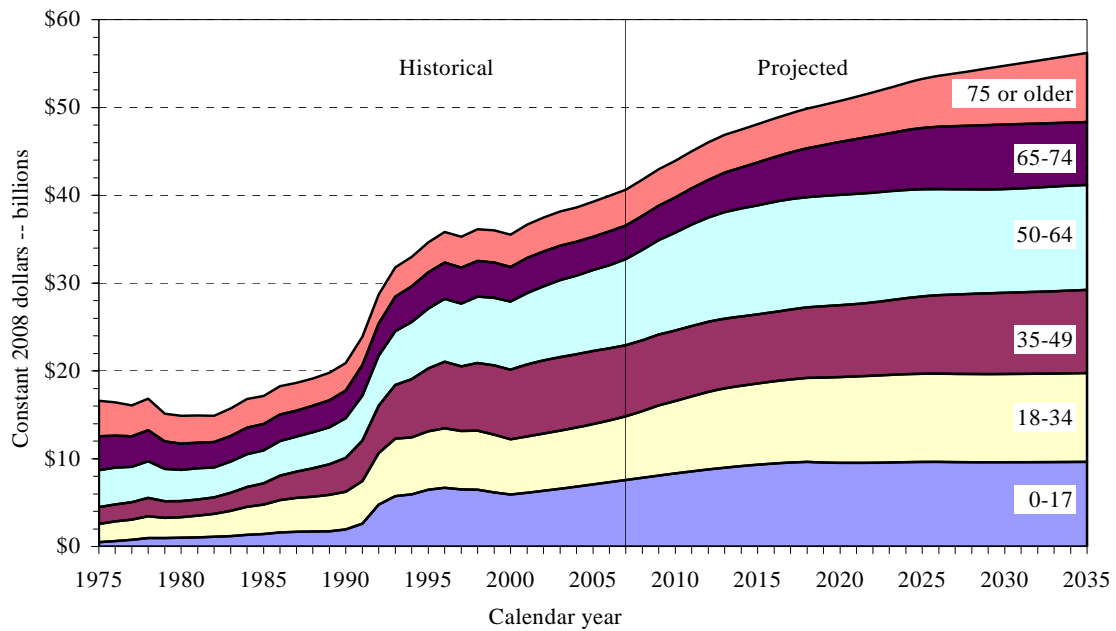


Table IV.C3.—SSI Federal Payments in Constant 2008 Dollars, Calendar Years 1974-2032
[Payment amounts in millions]

Calendar year	Adjusted ¹ CPI	Blind or disabled, by age group					Aged, by age group			Totals		
		0-17	18-34	35-49	50-64	65-74	75 or older	65-74	75 or older	Blind or disabled	Aged	All
Historical data:												
1974.....	23.80	\$169	\$1,838	\$1,898	\$4,068	\$568	\$73	\$3,466	\$4,024	\$8,614	\$7,489	\$16,103
1975.....	25.98	494	2,067	1,920	4,228	731	67	3,126	3,967	9,508	7,093	16,601
1976.....	27.47	640	2,204	1,970	4,176	878	61	2,774	3,725	9,928	6,499	16,427
1977.....	29.25	778	2,293	1,979	4,015	1,017	59	2,466	3,472	10,141	5,938	16,079
1978 ²	31.48	961	2,480	2,080	4,168	1,212	58	2,337	3,530	10,958	5,868	16,825
1979.....	35.07	969	2,308	1,854	3,696	1,225	60	1,901	3,117	10,111	5,018	15,129
1980.....	39.80	998	2,339	1,837	3,567	1,367	70	1,613	3,090	10,178	4,703	14,880
1981.....	43.88	1,044	2,458	1,870	3,515	1,491	72	1,465	3,009	10,450	4,474	14,924
1982.....	46.51	1,102	2,603	1,898	3,417	1,513	82	1,354	2,933	10,615	4,287	14,902
1983.....	47.92	1,197	2,863	2,055	3,555	1,615	121	1,302	3,004	11,406	4,306	15,712
1984.....	49.56	1,330	3,180	2,276	3,702	1,687	205	1,352	3,051	12,380	4,403	16,783
1985.....	51.32	1,434	3,329	2,435	3,750	1,623	311	1,362	2,920	12,883	4,282	17,165
1986.....	52.12	1,595	3,702	2,787	3,920	1,627	401	1,402	2,838	14,031	4,240	18,271
1987.....	53.99	1,666	3,854	2,997	3,994	1,567	480	1,418	2,675	14,558	4,093	18,650
1988.....	56.14	1,701	3,969	3,238	4,102	1,557	541	1,451	2,581	15,109	4,031	19,140
1989.....	58.84	1,743	4,131	3,480	4,216	1,591	621	1,498	2,514	15,782	4,012	19,794
1990.....	61.94	1,939	4,295	3,867	4,508	1,564	656	1,594	2,473	16,829	4,067	20,896
1991.....	64.44	2,604	4,856	4,603	5,129	1,646	718	1,814	2,541	19,555	4,355	23,910
1992.....	66.31	4,756	5,882	5,394	5,716	1,695	735	1,965	2,549	24,177	4,513	28,690
1993.....	68.19	5,733	6,548	6,107	6,142	1,772	752	2,158	2,579	27,054	4,737	31,791
1994.....	69.91	5,961	6,443	6,674	6,485	1,822	770	2,241	2,595	28,155	4,835	32,990
1995.....	71.88	6,479	6,645	7,172	6,811	1,888	786	2,225	2,643	29,780	4,868	34,648
1996.....	73.99	6,686	6,764	7,588	7,160	1,929	797	2,221	2,672	30,924	4,894	35,818
1997.....	75.63	6,506	6,652	7,358	7,154	1,990	812	2,097	2,705	30,470	4,802	35,272
1998.....	76.63	6,479	6,721	7,701	7,539	2,072	829	2,012	2,787	31,339	4,799	36,139
1999.....	78.35	6,171	6,550	7,893	7,706	2,119	834	1,918	2,816	31,273	4,734	36,007
2000.....	81.07	5,908	6,316	7,900	7,763	2,118	833	1,813	2,849	30,838	4,662	35,499
2001.....	83.29	6,128	6,428	8,185	8,144	2,206	856	1,765	2,946	31,947	4,712	36,659
2002.....	84.42	6,341	6,496	8,349	8,447	2,261	874	1,697	2,985	32,769	4,683	37,451
2003.....	86.31	6,588	6,621	8,393	8,727	2,299	894	1,631	3,013	33,522	4,645	38,167
2004.....	88.55	6,816	6,724	8,339	8,970	2,319	914	1,543	3,001	34,081	4,543	38,625
2005.....	91.67	7,077	6,863	8,317	9,204	2,344	950	1,481	3,031	34,756	4,512	39,268
2006.....	94.63	7,341	7,034	8,201	9,451	2,363	976	1,493	3,060	35,367	4,553	39,920
2007.....	97.27	7,552	7,265	8,092	9,806	2,398	1,009	1,445	3,054	36,122	4,499	40,621
Projected:												
2008.....	100.00	7,848	7,577	8,066	10,299	2,464	1,041	1,430	3,060	37,295	4,490	41,785
2009.....	102.50	8,113	7,942	8,067	10,750	2,517	1,069	1,431	3,075	38,458	4,506	42,964
2010.....	105.35	8,310	8,263	8,031	11,168	2,558	1,100	1,435	3,083	39,429	4,518	43,947
2011.....	108.30	8,541	8,562	8,016	11,549	2,656	1,130	1,464	3,085	40,455	4,549	45,004
2012.....	111.33	8,782	8,815	7,996	11,862	2,779	1,165	1,516	3,092	41,399	4,607	46,006
2013.....	114.45	8,985	9,025	7,953	12,138	2,897	1,198	1,584	3,097	42,197	4,681	46,878
2014.....	117.65	9,145	9,153	7,883	12,316	3,020	1,221	1,659	3,098	42,738	4,757	47,495
2015.....	120.95	9,309	9,248	7,873	12,429	3,148	1,246	1,738	3,104	43,252	4,842	48,094
2016.....	124.33	9,466	9,346	7,917	12,497	3,288	1,268	1,825	3,115	43,782	4,940	48,722
2017.....	127.81	9,577	9,445	7,984	12,528	3,430	1,299	1,902	3,144	44,263	5,046	49,309
2018.....	131.39	9,618	9,565	8,059	12,554	3,574	1,334	1,982	3,184	44,702	5,166	49,868
2019.....	135.07	9,579	9,667	8,116	12,562	3,725	1,365	2,072	3,223	45,014	5,295	50,309
2020.....	138.85	9,544	9,754	8,170	12,574	3,882	1,395	2,171	3,266	45,319	5,436	50,756
2021.....	142.74	9,539	9,843	8,238	12,556	4,025	1,448	2,237	3,356	45,650	5,592	51,242
2022.....	146.74	9,538	9,921	8,340	12,479	4,152	1,517	2,274	3,483	45,947	5,757	51,704
2023.....	150.85	9,558	9,998	8,494	12,407	4,286	1,583	2,328	3,606	46,326	5,934	52,260
2024.....	155.07	9,593	10,036	8,657	12,313	4,410	1,651	2,382	3,730	46,661	6,112	52,773
2025.....	159.41	9,619	10,052	8,815	12,200	4,520	1,718	2,436	3,857	46,924	6,293	53,217
2026.....	163.88	9,633	10,050	8,961	12,090	4,609	1,789	2,486	3,999	47,132	6,485	53,617
2027.....	168.46	9,615	10,028	9,060	11,972	4,671	1,860	2,529	4,146	47,206	6,676	53,882
2028.....	173.18	9,606	10,020	9,145	11,876	4,719	1,932	2,565	4,300	47,298	6,865	54,163
2029.....	178.03	9,603	10,025	9,209	11,819	4,746	2,007	2,592	4,460	47,409	7,052	54,461
2030.....	183.02	9,602	10,039	9,256	11,810	4,742	2,082	2,609	4,622	47,531	7,231	54,762
2031.....	188.14	9,601	10,052	9,292	11,827	4,709	2,157	2,610	4,788	47,638	7,398	55,036
2032.....	193.41	9,609	10,073	9,333	11,876	4,667	2,235	2,601	4,960	47,793	7,561	55,354

¹ The adjusted CPI is the CPI-W indexed to calendar year 2008. Projections of the adjusted CPI are based on the intermediate economic assumptions of the 2008 OASDI Trustees Report.

² Payment amounts include 13 months of payments since payments due on January 1, 1978 and January 1, 1979 were both paid in calendar year 1978.

Note: Totals do not necessarily equal the sums of rounded components. Historical split among age groups is estimated on a calendar year of age basis.

Although detailed projections of SSI State supplementary payments are not prepared, historical information on the amounts of such supplements administered by SSA is presented in table IV.C4. These amounts are consistent with those presented in the *Annual Statistical Supplement to the Social Security Bulletin* and are shown only for the two broad recipient categories.

**Table IV.C4.—SSI Federally-Administered State Supplementary Payments
in Current Dollars, Calendar Years 1974-2007**

[In millions]

Calendar year	Aged	Blind or disabled	Total
1974	\$631	\$632	\$1,264
1975	674	729	1,403
1976	635	753	1,388
1977	627	804	1,431
1978	636	855	1,491
1979	661	928	1,590
1980	757	1,091	1,848
1981	731	1,108	1,839
1982	694	1,104	1,798
1983	645	1,066	1,711
1984	645	1,148	1,792
1985	694	1,278	1,973
1986	759	1,484	2,243
1987	849	1,714	2,563
1988	873	1,798	2,671
1989	954	2,001	2,955
1990	1,038	2,201	3,239
1991	999	2,232	3,231
1992	1,023	2,412	3,435
1993	934	2,336	3,270
1994	876	2,240	3,116
1995	864	2,253	3,118
1996	833	2,155	2,988
1997	824	2,090	2,913
1998	838	2,165	3,003
1999	921	2,380	3,301
2000	943	2,439	3,381
2001	956	2,505	3,460
2002	1,051	2,768	3,820
2003	1,098	2,906	4,005
2004	1,133	3,045	4,178
2005	1,128	3,050	4,178
2006	1,147	3,006	4,153
2007 ¹	1,187	3,133	4,320

¹ Split between recipient categories is a preliminary estimate.

Note: Totals do not necessarily equal the sums of rounded components.

Historical information on State-administered State supplementary payments was previously included in this report, but is no longer included since complete data for all States is generally not available. Information on selected characteristics of State assistance programs for SSI recipients can be found in the Social Security Administration publication, *State Assistance Programs for SSI Recipients*, January 2007.¹

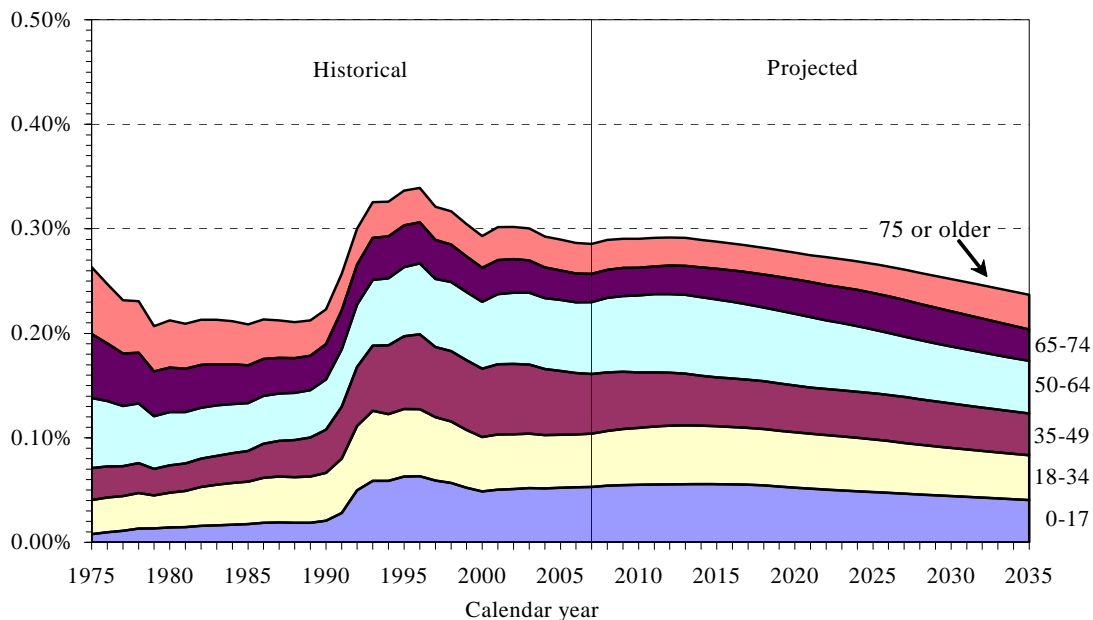
¹ Publication No. 13-11975, prepared by the Office of Research, Evaluation, and Statistics, is available on the internet at http://www.socialsecurity.gov/policy/docs/progdesc/ssi_st_asst/2007.

D. FEDERAL SSI PAYMENTS AS A PERCENTAGE OF GROSS DOMESTIC PRODUCT

For SSI, an appropriate relative measure of program costs is produced by comparing estimated annual SSI costs to the Gross Domestic Product (GDP)¹. In addition to providing an inflation-independent measure of the cost of the SSI program, this provides a useful perspective on the proportion of the total output of the U.S. economy needed to provide Federal SSI benefits. As is shown in table IV.D1 and figure IV.D1, the total cost of the SSI program is projected to be relatively constant through 2013 and then decline afterwards, relative to GDP.

Table IV.D1 and figure IV.D1 present a concise summary of Federal expenditures under the SSI program. Following the initial higher costs of the program, total Federal SSI payments during the 1980s were a fairly constant percentage of GDP (0.21 percent). During the early 1990s, SSI experienced rather rapid growth (to 0.34 percent of GDP in 1996) due to a combination of factors discussed earlier in section IV. Legislation enacted in 1996² resulted in a drop in the cost of SSI as a percentage of GDP beginning in 1997 and continuing through 2000. The share of GDP devoted to Federal SSI expenditures increased slightly after the turn of the century in part in response to a slowdown in economic growth over that period, but resumed its very gradual downward trend after 2002 due to relatively slower growth in SSI participation. In the future, Federal SSI expenditures, after adjusting for growth in prices, are projected to grow slightly faster than the population due to some estimated growth in the SSI recipient population as a percentage of the overall U.S. population, as discussed previously in section IV.C. However, since the real growth projected for GDP under the 2008 Trustees Report intermediate assumptions is greater than the effect of these projected increases in SSI participation, Federal SSI payments are projected to decline as a percentage of GDP over the next 25 years, reaching 0.25 percent of GDP by 2032.

Figure IV.D1.—SSI Federal Payments, by Age Group, as a Percentage of GDP, Calendar Years 1975-2035



¹ The total value of goods and services produced in the United States.

²Public Law 104-121 and Public Law 104-193.

Table IV.D1.—SSI Federal Payments as a Percentage of GDP, Calendar Years 1974-2032

Calendar year	GDP ¹ (In billions)	Blind or disabled, by age group					Aged, by age group			Totals		
		0-17	18-34	35-49	50-64	65-74	75 or older	65-74	75 or older	Blind or disabled	Aged	All
Historical data:												
1974	\$1,500	0.003	0.029	0.030	0.065	0.009	0.001	0.055	0.064	0.137	0.119	0.256
1975	1,638	.008	.033	.030	.067	.012	.001	.050	.063	.151	.112	.263
1976	1,825	.010	.033	.030	.063	.013	.001	.042	.056	.149	.098	.247
1977	2,031	.011	.033	.029	.058	.015	.001	.036	.050	.146	.086	.232
1978	2,295	.013	.034	.029	.057	.017	.001	.032	.048	.150	.080	.231
1979	2,563	.013	.032	.025	.051	.017	.001	.026	.043	.138	.069	.207
1980	2,790	.014	.033	.026	.051	.020	.001	.023	.044	.145	.067	.212
1981	3,128	.015	.034	.026	.049	.021	.001	.021	.042	.147	.063	.209
1982	3,255	.016	.037	.027	.049	.022	.001	.019	.042	.152	.061	.213
1983	3,537	.016	.039	.028	.048	.022	.002	.018	.041	.155	.058	.213
1984	3,933	.017	.040	.029	.047	.021	.003	.017	.038	.156	.055	.211
1985	4,220	.017	.040	.030	.046	.020	.004	.017	.036	.157	.052	.209
1986	4,463	.019	.043	.033	.046	.019	.005	.016	.033	.164	.050	.213
1987	4,739	.019	.044	.034	.046	.018	.005	.016	.033	.166	.047	.212
1988	5,104	.019	.044	.036	.045	.017	.006	.016	.028	.166	.044	.211
1989	5,484	.019	.044	.037	.045	.017	.007	.016	.027	.169	.043	.212
1990	5,803	.021	.046	.041	.048	.017	.007	.017	.026	.180	.043	.223
1991	5,996	.028	.052	.049	.055	.018	.008	.019	.027	.210	.047	.257
1992	6,338	.050	.062	.056	.060	.018	.008	.021	.027	.253	.047	.300
1993	6,657	.059	.067	.063	.063	.018	.008	.022	.026	.277	.049	.326
1994	7,072	.059	.064	.066	.064	.018	.008	.022	.026	.278	.048	.326
1995	7,398	.063	.065	.070	.066	.018	.008	.022	.026	.289	.047	.337
1996	7,817	.063	.064	.072	.068	.018	.008	.021	.025	.293	.046	.339
1997	8,304	.059	.061	.067	.065	.018	.007	.019	.025	.277	.044	.321
1998	8,747	.057	.059	.067	.066	.018	.007	.018	.024	.275	.042	.317
1999	9,268	.052	.055	.067	.065	.018	.007	.016	.024	.264	.040	.304
2000	9,817	.049	.052	.065	.064	.017	.007	.015	.024	.255	.038	.293
2001	10,128	.050	.053	.067	.067	.018	.007	.015	.024	.263	.039	.301
2002	10,470	.051	.052	.067	.068	.018	.007	.014	.024	.264	.038	.302
2003	10,961	.052	.052	.066	.069	.018	.007	.013	.024	.264	.037	.301
2004	11,686	.052	.051	.063	.068	.018	.007	.012	.023	.258	.034	.293
2005	12,434	.052	.051	.061	.068	.017	.007	.011	.022	.256	.033	.289
2006	13,195	.053	.050	.059	.068	.017	.007	.011	.022	.254	.033	.286
2007	13,841	.053	.051	.057	.069	.017	.007	.010	.021	.254	.032	.285
Projected:												
2008	14,445	.054	.052	.056	.071	.017	.007	.010	.021	.258	.031	.289
2009	15,163	.055	.054	.055	.073	.017	.007	.010	.021	.260	.030	.290
2010	15,944	.055	.055	.053	.074	.017	.007	.009	.020	.261	.030	.290
2011	16,733	.055	.055	.052	.075	.017	.007	.009	.020	.262	.029	.291
2012	17,554	.056	.056	.051	.075	.018	.007	.010	.020	.263	.029	.292
2013	18,418	.056	.056	.049	.075	.018	.007	.010	.019	.262	.029	.291
2014	19,313	.056	.056	.048	.075	.018	.007	.010	.019	.260	.029	.289
2015	20,227	.056	.055	.047	.074	.019	.007	.010	.019	.259	.029	.288
2016	21,189	.056	.055	.046	.073	.019	.007	.011	.018	.257	.029	.286
2017	22,192	.055	.054	.046	.072	.020	.007	.011	.018	.255	.029	.284
2018	23,232	.054	.054	.046	.071	.020	.008	.011	.018	.253	.029	.282
2019	24,315	.053	.054	.045	.070	.021	.008	.012	.018	.250	.029	.279
2020	25,440	.052	.053	.045	.069	.021	.008	.012	.018	.247	.030	.277
2021	26,612	.051	.053	.044	.067	.022	.008	.012	.018	.245	.030	.275
2022	27,833	.050	.052	.044	.066	.022	.008	.012	.018	.242	.030	.273
2023	29,106	.050	.052	.044	.064	.022	.008	.012	.019	.240	.031	.271
2024	30,438	.049	.051	.044	.063	.022	.008	.012	.019	.238	.031	.269
2025	31,826	.048	.050	.044	.061	.023	.009	.012	.019	.235	.032	.267
2026	33,277	.047	.049	.044	.060	.023	.009	.012	.020	.232	.032	.264
2027	34,790	.047	.049	.044	.058	.023	.009	.012	.020	.229	.032	.261
2028	36,373	.046	.048	.044	.057	.022	.009	.012	.020	.225	.033	.258
2029	38,034	.045	.047	.043	.055	.022	.009	.012	.021	.222	.033	.255
2030	39,773	.044	.046	.043	.054	.022	.010	.012	.021	.219	.033	.252
2031	41,599	.043	.045	.042	.053	.021	.010	.012	.022	.215	.033	.249
2032	43,512	.043	.045	.041	.053	.021	.010	.012	.022	.212	.034	.246

¹ Projected values based on the intermediate economic assumptions of the 2008 OASDI Trustees Report.

Note: Totals do not necessarily equal the sums of rounded components. Historical GDP amounts subject to revision.

**E. THE SSI PROGRAM'S SHARE OF SSA'S ADMINISTRATIVE COSTS
AND BENEFICIARY SERVICES COSTS**

The SSI program is administered by the Social Security Administration, but unlike the OASDI program, is funded from general revenues. SSA was given responsibility for the SSI program when it was created in 1972 because of the Agency's existing field office network and its administrative and automated data processing capabilities. Because of the integration of the administration of the SSI and OASDI programs, it is more practical to fund them from a single source. The trust funds and the general fund pay their appropriate share of administrative expenses through SSA's Limitation on Administrative Expenses (LAE) account, which in turn funds the total operating expenses of the Agency. The appropriate share of administrative expenses borne by each funding source is determined based on a Government Accountability Office approved method of cost analysis, with a final settlement of costs by the end of the subsequent fiscal year. If necessary, section 201(g)(1) of the Social Security Act provides that SSI administrative expenses, including Federal administration of State supplementation payments, may be financed from the Social Security trust funds with reimbursement, including any interest lost, to the trust funds from general revenues.

The SSI program also provides beneficiary services to recipients through State Vocational Rehabilitation (VR) agencies and Employment Networks for VR services and payments under the Ticket to Work program. For SSI recipients, the objective of VR is to help disabled individuals achieve and sustain productive, self-supporting work activity.

Table IV.E1.—Selected SSI Costs, Fiscal Years 1978-2008
[Outlays in millions]

Fiscal year	SSI Administrative expenses ¹	Beneficiary services ²
1978.....	\$539	\$31.6
1979.....	611	57.0
1980.....	668	33.1
1981.....	717	37.3
1982.....	780	12.0
1983.....	846	8.0
1984.....	864	³ 84.0
1985.....	956	3.0
1986.....	1,023	7.2
1987.....	977	9.5
1988.....	976	12.9
1989.....	1,052	20.0
1990.....	1,075	28.3
1991.....	1,230	33.1
1992.....	1,426	36.0
1993.....	1,468	32.3
1994.....	1,780	33.8
1995.....	1,978	48.2
1996.....	1,953	71.8
1997.....	2,055	77.3
1998.....	2,304	46.0
1999.....	2,493	52.0
2000.....	2,321	53.7
2001.....	2,397	43.9
2002.....	2,522	54.0
2003.....	2,656	37.0
2004.....	2,806	38.6
2005.....	2,795	30.4
2006.....	2,916	38.9
2007.....	2,857	36.1
2008 (estimated).....	3,142	106.0

¹ Includes user fees charged to participating States to reimburse SSA for the costs of administering their SSI State Supplementation program.

² Payments for referral and monitoring services for Drug Addicts and Alcoholics are included through December 1996; these payments were terminated effective January 1997. The increase in the estimate for fiscal year 2008 assumed an increase in Ticket to Work activity and an improvement in State budgets that would have enabled States to serve additional beneficiaries.

³ Reflects a one-time payment to State VR agencies for prior year expenses.

V. APPENDICES

A. HISTORY OF PROVISIONS

Act

1. Basic Eligibility Requirements

1972

*Public Law 92-603,
enacted October 30*

An individual may qualify for payments on the basis of age, blindness, or disability.

Aged: Any person aged 65 or older.

Blind: Any person with 20/200 or less vision in the better eye with the use of a correcting lens, or with tunnel vision of 20 degrees or less. An individual transferred from a State Aid to the Blind (AB) program to SSI is eligible if he/she received such State aid in December 1973 and continues to meet the October 1972 State definition of blindness.

Disabled: Any person unable to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment expected to result in death or that has lasted or can be expected to last for a continuous period of at least 12 months. For a child under age 18, eligibility is based on disability of severity comparable with that of an adult. An individual transferred from a State Aid to the Permanently and Totally Disabled (APTD) program to SSI is also eligible if he/she received such State aid in December 1973 and continues to meet the October 1972 State definition of disability.

1973

*Public Law 93-233,
enacted December 31*

Only persons who had received APTD before July 1973 and were on the rolls in December 1973 may receive SSI on the basis of the State definition of disability; those who became eligible for State aid from July to December 1973 must meet the Federal definition of disability.

1980

*Public Law 96-265,
enacted June 9*

A disabled recipient who loses Federal SSI eligibility because of earnings at the substantial gainful activity level may continue to receive a special benefit under section 1619 and retain eligibility for Medicaid under title XIX of the Social Security Act. This special benefit status may continue as long as the recipient has the disabling impairment and meets all nondisability SSI eligibility criteria. States have the option of supplementing this special benefit.

This provision of the law was in effect from January 1, 1981, through December 31, 1983. Beginning in January 1984, under a 1-year demonstration project, this provision was continued for persons already eligible for either regular SSI payments or special monthly benefits.

1984

*Public Law 98-460,
enacted October 9*

The special benefit and Medicaid provisions of the 1980 legislation were extended through June 30, 1987 (retroactive to January 1, 1984).

1986

*Public Law 99-643,
enacted November 10*

The special benefit and Medicaid provisions of the 1980 amendments are made permanent. The provisions were amended effective July 1, 1987, with significant modifications to simplify administration and to allow free movement between regular SSI disability payments and either the special cash benefit or Medicaid eligibility under section 1619. The distinction between a disabled person eligible for regular SSI payments and one eligible for 1619(a) is that the latter has several months with gross earnings above the SGA level. Previously, section 1619(a) status required completion of a trial work period and the determination that the work was SGA.

Act

1996

*Public Law 104-193,
enacted August 22*

For individuals under age 18, the “comparable severity” standard is eliminated and replaced with a requirement that a child be considered disabled if he/she has a medically determinable impairment that results in “marked and severe functional limitations,” and meets the existing statutory duration requirement. The law also eliminates references to “maladaptive behaviors” from the personal/behavioral domain of the mental disorders in the Listing of Impairments for children, and discontinues the use of individualized functional assessments for children.

SSI eligibility is prohibited for an individual in any month during which such an individual is a fugitive felon, fleeing prosecution for a felony, or violating State or Federal conditions of probation or parole. In addition, SSI eligibility is prohibited for 10 years for those convicted of fraudulently claiming residence to obtain benefits simultaneously in two or more States.¹

2006

*Public Law 109-171,
enacted February 8*

Requires the Commissioner to conduct reviews of a specific percentage of SSI initial disability and blindness cases involving individuals aged 18 or older that are allowed by the State Disability Determination Services (DDS). The provision is phased in as follows—for fiscal year 2006, the Commissioner is required to review 20 percent of DDS allowances; in fiscal year 2007, the requirement is 40 percent; and, for fiscal years 2008 and thereafter, 50 percent of all DDS allowances are required to be reviewed. These reviews are to be made before the allowance decision is implemented.

2. Other Eligibility Provisions

a. Citizenship and U.S. Residency

1972

*Public Law 92-603,
enacted October 30*

The individual must reside within one of the 50 States or the District of Columbia and be a citizen or an alien lawfully admitted for permanent residence or permanently residing in the United States under color of law. Persons living outside the United States for an entire calendar month lose their eligibility for such a month.

1976

*Public Law 94-241,
enacted March 24*

Eligibility for SSI is extended to residents of the Northern Mariana Islands, effective January 9, 1978.

1980

*Public Law 96-265,
enacted June 9*

The income and resources of the immigration sponsors of aliens applying for SSI are considered in determining eligibility for and the amount of payment. After allowances for the needs of the sponsor and his/her family, the remainder is deemed available for the support of the alien applicant for a 3-year period after admission to the United States for permanent residence. This provision does not apply to those who become blind or disabled after admission, to refugees, or to persons granted political asylum. (See section 2.g. for subsequent changes to sponsor-to-alien deeming provisions.)

¹This last provision was repealed in 1999 by Public Law 106-169 and replaced with a provision providing for non-payment of benefits for up to 24 months for knowingly making false or misleading statements regarding material facts.

Act

1989

*Public Law 101-239,
enacted December 19*

SSI eligibility is continued for a disabled or blind child who was receiving SSI benefits while living in the United States and is now living with a parent who is a member of the U.S. Armed Forces assigned to permanent duty ashore outside the United States, but not where the parent is stationed in Puerto Rico or the territories and possessions of the United States.

1993

*Public Law 103-66,
enacted August 10*

Above provision made applicable where the parent is a member of the U.S. Armed Forces and stationed in Puerto Rico or the territories and possessions of the United States.

1996

*Public Law 104-193,
enacted August 22*

Prohibits SSI eligibility for anyone who is not a U.S. citizen or national unless they are in a “qualified alien” category and meet one of certain exceptions such as lawful permanent residents who earn or can be credited with 40 qualifying quarters of earnings, certain refugee type categories eligible for up to 5 years of time limited eligibility, or active duty U.S. military or veterans and their spouses and children. Extends eligibility for aliens receiving SSI as of August 22, 1996 (the enactment date of the law) for 1 year after the enactment date for those aliens found ineligible under the new standards.

*Public Law 104-208,
enacted September 30*

Amends Public Law 104-193 to add to the list of “qualified aliens” certain non-citizens (and their children) who have been battered or subjected to extreme cruelty by a spouse or parent or a member of the spouse’s or parent’s family living in the same household.

1997

*Public Law 105-18,
enacted June 12*

Extends eligibility for aliens receiving SSI as of August 22, 1996, until September 30, 1997, for those found ineligible under the new alien standards of Public Law 104-193.

*Public Law 105-33,
enacted August 5*

Further amends Public Law 104-193 to add Cuban and Haitian entrants, and the child of a parent who has been battered or subjected to extreme cruelty, to the list of qualified aliens. Provides that Cuban and Haitian entrants and Amerasian immigrants qualify for time limited eligibility, and increases the time limit from 5 to 7 years for all time-limited categories. Additional exceptions are added for qualified aliens: (1) lawfully residing in the United States and receiving SSI benefits on August 22, 1996; and (2) lawfully residing in the United States on August 22, 1996 and meeting the definition of blind or disabled in the Social Security Act.

Certain noncitizen American Indians are excepted from the alien nonpayment provisions of Public Law 104-193.

Extends eligibility for “nonqualified aliens” receiving SSI as of August 22, 1996, until September 30, 1998.

1998

*Public Law 105-306,
enacted October 28*

Permanently extends eligibility of all remaining “nonqualified aliens” who were receiving SSI benefits when Public Law 104-193 was enacted on August 22, 1996.

2000

*Public Law 106-386,
enacted October 28*

Noncitizens, regardless of their immigration status, may be eligible for SSI to the same extent as refugees, if they are determined to be victims of “severe forms of trafficking in persons.”

Act

2004

*Public Law 108-203,
enacted March 2*

Extends SSI eligibility to blind or disabled children who are U.S. citizens living with a parent assigned to permanent U.S. military duty outside of the United States, and who were not receiving SSI benefits while in the United States. Previously, only blind or disabled children who received an SSI benefit for the month before the parent reported for permanent duty abroad were eligible. Effective April 2004 for applications filed after enactment.

2007

*Public Law 110-161,
enacted December 26*

Provides certain Iraqi and Afghan aliens with special immigrant status, as described in section 101(a)(27) of the Immigration and Nationality Act. As special immigrants, these Iraqi and Afghan aliens are eligible for resettlement assistance, entitlement programs, and other benefits available to refugees admitted under section 207 of such Act (admission of refugees in emergency situations) for a period not to exceed 6 months.

2008

*Public Law 110-181,
enacted January 28*

Provides certain Iraqi aliens who have provided service to the United States with special immigrant status, as described in section 101(a)(27) of the Immigration and Nationality Act. As special immigrants, these Iraqis are eligible for resettlement assistance, entitlement programs, and other benefits available to refugees admitted under section 207 of such Act (admission of refugees in emergency situations) for a period not to exceed 8 months.

b. Other Benefits

1980

*Public Law 96-272,
enacted June 17*

SSI applicants and recipients are not required as a condition of eligibility to elect to receive Veterans Administration pensions under the Veterans and Survivors' Pension Improvement Act of 1978 if the State of residence lacks a medically-needy program under title XIX.

c. Drug Addiction and Alcoholism (DA&A)

1972

*Public Law 92-603,
enacted October 30*

Any disabled individual who has been medically determined to be an alcoholic or drug addict must accept appropriate treatment, if available, in an approved facility and demonstrate compliance with conditions and requirements for treatment.

SSI payments are required to be made through a representative payee—another person or public or private agency designated by SSA to manage the recipient's benefit on his/her behalf.

1994

*Public Law 103-296,
enacted August 15*

Any individual who is receiving SSI based on a disability where drug addiction or alcoholism is a contributing factor material to the finding of disability must comply with the DA&A treatment requirements. The individual must accept appropriate treatment when it is available and comply with the conditions and terms of treatment. Instances of noncompliance with the requirements result in progressively longer payment suspensions. Before payments can resume, the individual must demonstrate compliance for specific periods; 2 months, 3 months, and 6 months, respectively, for the first, second, third and subsequent instances of noncompliance. An individual who is not in compliance with the DA&A treatment requirements for 12 consecutive months shall not be eligible for payments; however, this does not prevent such individuals from reapplying and again becoming eligible for payments.

Act

SSI disability payments based on DA&A are also limited to a total of 36 benefit months (beginning March 1995) regardless of whether appropriate treatment is available. Months for which benefits are not due and received do not count towards the 36-month limit.

Payments based on DA&A must be made to a representative payee. Preference is required to be given to community based nonprofit social service agencies and Federal, State, or local government agencies in representative payee selection. These agencies when serving as payees for individuals receiving payments based on DA&A may retain the lesser of 10 percent of the monthly benefit or \$50 (adjusted annually after 1995 by the Consumer Price Index (CPI)) as compensation for their services.

Establishment of one or more referral and monitoring agencies for each State is required.

1996

*Public Law 104-121,
enacted March 29*

An individual is not considered disabled if DA&A is a contributing factor material to a finding of disability.

Applies DA&A representative payee requirements enacted under Public Law 103-296 to disabled SSI recipients who have a DA&A condition and are incapable of managing their benefits. In addition, these recipients shall be referred to the appropriate State agency administering the State plan for substance abuse treatment.

d. Institutionalization

1972

*Public Law 92-603,
enacted October 30*

An individual who is an inmate of a public institution is ineligible for SSI payments unless the institution is a facility approved for Medicaid payments and is receiving such payments on behalf of the person. Under *regulations*, the Medicaid payment must represent more than 50 percent of the cost of services provided by the facility to the individual.

1976

*Public Law 94-566,
enacted October 20*

An inmate of a publicly operated community residence serving no more than 16 persons may, if otherwise eligible, receive SSI.

1983

*Public Law 98-21,
enacted April 20*

Payments may be made to persons who are residents of public emergency shelters for the homeless for a period of up to 3 months in any 12-month period.

1986

*Public Law 99-643,
enacted November 10*

Effective July 1, 1987, disabled or blind recipients who were receiving special SSI payments or had special SSI recipient status under section 1619 in the month preceding the first full month of institutionalization, may receive payments based on the full Federal benefit rate for the initial 2 full months of institutionalization, if they reside in certain public medical, psychiatric or Medicaid facilities, or in private Medicaid facilities.

1987

*Public Law 100-203,
enacted December 22*

Effective January 1, 1988, payments may be made to persons who are residents of public emergency shelters for the homeless, for up to 6 months in a 9-month period.

Act

Effective July 1, 1988, continued payment of SSI benefits for up to 3 months is permitted, at the rate that was applicable in the month prior to the first full month of institutionalization, for individuals whose expected institutional stay on admission is not likely to exceed 3 months, as certified by a physician, and for whom the receipt of benefits is necessary to maintain living arrangements to which they may return.

1996

*Public Law 104-193,
enacted August 22*

Effective December 1996, institutionalized children under age 18 whose private health insurance is making payments to the institution may receive no more than \$30 per month in Federal SSI.

e. Vocational Rehabilitation and Treatment**1972**

*Public Law 92-603,
enacted October 30*

Blind or disabled individuals receiving Federal SSI benefits who are under age 65, must be referred to the State agency providing services under the Vocational Rehabilitation Act and must accept the services offered. States are reimbursed for the cost of services.

1976

*Public Law 94-566,
enacted October 20*

Blind or disabled children under age 16 must be referred to the State agency administering crippled children's services or to another agency designated by the State. States are reimbursed for the cost of services.

Of funds provided for these services, at least 90 percent must be used for children under age 6 or for those who have never attended public schools.

1980

*Public Law 96-265,
enacted June 9*

Disabled SSI recipients who medically recover while enrolled in approved vocational rehabilitation programs of State VR agencies, may continue to receive benefits during their participation in such programs if the Commissioner of Social Security determines that continuation in the program will increase the probability that they leave the rolls permanently.

1981

*Public Law 97-35,
enacted August 13*

Funding no longer provided under title XVI for medical, social, developmental and rehabilitative services to disabled or blind children.

Reimbursement for the cost of rehabilitation services will be made only if the services result in the recipient's return to work for a continuous period of 9 months. The work must be at the substantial gainful activity earnings level.

1984

*Public Law 98-460,
enacted October 9*

Authorizes the reimbursement of States for the cost of VR services provided to individuals who (1) continue to receive benefits after medical recovery because they are participating in a State VR program or (2) refuse, without good cause, to continue in or cooperate with the VR program in which they had been participating.

1987

*Public Law 100-203,
enacted December 22*

Extends the provision for continuation of payments to disabled SSI recipients who have medically recovered while enrolled in an approved vocational rehabilitation program to include blind SSI recipients.

Act

1990

*Public Law 101-508,
enacted November 5*

Reimbursement authorized for the cost of vocational rehabilitation services provided in months in which the individual was not receiving Federal SSI payments, if:

- SSI recipient status for Medicaid eligibility purposes was retained under work incentive provisions; or
- Benefits were in suspense¹ status (for a reason other than cessation of disability or blindness); or
- Federally-administered State supplementation was received.

Extends benefit continuation provision to disabled SSI recipients who medically recover while participating in a non-State VR program.

1999

*Public Law 106-170,
enacted December 17*

Establishes a Ticket to Work and Self-Sufficiency program which will provide SSI (and OASDI) disability beneficiaries with a ticket that can be used to obtain vocational rehabilitation services, employment services, or other support services, from an employment network (EN) of their choice.

An EN chooses one of the two EN payment options at the time it submits an application to SSA to become an EN. The chosen payment system will apply to all beneficiaries served. An EN can elect to receive payment under the:

- Outcome payment system, under which it can receive payment for up to 60 outcome payment months; or
- Outcome-milestone payment system, under which it can receive payment for up to four milestones (established by regulation) in addition to outcome payments. These milestones must occur before the EN enters the first month for which it is eligible for an outcome payment. Four milestone payments plus 60 months of reduced outcome payments equal 85 percent of the total that would be available if the EN chose the outcome payment system.

The four milestones are based on gross earnings exceeding the substantial gainful activity level for specified months. An outcome payment month is any month in which SSA does not pay any Federal disability cash benefits to a beneficiary because of work or earnings.

Also eliminates the requirement that blind or disabled SSI recipients age 16 through 64 be referred to the State VR agency and accept the services offered.

f. Continuing Disability Reviews and Eligibility Redeterminations

1994

*Public Law 103-296,
enacted August 15*

During each of fiscal years 1996, 1997, and 1998, requires SSA to conduct continuing disability reviews (CDRs) on a minimum of 100,000 SSI recipients. In addition, during the same period, requires SSA to redetermine the SSI eligibility of at least one-third of all child SSI recipients who reach age 18 after April 1995 during the 1-year period following attainment of age 18. Redeterminations for persons turning age 18 could count toward the 100,000 CDR requirement.

¹ Recipients who have lost eligibility for SSI benefits for fewer than 13 consecutive months are in suspended payment status.

Act

1996

*Public Law 104-193,
enacted August 22*

Repeals the requirement that SSA redetermine the eligibility of at least one-third of all child SSI recipients who reach age 18 after April 1995 during the 1-year period following attainment of age 18.

Requires a CDR:

- At least once every 3 years for SSI recipients under age 18 who are eligible by reason of an impairment which is likely to improve, and
- Not later than 12 months after birth for recipients whose low birth weight is a contributing factor material to the determination of their disability.

Requires eligibility redetermination under the adult disability standard for all child SSI recipients eligible for the month before the month in which they attain age 18.

Requires redetermination of eligibility for children considered disabled based on an individual functional assessment and/or consideration of maladaptive behavior.

Requires the representative payee of a child SSI recipient whose continuing eligibility is being reviewed to present evidence that the recipient is receiving treatment which is considered medically necessary and available for the condition which was the basis for providing SSI benefits.

1997

*Public Law 105-33,
enacted August 5*

Modifies provision of Public Law 104-193 to extend from 12 to 18 months the period for redetermining the disability of children under age 18 under the new childhood disability standard.

Modifies provision of Public Law 104-193 to permit SSA to schedule a CDR for a disabled child for whom low birth weight is a contributing factor material to the determination of disability, at a date after the child's first birthday if the Commissioner determines the impairment is not expected to improve within 12 months of the child's birth.

Modifies provision of Public Law 104-193 to provide SSA the authority to make redeterminations of disabled childhood recipients who attain age 18, more than 1 year after the date such recipient attains age 18.

1999

*Public Law 106-170,
enacted December 17*

Prohibits the initiation of a CDR during the period that a recipient is "using a ticket" under the Ticket to Work program.

g. Deeming of Income and Resources

1972

*Public Law 92-603,
enacted October 30*

Deeming occurs when the income and resources of certain family members living in the same household with the SSI recipient are considered in determining the amount of the SSI payment. These family members are the ineligible spouse of an adult recipient and the ineligible parents of a child recipient under age 21.

After deduction of personal allocations for the spouse (or parents) and for ineligible children in the home, and after application of income exclusions, any remaining income of the spouse (or parents) is added to the income of the eligible person.

Act

1980

*Public Law 96-265,
enacted June 9*

Children aged 18 or older are not subject to parental deeming.
Sponsor's income and resources deemed to an alien for 3 years.

1989

*Public Law 101-239,
enacted December 19*

Disabled children receiving home care services under State Medicaid programs, who are ineligible for SSI because of deeming of parental income, and who received SSI benefits limited to \$30 while in a medical treatment facility, may receive the \$30 monthly allowance that would be payable if the recipient were institutionalized.

1993

*Public Law 103-66,
enacted August 10*

Considers an ineligible spouse or parent who is absent from the household due to active military service to be a member of the household for deeming purposes.

*Public Law 103-152,
enacted November 24*

Sponsor-to-alien deeming period extended from 3 years to 5 years, effective January 1, 1994, through September 30, 1996.

1996

*Public Law 104-193,
enacted August 22*

Deeming of income and resources from an immigration sponsor to a noncitizen continues until citizenship, with exceptions for those who earn, or can be credited with, 40 qualifying quarters of earnings. Effective for those whose sponsor signs a new legally enforceable affidavit of support.

*Public Law 104-208,
enacted September 30*

Amends Public Law 104-193 to add two exceptions to the sponsor-to-alien deeming:

- Provides that if the noncitizen is indigent and would be unable to obtain food and shelter without SSI benefits even after receiving support from the sponsor, then only the amount of income and resources actually provided by the sponsor will be counted for a 12-month period after a determination of indigence; and
- Provides that in certain cases, deeming would not apply for a 12-month period (with some options for extension) if the noncitizen (or his/her children) has been battered, or subjected to extreme cruelty by family members.

1997

*Public Law 105-33,
enacted August 5*

Amends Public Law 104-208 to add an additional exception to sponsor-to-alien deeming when the parent of a noncitizen has been battered or subjected to extreme cruelty by family members.

2006

*Public Law 109-163,
enacted January 6*

Provides that individuals who were made ineligible for SSI because of their spouses or parents being called to active military duty would not have to file a new application for SSI benefits if they again could be eligible for benefits before the end of 24 consecutive months of ineligibility.

Act

3. Federal Benefit Payments

a. *Windfall Offset*

1980

*Public Law 96-265,
enacted June 9*

Offset (by reduction of retroactive Social Security benefits) to prevent persons whose initial OASDI payment is retroactive from receiving more in total benefits than if they were paid the benefits when regularly due.

1984

*Public Law 98-617,
enacted November 8*

Offset provision expanded to allow for reduction of retroactive SSI benefits and to apply in cases of OASDI benefit reinstatement.

b. *Proration of Benefit*

1982

*Public Law 97-248,
enacted September 3*

Benefit for first month of eligibility to be prorated by the number of days in the month for which an application has been filed and there is eligibility.

1996

*Public Law 104-193,
enacted August 22*

Changes the effective date of an SSI application to the first day of the month following the date on which the application was filed or on which the individual first becomes eligible, whichever is later. This, in effect, eliminates prorated payments in initial claims.

c. *Retrospective Monthly Accounting*

1981

*Public Law 97-35,
enacted August 13*

Changes the method of computing the SSI benefit to one under which the benefit amount is computed on a monthly basis and is based on income and other characteristics in the previous (or second previous) month.

1984

*Public Law 98-369,
enacted July 18*

Changes the method of computing the SSI benefit to persons receiving title II payments. The effect of the increased title II income at the time of the cost-of-living increase is not delayed as it otherwise would be.

1987

*Public Law 100-203,
enacted December 22*

Provides an exception to retrospective monthly accounting so that amounts received under Aid to Families With Dependent Children (AFDC), foster care, refugee cash assistance, Cuban-Haitian entrant assistance, or general and child welfare assistance provided by the Bureau of Indian Affairs are counted only in the month received.

1993

*Public Law 103-66,
enacted August 10*

Changes the method of computing the SSI benefit to persons receiving the value of the one-third reduction. The effect of the increased value at the time of the cost-of-living increase is not delayed as it otherwise would be. Effective January 1995.

Act

2004

*Public Law 108-203,
enacted March 2*

Eliminates triple counting of one-time, nonrecurring income by providing that this income will be counted only for the month that the income is received, and not for any other month during the transition to retrospective monthly accounting, which occurs during the first 3 months of an individual's SSI eligibility. Effective April 2005.

d. *Uncashed Checks*

1981

*Public Law 97-35,
enacted August 13*

States that have Federally-administered supplements to be credited their share of SSI checks that remain unnegotiated for 180 days.

1987

*Public Law 100-86,
enacted August 10*

SSI checks now unnegotiable after 1 year. States are credited their share of SSI checks after 1 year rather than 180 days.

e. *Rounding of Payment Amounts*

1982

*Public Law 97-248,
enacted September 3*

Cost-of-living adjustments in the Federal SSI benefit and income eligibility levels are to be rounded to the next lower whole dollar, after the adjustment is calculated. Subsequent cost-of-living adjustments will be calculated on the previous year's benefit standard before rounding.

f. *Penalties for False or Misleading Statements or Withholding of Information*

1999

*Public Law 106-169,
enacted December 14*

Provides for the nonpayment of OASDI and SSI benefits (6, 12 and 24 months, respectively, for the first, second, and third or subsequent violations) for individuals found to have knowingly made a false or misleading statement of material fact for use in determining eligibility for benefits.

2004

*Public Law 108-203,
enacted March 2*

Expands the administrative sanction of nonpayment of benefits to situations where an individual has failed to disclose material information, if the person knew or should have known that such failure was misleading.

Authorizes Federal courts to order a defendant convicted of defrauding Social Security, Special Veterans' Benefits, or SSI to make restitution to SSA. Restitution funds would be deposited to the trust funds or General Fund of the Treasury, as appropriate. Effective with respect to violations occurring on or after the date of enactment.

Act

g. *Installment Payments*

1996

*Public Law 104-193,
enacted August 22*

Establishes a schedule for paying retroactive SSI benefit amounts that exceed 12 times the FBR plus the State supplement level. Payments would be made at 6-month intervals:

- The first installment would be 12 times the FBR plus any Federally administered State supplement.
- Any remaining retroactive benefits would be paid in a second installment (not to exceed the first payment amount).
- All remaining retroactive benefits would be paid in the third installment.

Provides that where an underpaid individual has incurred debts to provide for food, clothing or shelter, has expenses for disability-related items and services that exceed the installment amount, or has entered into a contract to purchase a home, the installment payment would be increased by the amount needed to cover those debts, expenses and obligations.

Provides that full retroactive payments be paid to an individual who is terminally ill or, if currently ineligible, is likely to remain so for the next 12 months.

2006

*Public Law 109-171,
enacted February 8*

Requires that past-due monthly SSI benefits that exceed three times the maximum monthly benefit (Federal benefit rate plus State supplementary payment amount, if any) payable to the individual be paid in up to three installment payments, 6 months apart. Also, limits the amount of the first two installment payment to three times the maximum monthly benefit. All remaining benefits due are to be paid in the third installment. As under current law, the amounts of the installment payments may be increased in certain cases, such as those in which the individual has outstanding debt relating to food, clothing, or shelter, or has necessary medical needs.

Effective 3 months after February 8, 2006.

4. Federal Benefit Rates

Basic benefit standards are used in computing the amount of Federal SSI payments. Benefit levels differ for individuals and couples living in households and for persons in Medicaid institutions. Individuals or couples living in their own households are eligible for the full Federal benefit. If an individual or couple is living in another person's household and receiving support and maintenance there, the Federal benefit is reduced by one-third. The Federal benefit rates for persons in households are increased annually to reflect increases in the cost of living. Legislation affecting the level of Federal benefit rates since the inception of the SSI program are summarized in table V.A1.

Table V.A1.—Federal Benefit Rates Set by Legislation

Act	Living arrangements ¹	Amount ²		Conditions
		Individual	Couple	
1972 ³	Own household ⁴	\$130.00	\$195.00	Was to be effective January 1, 1974; superseded by Public Law 93-233.
1973 ⁵	—	140.00	210.00	Was to be effective January 1, 1974; superseded by Public Law 93-233.
1973 ⁶	—	140.00	210.00	Effective January 1, 1974.
1973 ⁶	—	146.00	219.00	Effective July 1, 1974.
1974 ⁷	—	—	—	Mechanism established for providing cost-of-living adjustments coordinated with earlier legislation applying to OASDI cash benefits. SSI payments to be increased by the same percentage as OASDI benefits and at the same time.
	—	⁸ 157.70	⁸ 236.60	Effective July 1, 1975.
1983 ⁹	—	304.30	456.40	Effective July 1, 1983 (general benefit increase).
	—	⁸ 314.00	⁸ 472.00	Effective January 1, 1984.
1973 ⁵	Increment for "essential person" in household	65.00	—	Was to be effective January 1, 1974. For persons transferred from OAA, AB, or APTD programs who were receiving payments in December 1973 under a State plan that took account of "essential persons" in the household.
	—	70.00	—	Was to be effective July 1, 1974.
1973 ⁶	—	70.00	—	Effective January 1, 1974.
	—	73.00	—	Effective July 1, 1974.
1974 ⁷	—	—	—	Mechanism established for providing cost-of-living adjustments.
	—	⁸ 78.90	—	Effective July 1, 1975.
1983 ⁹	—	152.50	—	Effective July 1, 1983 (general benefit increase).
	—	⁸ 157.00	—	Effective January 1, 1984.
1972 ³	Receiving institutional care covered by Medicaid	25.00	50.00	Effective January 1, 1974. Must be receiving more than 50 percent of the cost of the care from Medicaid (title XIX of the Social Security Act).
1987 ¹⁰	—	30.00	60.00	Effective July 1, 1988. Must be receiving more than 50 percent of the cost of the care from Medicaid (title XIX of the Social Security Act).

¹ For those in another person's household receiving support and maintenance there, the Federal benefit rate is reduced by one-third.

² For those without countable income. These payments are reduced by the amount of countable income of the individual or couple.

³ Public Law 92-603, enacted October 30, 1972.

⁴ Includes persons in private institutions whose care is not provided by Medicaid.

⁵ Public Law 93-66, enacted July 9, 1973.

⁶ Public Law 93-233, enacted December 31, 1973.

⁷ Public Law 93-368, enacted August 7, 1974.

⁸ Subject to automatic provisions, see table IV.A2.

⁹ Public Law 98-21, enacted April 20, 1983.

¹⁰ Public Law 100-203, enacted December 22, 1987.

Act

5. Exclusions from Income

a. General Exclusions

1972

*Public Law 92-603,
enacted October 30*

The first \$60 of earned or unearned income per calendar quarter for an individual or couple; the next \$195 and one-half the remainder of quarterly earned income. Unearned income includes Social Security benefits, other government or private pensions, veterans' benefits, and workers' compensation.

1981

*Public Law 97-35,
enacted August 13*

The first \$20 of earned or unearned income per month for an individual or couple; the next \$65 and one-half the remainder of monthly earned income. Unearned income includes Social Security benefits, other government or private pensions, veterans' benefits, and workers' compensation.

2000

*Public Law 106-554,
enacted December 21*

Earnings of persons defined as Social Security statutory employees are treated as self-employment income for SSI purposes.

b. Special Exclusions

1972

*Public Law 92-603,
enacted October 30*

Any amount of tax rebate issued to an individual by any public agency that is based on either real property or food purchase taxes.

Grants, scholarships, and fellowships used to pay tuition and fees at an educational institution.

Income required for achieving an approved self-support plan for blind or disabled persons.

Work expenses of blind persons.

For blind persons transferred from State programs to SSI, income exclusions equal to the maximum amount permitted as of October 1972 under the State programs.

Irregularly or infrequently received income totaling \$60 or less of unearned income and \$30 of earned income in a calendar quarter.

Payment for foster care of ineligible child residing in recipient's home through placement by a public or private nonprofit child care agency.

One-third of any payment received from an absent parent for the support of a child eligible for SSI.

Certain earnings of a blind or disabled child under age 22 regularly attending an educational institution.

State or local government cash payments based on need and designed to supplement SSI payments.

Act

1976

*Public Law 94-331,
enacted June 30*

Disaster assistance from income for 9 months and application of one-third reduction for 6 months for certain victims of disasters occurring between January 1, 1976 and December 31, 1976.

*Public Law 94-566,
enacted October 20*

Any assistance based on need (including vendor payments) made to or on behalf of SSI recipients, which is paid and wholly funded by State or local governments.

The value of assistance provided under certain Federal housing programs.

1977

*Public Law 95-113,
enacted September 29*

Food stamps, Federally donated food, and the value of free or reduced price food for women and children under the Child Nutrition Act and National School Lunch Act.

*Public Law 95-171,
enacted November 12*

Provisions for exclusions for support and maintenance under the Disaster Relief and Emergency Assistance Act of 1974 extended on a permanent basis. Effective January 1, 1978.

1980

*Public Law 96-222,
enacted April 1*

Earned income tax credit treated as earned income (temporarily excluded from 1975 through 1980).

*Public Law 96-265,
enacted June 9*

Remunerations received in sheltered workshops and work activity centers are considered earned income and qualify for earned income exclusions.

Impairment-related work expenses paid by the individual (including cost for attendant care, medical equipment, drugs, and services necessary to control an impairment) are deducted from earnings when determining if an individual is engaging in substantial gainful activity. Impairment-related work expenses are excluded in calculating income for benefit purposes if initial eligibility for benefits exists on the basis of countable income without applying this exclusion.

1981

*Public Law 97-35,
enacted August 13*

Modifies provision under which irregularly or infrequently received income is excluded to conform to change from quarterly to monthly accounting; amounts excludable: \$20 or less of unearned income and \$10 of earned income in a month.

1982

*Public Law 97-377,
enacted December 21*

From December 18, 1982, to September 30, 1983, certain home energy assistance payments are excluded if a State agency certified that they are based on need.

1983

*Public Law 97-424,
enacted January 6*

Support or maintenance assistance (including home energy assistance) provided in kind by a nonprofit organization or in cash or in kind by certain providers of home energy is excluded if the State determines that the assistance is based on need. Provision is applicable through September 1984.

Certain home energy assistance payments are excluded if a State agency certified that the assistance is based on need. Provision is applicable through June 1985.

Act

1984

*Public Law 98-369,
enacted July 18*

The 1983 provisions for support and maintenance and home energy assistance continue to October 1, 1987.

1986

*Public Law 99-498,
enacted October 17*

Educational assistance used for educational expenses under the Higher Education Act of 1965 as amended.

1987

*Public Law 100-203,
enacted December 22*

The 1983 provisions for support and maintenance and home energy assistance made permanent.

Excludes death payments (for example, proceeds from life insurance) from SSI income determinations to the extent they were spent on last illness and burial.

Modifies the 1982 resource exclusion for burial funds to extend the exclusion to any burial fund of \$1,500 or less maintained separately from all other assets, thereby allowing interest to be excluded from income if retained in the fund.

1988

*Public Law 100-383,
enacted August 10*

Restitution payments made to Japanese internees and relocated Aleutians.

1989

*Public Law 101-239,
enacted December 19*

Interest on agreements representing the purchase of an excluded burial space.

Payments from the Agent Orange Settlement.

Value of a ticket for domestic travel received as a gift and not cashed.

1990

*Public Law 101-508,
enacted November 5*

Earned income tax credit (including the child health insurance portion).

Payments received from a State-administered fund established to aid victims of crime.

Impairment-related work expenses excluded from income in determining initial eligibility for benefits.

Payments received as State or local government relocation assistance.

Payments received under the Radiation Exposure Compensation Act.

Redefines as earned income, royalties earned in connection with any publication of the individual's work, and honoraria received for services rendered (previously defined as unearned income).

1993

*Public Law 103-66,
enacted August 10*

Hostile fire pay to members of the uniformed services.

Payments received as State or local government relocation assistance made permanent.

1994

*Public Law 103-286,
enacted August 1*

Payments to victims of Nazi persecution.

Act

1998

*Public Law 105-285,
enacted October 27*

Funds made available to an SSI recipient by a State or local government or a nonprofit organization as part of the Individual Development Account demonstration project.

*Public Law 105-306,
enacted October 28*

In-kind gifts to children with life-threatening conditions by tax-exempt organizations not converted to cash.

The first \$2,000 annually of cash gifts by tax-exempt organizations to, or for the benefit of, individuals under age 18 with life-threatening conditions.

*Public Law 105-369,
enacted November 12*

Payments made under the Ricky Ray Hemophilia Relief Fund Act of 1998.

2000

*Public Law 106-554,
enacted December 21*

Interest on funds deposited in an individual development account.

Any adjustments made to prior payments from other Federal programs to account for the error in the computation of the Consumer Price Index during 1999.

2001

*Public Law 107-16,
enacted June 7*

The refundable child tax credit is excluded in determining eligibility for means-tested programs, including SSI.

2004

*Public Law 108-203,
enacted March 2*

Changes the calculation of infrequent or irregular income from a monthly to a quarterly basis. Excludes from the determination of an individual's income all interest and dividend income earned on countable resources. Effective July 2004.

Permits the student earned income exclusion to apply to any individual under age 22 who is a student. Thus, students under age 22 who are married or heads of households would be eligible for the exclusion. Effective April 2005.

Excludes from the determination of income any gift to an individual for use in paying tuition or educational fees, just as grants, scholarships, and fellowships for such use are currently excluded from the determination of income. Effective June 2004.

2005

*Public Law 109-64,
enacted September 20*

Amends the National Flood Insurance Act of 1968 to specify that assistance provided under a program for flood mitigation activities with respect to a property would not be considered income or a resource of the owner of the property when determining eligibility for or benefit levels under any income assistance or resource-tested program (including SSI) that is funded in whole or in part by a Federal agency or by appropriated Federal funds.

2006

*Public-Law 109-432,
enacted December 20*

Extends the present law that allows combat pay to be considered for Earned Income Tax Credit (EITC) purposes for one additional year (for taxable years ending before January 1, 2008). For SSI purposes, EITC payments are excluded from income, and are not a countable resource for 9 calendar months following the month of receipt.

Act

2008

*Public Law 110-185,
enacted February 13*

A rebate payment received under the Economic Stimulus Act of 2008, and any other credit or refund under section 6428 of the Internal Revenue Code, would not be taken into account as income for purposes of SSI.

6. Resources

1972

*Public Law 92-603,
enacted October 30*

Countable resources limited to \$1,500 or less for an individual and to \$2,250 or less for a couple.

1984

*Public Law 98-369,
enacted July 18*

Limit on countable resources raised by \$100 a year for individuals and \$150 a year for couples, beginning in calendar year 1985 through 1989. The respective limits would become \$2,000 for an individual and \$3,000 for a couple in 1989 and thereafter.

1999

*Public Law 106-169,
enacted December 14*

Includes generally in the countable resources of an individual the assets of a trust which could be used for the benefit of the individual or spouse.

a. General Exclusions

1972

*Public Law 92-603,
enacted October 30*

A home of reasonable value—established *by regulation* as not exceeding a fair-market value of \$25,000 (\$35,000 in Alaska and Hawaii).

Personal effects and household goods of reasonable value established *by regulation* as not exceeding a total market value of \$1,500.

An automobile of reasonable value—established *by regulation* as not exceeding a market value of \$1,200.

An automobile may be excluded, regardless of value, if the individual's household uses it for employment or medical treatment, or if it is modified to be operated by or for transportation of a person with a disability.

Life insurance with face value of \$1,500 or less.

1976

*Public Law 94-569,
enacted October 20*

The recipient's home, regardless of value, is excluded from consideration in determining resources.

1977

*Public Law 95-171,
enacted November 12*

Assistance received under the Disaster Relief and Emergency Assistance Act of 1974 for 9 months following receipt.

1979

Reasonable value for an automobile increased *by regulation* to \$4,500 of current-market value; personal goods and household effects increased to \$2,000 of equity value.

1982

*Public Law 97-248,
enacted September 3*

The value, within prescribed limits, of a burial space for the recipient, spouse, and immediate family is excluded. In addition, \$1,500 each (less the value of already excluded life insurance and any amount in an irrevocable burial arrangement) may be set aside for the burial of the recipient and spouse.

Act

1984

*Public Law 98-369,
enacted July 18*

The unspent portion of any retroactive title II or title XVI payment is excluded for 6 months following its receipt, and the individual must be given written notice of the time limit on the exclusion.

1985

Regulations permit exclusion, regardless of value, of an automobile needed for essential transportation or modified for a person with a disability. The \$4,500 current market value limit applies only if no automobile could be excluded based on the nature of its use.

1987

*Public Law 100-203,
enacted December 22*

Provides for suspension of the 1980 transfer of assets provision, in any month that it is determined that undue hardship would result.

Real property that cannot be sold for the following reasons: it is jointly owned; its sale would cause the other owner(s) undue hardship due to loss of housing; its sale is barred by a legal impediment; or, the owner's reasonable efforts to sell have been unsuccessful.

Temporarily extends the 1984 exclusion of retroactive title II and title XVI benefits from 6 months to 9 months (the longer exclusion applies to benefits paid in fiscal years 1988 and 1989).

1988

*Public Law 100-707,
enacted November 23*

Removes the time limit for exclusion of disaster assistance.

2004

*Public Law 108-203,
enacted March 2*

Increases to 9 months and makes uniform the time period for excluding from resources amounts attributable to payments of past-due Social Security and SSI benefits and earned income and child tax credits. Effective for such payments received on or after the date of enactment.

2005

Regulations permit exclusion, regardless of value, of:

- One automobile if used for transportation for the beneficiary or a member of the beneficiary's household; and
- Personal goods and household effects.

b. Special Exclusions

1972

*Public Law 92-603,
enacted October 30*

Assets of a blind or disabled individual that are necessary to an approved plan of self-support.

Tools and other property essential to self-support (PESS), within reasonable limits. Shares of nonnegotiable stock in regional or village corporations held by natives of Alaska.

For persons transferred from State programs to SSI, resource exclusions equal to the maximum amount permitted as of October 1972 under the State program.

1988

*Public Law 100-383,
enacted August 10*

Restitution payments made to Japanese internees and relocated Aleutians.

Act

1989

*Public Law 101-239,
enacted December 19*

Specifies that no limitation can be placed on property essential to self-support used in a trade or business, or by an individual as an employee (including the tools of a tradesperson and the machinery and livestock of a farmer).

Payments from the Agent Orange Settlement.

1990

*Public Law 101-508,
enacted November 5*

Earned income tax credit excluded for the month following the month the credit is received.

Payments received from a State-administered fund established to aid victims of crime excluded for a 9-month period. Individual not required to file for such benefits.

Payments received as State or local government relocation assistance excluded for a 9-month period. (The provision expired 3 years after its effective date.)

Payments received under the Radiation Exposure Compensation Act.

1993

*Public Law 103-66,
enacted August 10*

Makes permanent the 9-month exclusion of payments received as State or local government relocation assistance.

1994

*Public Law 103-286,
enacted August 1*

Payments to victims of Nazi persecution.

1996

*Public Law 104-193,
enacted August 22*

Dedicated financial institution accounts required to be established for large past-due benefits for disabled individuals under age 18 with a representative payee.

1998

*Public Law 105-285,
enacted October 27*

Funds made available to an SSI recipient by a State or local government or a nonprofit organization as part of the Individual Development Account demonstration project.

*Public Law 105-306,
enacted October 28*

In-kind gifts to children with life-threatening conditions by tax-exempt organizations not converted to cash.

The first \$2,000 annually of cash gifts by tax-exempt organizations to, or for the benefit of, individuals under age 18 with life-threatening conditions.

*Public Law 105-369,
enacted November 12*

Payments made under the Ricky Ray Hemophilia Relief Fund Act of 1998.

2000

*Public Law 106-554,
enacted December 21*

Funds deposited by an individual in an individual development account and the interest on those funds.

2001

*Public Law 107-16,
enacted June 7*

The refundable child tax credit in the month of receipt and in the following month.

Act

2004

*Public Law 108-203,
enacted March 2*

Excludes grants, scholarships, fellowships, or gifts to be used for tuition or educational fees from an individual's countable resources for 9 months after the month of receipt.

2008

*Public Law 110-185,
enacted February 13*

A rebate payment received under the Economic Stimulus Act of 2008, and any other credit or refund under section 6428 of the Internal Revenue Code, would not be included as a resource during the month of receipt or the following 2 months.

c. Transfer-of-Resources Penalties

1980

*Public Law 96-611,
enacted December 28*

Assets transferred for less than fair market value for the purpose of establishing eligibility for benefits under the Social Security Act are counted as resources for 24 months after transfer.

1988

*Public Law 100-360,
enacted July 1*

Removes the transfer-of-assets penalty for transfers made July 1, 1988, or later.

1999

*Public Law 106-169,
enacted December 14*

Provides a penalty under the SSI program for the disposal of resources at less than fair market value. The penalty is a loss of benefits for up to 36 months. A formula is provided to determine the number of months.

7. Presumptive and Emergency Payments and Interim Assistance Reimbursement

a. Presumptive Payments

1972

*Public Law 92-603,
enacted October 30*

A person applying on the basis of disability who meets all other criteria of eligibility, and is likely to be disabled, may receive payments for 3 months pending the disability determination.

1976

*Public Law 94-569,
enacted October 20*

Presumptive payment provision was extended to persons applying on the basis of blindness.

1990

*Public Law 101-508,
enacted November 5*

Extends the period for receipt of payments to 6 months.

b. Emergency Advance Payments

1972

*Public Law 92-603,
enacted October 30*

Any applicant who can be presumed to meet the criteria of eligibility, but has not yet been determined eligible, and who is faced with a financial emergency may receive an immediate cash advance of up to \$100.

1987

*Public Law 100-203,
enacted December 22*

Increases the maximum emergency advance payment amount to the maximum amount of the regular Federal SSI monthly benefit rate, plus, if any, the Federally-administered State supplementary payment.

Act

1996

*Public Law 104-193,
enacted August 22*

Applicants who have a financial emergency may receive an emergency advance payment in the month of application, which, effective with this law, is always prior to the first month of eligibility. These advance payments are recouped by proportional reductions in the recipient's first 6 months of SSI benefits.

c. Interim Assistance Reimbursement

1974

*Public Law 93-368,
enacted August 7*

SSA may enter into agreements with the States to repay them directly for assistance payments made to an SSI applicant while his/her claim is being adjudicated. The repayment is made from the first check due to the individual. This legislation expires June 30, 1976.

1976

*Public Law 94-365,
enacted July 14*

The authority to repay the State for interim assistance is made permanent.

1987

*Public Law 100-203,
enacted December 22*

Extends interim assistance reimbursement to situations in which payments are made by States or political subdivisions to persons whose SSI payments were suspended or terminated and who subsequently are found to be eligible for such benefits. Also clarifies that the payment from which the interim assistance reimbursement is paid must be the first payment of benefits relating to the interim period.

8. Medicaid Eligibility

1972

*Public Law 92-603,
enacted October 30*

States can provide Medicaid coverage to all recipients of SSI payments. Alternatively, they can limit coverage by applying more restrictive criteria from the State Medicaid plan in effect on January 1, 1972.

States can accept SSA determination of eligibility, or make their own determination.

1976

*Public Law 94-566,
enacted October 20*

Preserves the Medicaid eligibility of recipients who become ineligible for cash SSI payments due to the cost-of-living increases in Social Security benefits.

1980

*Public Law 96-265,
enacted June 9*

Blind or disabled recipients under age 65 no longer eligible for either regular or special SSI payments because of their earnings may retain SSI recipient status for Medicaid eligibility purposes under the following conditions: (1) they continue to have the disabling impairment, (2) they meet all nondisability eligibility criteria except for earned income, (3) they would be seriously inhibited from continuing employment without Medicaid services, and (4) their earnings are insufficient to provide a reasonable equivalent of SSI payments and Medicaid.

In States that do not provide Medicaid coverage categorically to all SSI recipients, qualification for Medicaid benefits depends on the State's specific eligibility and program requirements.

Act

The Medicaid provision of the 1980 legislation was in effect from January 1, 1981, through December 31, 1983. Under a 1-year demonstration project, beginning January 1, 1984, this provision was continued for persons already eligible for regular or special SSI payments or for retention of Medicaid eligibility.

1984

*Public Law 98-460,
enacted October 9*

Medicaid provision of 1980 legislation extended through June 30, 1987 (retroactive to January 1, 1984).

1986

*Public Law 99-272,
enacted April 7*

Restores Medicaid eligibility for some disabled widow(er)s who became ineligible for SSI when their title II benefits increased in 1984 because of a change in the Social Security disabled widow(er)s benefits reduction factor.

*Public Law 99-643,
enacted November 10*

The SSI recipient status for Medicaid eligibility provision of the 1980 amendments is made permanent.

Effective July 1, 1987, certain expenses are excluded from earnings when determining sufficiency of earnings to establish SSI recipient status eligibility for Medicaid purposes:

- Impairment-related work expenses of disabled persons;
- Work expenses of blind persons;
- Income required for achieving an approved self-support plan; and
- The value of publicly funded attendant care services.

Effective July 1, 1987, preserves the Medicaid eligibility of recipients who become ineligible for SSI payments because of entitlement to, or an increase in, Social Security disabled adult child benefits on or after the effective date.

Effective July 1, 1987, requires all States to provide Medicaid coverage for recipients in special SSI status (either receiving special SSI payments or in the special recipient status described for 1980) if they received Medicaid coverage the month before special SSI status.

1987

*Public Law 100-203,
enacted December 22*

Effective July 1, 1988, restores or preserves the Medicaid eligibility of persons aged 60 or older who are eligible for Social Security benefits as widows or widowers (but not eligible for Medicare) and who become ineligible for SSI payments or State supplementation because of the receipt of old-age or survivors insurance benefits under Social Security.

1990

*Public Law 101-508,
enacted November 5*

Age limit for retention of SSI recipient status for Medicaid eligibility purposes (1980 and subsequent work incentive provisions, above) is eliminated.

Preserves the Medicaid eligibility of SSI recipients who become ineligible for payments when they become entitled to Social Security disabled widow(er)s benefits following the revised definition used for their disability.

Act

1997

*Public Law 105-33,
enacted August 5*

Requires States to continue Medicaid coverage for disabled children who were receiving SSI payments as of August 22, 1996 and would have continued to be eligible for such payments except that their eligibility terminated because they did not meet the revised SSI childhood disability standard established under Public Law 104-193.

2006

*Public Law 109-171,
enacted February 8*

Begins Medicaid coverage for children who are eligible for SSI effective the month the SSI application is filed or the first month of SSI eligibility, whichever is later. (Under prior law, Medicaid eligibility for such children began the month following the month of the SSI application or first eligibility.)

9. State Supplementation**1972**

*Public Law 92-603,
enacted October 30*

States are given the option of providing supplementary payments both to recipients transferred from the State program and to those newly eligible for SSI.

States may either administer the payments themselves or have the Social Security Administration make payments on their behalf. When State supplementary payments are Federally-administered, the Social Security Administration makes eligibility and payment determinations for the State and assumes administrative costs.

“Hold harmless” protection, which limits a State’s fiscal liability to its share of OAA, AB, and APTD expenditures for calendar year 1972, is provided to States electing Federal administration of their supplementary plans. This provision applies only to supplementary payments that do not, on average, exceed a State’s “adjusted payment level.” (The adjusted payment level is the average of the payments that individuals with no other income received in January 1972; it may include the bonus value of food stamps. Adjustments are provided for payments that had been below State standards.)

1973

*Public Law 93-66,
enacted July 9*

Provides for mandatory State supplementation as assurance against reduction of income for persons who received State assistance in December 1973 and were transferred to SSI. These supplementary payments must equal the difference between (1) the amount of the State assistance payment that the individual received in December 1973 plus other income and (2) his/her Federal SSI payment plus other income.

1976

*Public Law 94-585,
enacted October 21*

After June 30, 1977, when the Federal SSI payment level is increased by a cost-of-living increase, such an increase will be excluded in calculating the “hold harmless” amount.

Requires States to maintain State supplementation payments at the level of December 1976 (“maintenance of payments”) or to continue to pay in supplements the same total annual amounts (“maintenance of expenditures”) when the Federal SSI payment level is increased and thereby pass through any increases in Federal benefits without reducing State supplements.

Act

1982

*Public Law 97-248,
enacted September 3*

Begins a 3-year phase out of “hold harmless” protection. Effective with fiscal year 1985, Wisconsin and Hawaii (the only remaining “hold harmless” States) assumed the full cost of their supplementary payments.

1983

*Public Law 98-21,
enacted April 20*

Federal pass-through law is adjusted (1) by substituting the State supplementary payment levels in effect in March 1983 for those in effect in December 1976 as the levels that States must maintain in complying with the pass-through requirements, and (2) with regard to the \$20 (individual) and \$30 (couple) increase in the Federal SSI standard in July 1983, by requiring States to pass through only as much as would have been required if the SSI cost-of-living adjustment had been made in July 1983.

1987

*Public Law 100-203,
enacted December 22*

Provides for Federal administration of State supplements to residents of medical institutions.

Provides for required pass through of \$5 increase in Federal rate for persons whose care in institutions is paid in substantial part by Medicaid.

1993

*Public Law 103-66,
enacted August 10*

Requires States to pay fees for Federal administration of their State supplementation payments. The fees are \$1.67 for each monthly supplementary payment in fiscal year 1994, \$3.33 in fiscal year 1995, and \$5.00 in fiscal year 1996. Fees for subsequent fiscal years will be \$5.00 or another amount determined by the Commissioner to be appropriate. The Commissioner may charge the States additional fees for services they request that are beyond the level customarily provided in administering State supplementary payments.

1997

*Public Law 105-33,
enacted August 5*

Revises the schedule of per-payment fees for Federal administration of State supplementation for fiscal years 1998 (\$6.20) through 2002 (\$8.50) and provides a formula for determining the fee beyond fiscal year 2002.

1999

*Public Law 106-170,
enacted December 17*

A State which has an agreement with SSA to administer its supplementation payments, must remit both payments and fees prior to the SSI payment date.

2000

*Public Law 106-554,
enacted December 21*

Changes the effective date of above provision from 2009 to 2001.

10. Overpayment Recovery

1984

*Public Law 98-369,
enacted July 18*

Limits the rate of recovering overpayments from monthly payments to the lesser of: (1) the monthly payment, or (2) 10 percent of a recipient’s monthly income. Permits a higher or lower adjustment at the request of the recipient subject to the agreement of the Commissioner. The limit does not apply if fraud, willful misrepresentation, or concealment of material information was involved on the part of the recipient or spouse in connection with the overpayment.

Act

Waives recovery of certain overpayments due to amount of excess resources of \$50 or less.

Provides authority for the recovery of overpayments from tax refunds.

1998

*Public Law 105-306,
enacted October 28*

Authorizes SSA to collect SSI overpayments for individuals not currently eligible for SSI cash benefits by offsetting Old-Age, Survivors, and Disability Insurance (OASDI) benefits, with a maximum monthly offset of no more than 10 percent of the Social Security benefit. The limit does not apply if fraud, willful misrepresentation, or concealment of material information was involved on the part of the recipient or spouse in connection with the overpayment.

1999

*Public Law 106-169,
enacted December 14*

Makes a representative payee liable for an SSI overpayment caused by a payment made to the representative payee on behalf of a recipient, after the recipient's death and requires SSA to establish an overpayment control record under the representative payee's Social Security number.

Requires SSA to recover SSI overpayments from SSI lump-sum amounts by withholding at least 50 percent of the lump-sum payment or the amount of the overpayment, whichever is less.

Extends all of the debt collection authorities currently available for the collection of overpayments under the OASDI program to the SSI program.

2004

*Public Law 108-203,
enacted March 2*

Provides for recovery of overpayment of SSI benefits by withholding from OASDI and Special Veterans' benefits up to 100 percent of any underpayment of benefits and 10 percent of ongoing monthly benefits. The 10 percent limit does not apply if fraud, willful misrepresentation, or concealment of material information was involved on the part of the recipient or spouse in connection with the overpayment.

Also provides for recovery of overpayment of OASDI or Special Veterans' benefits by withholding from SSI up to 100 percent of any underpayment of benefits, but limits any recovery from SSI benefits to the lesser of 100 percent of the monthly benefit or 10 percent of the individual's total monthly income.

Effective with respect to overpayments that are outstanding at the time of enactment.

B. INCOME AND RESOURCE EXCLUSIONS

1. Earned Income Exclusions

- Any refund of Federal income taxes received under section 32 of the Internal Revenue Code (relating to earned income tax credit) and any payment received under section 3507 of the Internal Revenue Code (relating to advance payment of earned income tax credit);
- Rebate payment received under the Economic Stimulus Act of 2008, and any other credit or refund under section 6428 of the Internal Revenue Code;
- Any refundable child tax credit;
- The first \$30 of earned income in a quarter if it is infrequent or irregular, that is, (1) if it is received only once in a calendar quarter from a single source and is not also received in the month immediately preceding or the month immediately following the month of receipt regardless of whether or not these payments occur in different calendar quarters or (2) if its receipt cannot reasonably be expected;
- Up to \$1,550¹ per month but not more than \$6,240¹ in a calendar year received by a blind or disabled recipient who is a working student under age 22 and regularly attending school;
- Any portion of the monthly \$20 exclusion for unearned income that has not been used;
- \$65 of earned income in a month;
- Amounts used to pay impairment-related work expenses if a recipient is disabled (but not blind) and under age 65 or is disabled (but not blind) and receiving SSI (or disability payments under a former State plan) before age 65²;
- One-half of remaining earned income in a month;
- Earned income used to meet any expenses reasonably attributable to the earning of the income if the recipient is blind and under age 65 or if he/she received SSI as a blind person prior to age 65²;
- Any earned income received and used to fulfill an approved plan to achieve self-support if the recipient is blind or disabled and under age 65 or is blind or disabled and received SSI as a blind or disabled individual in the month before he/she attained age 65;
- Any earned income deposited into either a Temporary Assistance for Needy Families (TANF) or Assets for Independence Act individual development account (IDA); and
- Some Federal laws other than the Social Security Act provide for the exclusion of earned income for SSI purposes. For the most part, the income received under these laws relates to assistance received in the form of food, housing and utilities, educational and employment benefits or benefits derived from being a member of a Native American tribe. A complete list of laws which exclude earned income under SSI can be found in the Federal Regulations Appendix to Subpart K 20 CFR 416.

¹ Increased from \$1,510 and \$6,100, respectively, effective January 1, 2008 (72 FR 60705). Under current regulations this exclusion is increased yearly based on changes in the cost of living.

² Amounts used to pay impairment-related work expenses are deducted before the one-half of earned income deduction, whereas amounts used to pay the work expenses of the blind are deducted after the one-half of earned income deduction. In effect, amounts of blind work expenses reduce SSI earned income twice as much as the same amounts of impairment-related work expenses.

2. Unearned Income Exclusions

- Any public agency's refund of taxes on real property or food;
- Assistance based on need which is wholly funded by a State or one of its political subdivisions. This includes State supplementation of Federal SSI benefits but does not include payments under a Federal/State grant program such as Temporary Assistance for Needy Families (TANF);
- Any portion of a grant, scholarship, fellowship, or gift to an individual used for paying tuition, fees or other necessary educational expenses. Portions set aside for food or shelter are counted;
- Food raised by a household if it is consumed by that household;
- Assistance received under the Disaster Relief and Emergency Assistance Act and assistance provided under any Federal statute because of a catastrophe which the President of the United States declares to be a major disaster;
- Assistance received under a program for flood mitigation activities;
- The first \$60 of unearned income in a quarter if it is infrequent or irregular, that is, (1) if it is received only once in a calendar quarter from a single source and is not also received in the month immediately preceding or the month immediately following the month of receipt regardless of whether or not these payments occur in different calendar quarters or (2) if its receipt cannot reasonably be expected;
- Any unearned income received and used to fulfill an approved plan to achieve self-support if the recipient is blind or disabled and under age 65 or is blind or disabled and received SSI as a blind or disabled individual in the month before he/she attained age 65;
- Periodic payments made by a State under a program established before July 1, 1973, and based solely on the recipient's length of residence and attainment of age 65;
- Payments for providing foster care to an ineligible child who was placed in the recipient's home by a public or private nonprofit child placement or child care agency;
- Any interest earned on excluded burial funds and any appreciation in the value of an excluded burial arrangement which are left to accumulate and become part of the separately identifiable burial fund;
- Certain support and maintenance assistance provided in the form of home energy assistance;
- One-third of support payments made by an absent parent if the recipient is a child;
- The first \$20 of unearned income in a month other than income in the form of in-kind support and maintenance received in the household of another and income based on need;
- The value of any assistance paid with respect to a dwelling unit under the United States Housing Act of 1937, the National Housing Act, section 101 of the Housing and Urban Development Act of 1965, title V of the Housing Act of 1949, or section 202(h) of the Housing Act of 1959;
- Any interest accrued on and left to accumulate as part of the value of an excluded burial space purchase agreement (effective April 1, 1990) and any interest earned on the value of nonexcludable burial funds and burial space purchase agreements is excluded from income (effective July 1, 2004);
- The value of any commercial transportation ticket, for travel by a recipient or his/her spouse among the 50 States, the District of Columbia, Puerto Rico, the Virgin Islands, Guam, American Samoa and the Northern Mariana Islands, which is received as a gift and is not converted to cash;

- Payments received from a fund established by a State to aid victims of crime;
- Relocation assistance provided by a State or local government that is comparable to assistance provided under title II of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970;
- Hostile fire pay received from one of the uniformed services pursuant to 37 U.S.C. 310 and other kinds of additional pay received by military personnel in a combat zone;
- Interest or other earnings on a dedicated account excluded from resources;
- In-kind gifts not converted to cash and the first \$2,000 annually of cash gifts made by tax-exempt organizations, such as the Make-A-Wish Foundation, to, or for the benefit of, individuals under age 18 with life-threatening conditions;
- Payments made under the Ricky Ray Hemophilia Relief Fund Act of 1998;
- TANF funds made available to an SSI recipient as part of an individual development account (IDA);
- Deposits made by a participating individual or a sponsoring nonprofit organization or State or local government into an IDA under the Assets for Independence Act IDA demonstration project and interest earned on these deposits;
- Unearned income excluded by other Federal laws. See Federal Regulations Appendix to Subpart K 20 CFR 416; and
- Generally, all interest and dividend income earned on countable resources.

3. Resource Exclusions

- The home in which an individual has ownership interest and which serves as the individual's principal place of residence (including the land appertaining thereto);
- Household goods and personal effects;
- One automobile if used for transportation for the beneficiary or a member of the beneficiary's household;
- Property used in a trade or business which is essential to self-support;
- Up to \$6,000 of nonbusiness property which is essential to self-support;
- Resources of a blind or disabled individual which are necessary to fulfill an approved plan to achieve self-support;
- Stock in regional or village corporations held by natives of Alaska during the 20-year period in which the stock is inalienable pursuant to the Alaska Native Claims Settlement Act;
- Life insurance owned by an individual (and spouse, if any) provided that all life insurance on any person does not exceed a face value of \$1,500;
- Restricted allotted Indian lands;
- Disaster relief assistance;

- Assistance received under a program for flood mitigation activities;
- Burial spaces and certain funds up to \$1,500 for burial expenses;
- Title XVI or title II retroactive payments (for 9 months following the month of receipt);
- Housing assistance;
- Refunds of Federal income taxes and advances made by an employer relating to an earned income tax credit (for 9 months following the month of receipt);
- Rebate payment received under the Economic Stimulus Act of 2008, and any other credit or refund under section 6428 of the Internal Revenue Code, during the month of receipt or the following 2 months;
- Refundable child tax credit (for 9 months following the month of receipt);
- Grants, scholarships, fellowships or gifts to be used for tuition or educational fees (for 9 months following the month of receipt);
- Payments received as compensation for expenses incurred or losses suffered as a result of a crime (for 9 months following the month of receipt);
- Relocation assistance from a State or local government (for 9 months following the month of receipt);
- Dedicated financial institution accounts for disabled children;
- In-kind gifts not converted to cash and the first \$2,000 annually of cash gifts made by tax-exempt organizations, such as the Make-A-Wish Foundation, to, or for the benefit of, individuals under age 18 with life-threatening conditions;
- Payments made under the Ricky Ray Hemophilia Relief Fund Act of 1998;
- Amounts deposited into either a TANF or Assets for Independence Act IDA, including matching funds and interest earned on such amounts;
- Certain trusts (e.g., those established by will or certain Medicaid trusts that will repay the State, upon the death of the beneficiary, for the costs of medical assistance provided to that individual); and
- Payments or benefits provided under a Federal statute other than title XVI of the Social Security Act where exclusion is provided by such statute.

C. HISTORICAL ALLOWANCE DATA

At the end of 2007, 84 percent of SSI recipients were receiving benefits based on a determination of disability or blindness. Claims are filed at a local Social Security office and claims requiring an evaluation of disability are sent to the State Disability Determination Services (DDS) for a decision. Initial DDS decisions that are unfavorable to the applicant may be appealed. Historically, all appeals were initiated at the DDS level with a request for reconsideration of that initial denial. Persons denied at the reconsideration level could then apply to the Office of Disability Adjudication and Review (ODAR), formerly known as the Office of Hearings and Appeals (OHA), for a hearing before an Administrative Law Judge (ALJ), and if dissatisfied with the hearing decision could request a review by the Appeals Council. Those dissatisfied with the Appeals Council's action could seek further relief via the Federal court system. This appeals process is still in effect for the majority of new applicants.¹ However, since the mid-1990s SSA has conducted small pilots testing revisions to this process and introduced a modification of this process that has been utilized in 10 States for applications filed on or after October 1, 1999. Under this revised process, the first level of appeal of an initial determination is a request for hearing before an ALJ, thereby eliminating the reconsideration step.

Such a process of application and appeal can, in some cases, span several years. However, before 1993, the only data available on the disability determination process resided in files compiled at each separate stage of the process and only captured various point-in-time snapshots. A complete picture of the disability determination process can be fully understood only by compiling a longitudinal database from administrative records at all levels of appeal. Beginning in 1993, such a longitudinal database (the "Disability Research File") was constructed by SSA's Office of Disability Programs to assist the agency in understanding and managing this process. In constructing this database, some problems were encountered due to inconsistencies in the data collected from all the respective levels of appeal. The following sections present some additional details and qualifications essential to a complete understanding of the resulting data. Following these technical notes are tables based on the Disability Research File which show the latest available summary of results on disability determinations under title XVI.

1. Technical Notes on the Disability Research File

Methods used to build the title XVI Disability Research File—The "base" file for the title XVI research file is the Supplemental Security Record (SSR). This "base" file is matched against records from various other administrative sources, including transactions from the disability determination (SSA-831) files, Social Security number identification records and earnings data, and ODAR case control data.

The process used to build this research file is cumbersome, involving about 200 steps, and generally requiring 2 to 4 months to complete. Much of this complexity flows from the fact that the file is assembled based on filing date cohorts, even though many of the source files do not contain a filing date. The three most recent calendar year cohorts are completely reassembled from the basic data sources. Older calendar year cohorts are updated to reflect activity since the last time the file was built. Since the process is so time consuming, the research file is updated only annually (usually beginning in July). Therefore, research file data are not yet available for claims filed in 2007.

¹ Implementation of the Disability Service Improvement (DSI) process began in the Boston region in August 2006. The DSI process eliminated reconsideration as the first level of appeal of an initial disability determination and introduced review by the Office of the Federal Reviewing Official (OFedRO) in its place. By final rule published in the Federal Register (73 FR 2411) SSA suspended new claims to the OFedRO level; this change was effective March 23, 2008 (73 FR 10381). For those initial disability appeals that had not been transferred to OFedRO on or before the effective date, the procedure for the first level of appeal reverted to that which was in place prior to August 2006; i.e., reconsideration. The DSI regulations also modified administrative appeal of an ALJ's decision or dismissal. These modifications remain in effect in the Boston region.

Methods used for estimating results (through February 2008) for claims filed in 2007—Although decision counts are available for 2007 filers (from many of the “source” files), those counts do not translate directly into the claims/appeals counts included in the following tables, due to the consolidation of multiple transactions (and application of claims-based tolerance rules) which occurs when the research file is built.

To prepare preliminary estimates of results (through February 2008) for 2007 filers, we started from the latest available transaction data, such as the SSA-831 data, and took into account recent years’ experience of the relationship between corresponding earlier transaction data and the resulting claims/appeals data in completed research files. Estimates of ODAR appeals activity are taken from a file which tracks individual claimants, rather than individual claims. Therefore, this may result in a slight undercount of ODAR activity.

While we believe that the methods used are reasonable, it must be emphasized that the resulting estimates may prove to be of limited reliability, especially in light of the fact that the estimates give results only through February 2008, whereas the final research files will reflect information through June 2008. Actual data for 2007 will be available to replace these estimates in the 2009 Annual Report.

2. General Considerations

Some general points that apply to tables V.C1 and V.C2 are as follows:

- Data for 1988-2006 filers are as of August 2007 for decisions at the DDS and OFedRO levels. Results for those years’ filers have been updated to include results at the hearing and Appeals Council levels and Federal courts through September 2007.
- Data for 2007 filers are preliminary estimates as of February 2008, and reflect larger numbers of claims still pending. February 2008 data on number of claims appealed may be too low because larger numbers of claimants are still within the period allowed for filing an appeal (i.e., larger numbers of recently denied claimants who have not yet filed an appeal may appeal before the time limit runs out).
- Remaining appeals will affect the results. Since allowances are generally processed more quickly than denials, we expect that the percent allowed will ultimately be lower as all cases are processed.
- In certain pilot activities and under the revised process introduced October 1, 1999 in 10 States, initial denials can be appealed directly to ODAR without a separate reconsideration step. As a result the appeals of initial denials shown in these tables include cases which will not receive a decision at the reconsideration level.
- The cases appealed to the OFedRO level under the DSI process are not shown separately, but are included in these tables in the reconsideration counts.

Table V.C1.—Disabled Adult Claims: Disposition of Applications for SSI Disability Benefits by Year of Filing¹ and Level of Decision

Calendar year of filing	Total claims filed	Initial decisions						
		Pending	Allowances		Denials		Appeals of initial denials	
			Number	Percent ²	Number	Percent ²	Number ³	Percent ⁴
1988	946,603	—	272,204	28.8	674,399	71.2	265,151	39.3
1989	969,218	—	292,044	30.1	677,174	69.9	274,823	40.6
1990	1,099,805	—	347,823	31.6	751,982	68.4	320,207	42.6
1991	1,288,331	—	415,336	32.2	872,995	67.8	383,669	43.9
1992	1,415,624	—	436,888	30.9	978,736	69.1	433,244	44.3
1993	1,503,278	—	416,300	27.7	1,086,978	72.3	485,166	44.6
1994	1,436,958	—	353,995	24.6	1,082,963	75.4	482,533	44.6
1995	1,318,416	—	323,084	24.5	995,332	75.5	439,166	44.1
1996	1,247,926	—	305,351	24.5	942,575	75.5	406,425	43.1
1997	1,110,898	—	292,839	26.4	818,059	73.6	357,973	43.8
1998	1,108,957	—	322,734	29.1	786,223	70.9	339,288	43.2
1999	1,104,975	—	326,607	29.6	778,368	70.4	332,080	42.7
2000	1,139,571	—	344,163	30.2	795,408	69.8	332,935	41.9
2001	1,216,182	—	365,932	30.1	850,250	69.9	355,165	41.8
2002	1,322,683	—	371,233	28.1	951,450	71.9	398,582	41.9
2003	1,403,442	—	378,538	27.0	1,024,904	73.0	424,698	41.4
2004	1,475,930	—	384,208	26.0	1,091,722	74.0	426,986	39.1
2005	1,473,235	—	368,836	25.0	1,104,399	75.0	405,604	36.7
2006	1,470,761	8,347	349,627	23.9	1,112,787	76.1	388,802	34.9
2007	1,467,430	211,598	368,593	29.4	887,239	70.6	276,627	31.2

Calendar year of filing	Reconsiderations ⁵					Appeals beyond reconsideration ⁶				
	Pending	Allowances		Denials	Appeals of reconsideration denials		Pending ⁸	Allowances		Denials ¹⁰
		Number	Percent ²		Number ⁷	Percent ⁴		Number	Percent ⁹	
1988	—	38,385	14.5	226,766	140,663	62.0	—	82,414	58.6	58,249
1989	—	43,505	15.8	231,318	146,082	63.2	—	90,169	61.7	55,913
1990	—	52,055	16.3	268,152	175,520	65.5	—	109,098	62.2	66,422
1991	—	59,157	15.4	324,512	221,816	68.4	—	139,698	63.0	82,118
1992	—	58,819	13.6	374,425	260,554	69.6	—	159,084	61.1	101,470
1993	—	57,938	11.9	427,228	294,801	69.0	—	170,402	57.8	124,399
1994	—	55,822	11.6	426,711	293,448	68.8	—	164,537	56.1	128,911
1995	—	51,697	11.8	387,469	264,270	68.2	—	143,582	54.3	120,688
1996	—	49,263	12.1	357,162	242,407	67.9	—	133,323	55.0	109,084
1997	—	47,573	13.4	306,561	213,969	69.8	—	121,619	55.8	96,189
1998	—	46,507	13.7	292,272	203,350	69.6	—	115,291	56.6	88,568
1999	—	42,135	13.3	274,269	193,016	70.4	—	118,726	56.9	89,966
2000	—	39,522	14.3	237,714	170,264	71.6	2,339	125,449	56.1	98,175
2001	—	38,987	13.9	241,200	172,082	71.3	2,997	135,759	55.6	108,304
2002	—	40,290	12.9	271,278	193,416	71.3	4,912	152,981	55.5	122,537
2003	—	40,861	12.2	293,433	208,070	70.9	11,652	159,469	55.6	127,353
2004	—	38,858	11.6	295,019	209,106	70.9	48,330	143,780	56.6	110,105
2005	—	36,046	11.3	282,299	196,116	69.5	140,483	85,171	59.6	57,721
2006	22,907	24,683	9.0	251,015	161,749	64.4	218,710	21,073	63.4	12,163
2007	66,120	17,391	11.8	130,240	64,005	49.1	121,716	3,718	72.0	1,447

Table V.C1.—Disabled Adult Claims: Disposition of Applications for SSI Disability Benefits by Year of Filing¹ and Level of Decision (Cont.)Selected summary case information by decision status: *Numbers of cases*

Calendar year of filing	Total claims filed	Initial decisions pending	Total initial decisions	Allowances	Denials	
					Appeal decision pending	No appeal pending
1988	946,603	—	946,603	393,003	—	553,600
1989	969,218	—	969,218	425,718	—	543,500
1990	1,099,805	—	1,099,805	508,976	—	590,829
1991	1,288,331	—	1,288,331	614,191	—	674,140
1992	1,415,624	—	1,415,624	654,791	—	760,833
1993	1,503,278	—	1,503,278	644,640	—	858,638
1994	1,436,958	—	1,436,958	574,354	—	862,604
1995	1,318,416	—	1,318,416	518,363	—	800,053
1996	1,247,926	—	1,247,926	487,937	—	759,989
1997	1,110,898	—	1,110,898	462,031	—	648,867
1998	1,108,957	—	1,108,957	484,532	—	624,425
1999	1,104,975	—	1,104,975	487,468	—	617,507
2000	1,139,571	—	1,139,571	509,134	2,339	628,098
2001	1,216,182	—	1,216,182	540,678	2,997	672,507
2002	1,322,683	—	1,322,683	564,504	4,912	753,267
2003	1,403,442	—	1,403,442	578,868	11,652	812,922
2004	1,475,930	—	1,475,930	566,846	48,330	860,754
2005	1,473,235	—	1,473,235	490,053	140,483	842,699
2006	1,470,761	8,347	1,462,414	395,383	241,617	825,414
2007	1,467,430	211,598	1,255,832	389,702	187,836	678,294

Selected summary case information by decision status

Calendar year of filing	Numbers as a percentage of total claims filed			Numbers as a percentage of total initial decisions			
	Initial decision pending	Allowances	Denials		Allowances	Denials	
			Appeal decision pending	No appeal pending		Appeal decision pending	No appeal pending
1988	—	41.5	—	58.5	41.5	—	58.5
1989	—	43.9	—	56.1	43.9	—	56.1
1990	—	46.3	—	53.7	46.3	—	53.7
1991	—	47.7	—	52.3	47.7	—	52.3
1992	—	46.3	—	53.7	46.3	—	53.7
1993	—	42.9	—	57.1	42.9	—	57.1
1994	—	40.0	—	60.0	40.0	—	60.0
1995	—	39.3	—	60.7	39.3	—	60.7
1996	—	39.1	—	60.9	39.1	—	60.9
1997	—	41.6	—	58.4	41.6	—	58.4
1998	—	43.7	—	56.3	43.7	—	56.3
1999	—	44.1	—	55.9	44.1	—	55.9
2000	—	44.7	0.2	55.1	44.7	0.2	55.1
2001	—	44.5	.2	55.3	44.5	.2	55.3
2002	—	42.7	.4	56.9	42.7	.4	56.9
2003	—	41.2	.8	57.9	41.2	.8	57.9
2004	—	38.4	3.3	58.3	38.4	3.3	58.3
2005	—	33.3	9.5	57.2	33.3	9.5	57.2
2006	0.6	26.9	16.4	56.1	27.0	16.5	56.4
2007	14.4	26.6	12.8	46.2	31.0	15.0	54.0

¹ Data for claims filed in 1988-2006 reflect results as of August 2007 at the DDS and OFedRO levels and as of September 2007 at the hearing and Appeals Council levels and the Federal courts. The numbers of total claims filed for 2004-06 are subject to change. Data for claims filed in 2007 are preliminary estimates as of February 2008. The ultimate numbers of allowances and denials are subject to change until all initial decisions have been completed and all appeals are final.

² Percentage of decisions at this level.

³ Includes certain cases which can be appealed directly to the hearing level.

⁴ Percentage of denials at this level appealed to next level.

⁵ Includes cases reviewed by a Federal Reviewing Official (FedRO) as part of the DSI process.

⁶ Includes cases appealed to the hearing and Appeals Council levels and to the Federal courts.

⁷ Number of persons appealing beyond the reconsideration level.

⁸ Includes cases remanded to SSA from the Federal courts.

⁹ Percentage of decisions at this level. For years in which decisions are still pending, the preliminary percentage shown is expected to ultimately be lower as all cases are processed. This occurs because allowances are generally processed more quickly than denials.

¹⁰ Includes denied claims where the final administrative action was a dismissal of an appeal request (e.g., the appeal was not filed timely or the applicant failed to appear at the scheduled hearing).

Table V.C2.—Disabled Child Claims: Disposition of Applications for SSI Disability Benefits by Year of Filing¹ and Level of Decision

Calendar year of filing	Total claims filed	Initial decisions						
		Pending	Allowances		Denials		Appeals of initial denials	
			Number	Percent ²	Number	Percent ²	Number ³	Percent ⁴
1991	250,962	—	148,220	59.1	102,742	40.9	24,702	24.0
1992	372,971	—	189,079	50.7	183,892	49.3	49,297	26.8
1993	496,131	—	212,268	42.8	283,863	57.2	75,967	26.8
1994	525,013	—	172,219	32.8	352,794	67.2	92,093	26.1
1995	487,730	—	144,231	29.6	343,499	70.4	86,841	25.3
1996	453,473	—	127,416	28.1	326,057	71.9	75,013	23.0
1997	332,032	—	106,528	32.1	225,504	67.9	51,493	22.8
1998	335,732	—	123,249	36.7	212,483	63.3	50,109	23.6
1999	342,153	—	128,543	37.6	213,610	62.4	49,562	23.2
2000	349,288	—	136,989	39.2	212,299	60.8	48,169	22.7
2001	367,751	—	151,288	41.1	216,463	58.9	49,089	22.7
2002	402,130	—	163,772	40.7	238,358	59.3	55,863	23.4
2003	425,365	—	171,183	40.2	254,182	59.8	59,431	23.4
2004	435,629	—	173,163	39.8	262,466	60.2	58,135	22.1
2005	425,474	—	162,452	38.2	263,022	61.8	54,436	20.7
2006	433,285	1,380	159,157	36.9	272,748	63.1	55,589	20.4
2007	436,295	51,834	161,845	42.1	222,616	57.9	37,758	17.0

Calendar year of filing	Reconsiderations ⁵					Appeals beyond reconsideration ⁶				
	Pending	Allowances		Denials	Appeals of reconsideration denials		Pending ⁸	Allowances		Denials ¹⁰
		Number	Percent ²		Number ⁷	Percent ⁴		Number	Percent ⁹	
1991	—	5,605	22.7	19,097	9,196	48.2	—	3,884	42.2	5,312
1992	—	9,463	19.2	39,834	19,770	49.6	—	7,523	38.1	12,247
1993	—	11,338	14.9	64,629	31,193	48.3	—	10,638	34.1	20,555
1994	—	11,332	12.3	80,761	38,433	47.6	—	12,954	33.7	25,479
1995	—	10,287	11.8	76,554	35,592	46.5	—	10,924	30.7	24,668
1996	—	9,355	12.5	65,658	27,920	42.5	—	8,853	31.7	19,067
1997	—	8,266	16.2	42,705	18,916	44.3	—	7,027	36.2	12,411
1998	—	7,799	15.6	42,237	18,707	44.3	—	7,032	37.4	11,748
1999	—	7,196	15.5	39,377	17,782	45.2	—	7,832	37.7	12,939
2000	—	6,932	18.3	31,051	14,428	46.5	245	8,921	36.6	15,448
2001	—	6,807	18.7	29,643	13,576	45.8	230	9,328	35.9	16,657
2002	—	7,426	17.9	34,024	15,329	45.1	354	10,384	35.3	19,004
2003	—	7,690	17.1	37,211	16,374	44.0	829	10,543	35.1	19,532
2004	—	7,123	16.2	36,776	15,906	43.3	4,669	9,120	35.8	16,353
2005	—	7,123	17.0	34,778	14,996	43.1	14,659	4,977	38.7	7,895
2006	2,660	6,353	16.0	33,426	13,504	40.4	23,752	1,378	47.5	1,524
2007	7,631	2,731	12.9	18,440	5,432	29.5	14,006	111	29.1	271

Table V.C2.—Disabled Child Claims: Disposition of Applications for SSI Disability Benefits by Year of Filing¹ and Level of Decision (Cont.)Selected summary case information by decision status: *Numbers of cases*

Calendar year of filing	Total claims filed	Initial decisions pending	Total initial decisions	Allowances	Denials	
					Appeal decision pending	No appeal pending
1991	250,962	—	250,962	157,709	—	93,253
1992	372,971	—	372,971	206,065	—	166,906
1993	496,131	—	496,131	234,244	—	261,887
1994	525,013	—	525,013	196,505	—	328,508
1995	487,730	—	487,730	165,442	—	322,288
1996	453,473	—	453,473	145,624	—	307,849
1997	332,032	—	332,032	121,821	—	210,211
1998	335,732	—	335,732	138,080	—	197,652
1999	342,153	—	342,153	143,571	—	198,582
2000	349,288	—	349,288	152,842	245	196,201
2001	367,751	—	367,751	167,423	230	200,098
2002	402,130	—	402,130	181,582	354	220,194
2003	425,365	—	425,365	189,416	829	235,120
2004	435,629	—	435,629	189,406	4,669	241,554
2005	425,474	—	425,474	174,552	14,659	236,263
2006	433,285	1,380	431,905	166,888	26,412	238,605
2007	436,295	51,834	384,461	164,687	21,637	198,137

Selected summary case information by decision status

Calendar year of filing	Numbers as a percentage of total claims filed				Numbers as a percentage of total initial decisions			
	Initial decision pending	Allowances	Denials		Allowances	Denials		
			Appeal decision pending	No appeal pending		Appeal decision pending	No appeal pending	
1991	—	62.8	—	37.2	62.8	—	37.2	
1992	—	55.2	—	44.8	55.2	—	44.8	
1993	—	47.2	—	52.8	47.2	—	52.8	
1994	—	37.4	—	62.6	37.4	—	62.6	
1995	—	33.9	—	66.1	33.9	—	66.1	
1996	—	32.1	—	67.9	32.1	—	67.9	
1997	—	36.7	—	63.3	36.7	—	63.3	
1998	—	41.1	—	58.9	41.1	—	58.9	
1999	—	42.0	—	58.0	42.0	—	58.0	
2000	—	43.8	0.1	56.2	43.8	0.1	56.2	
2001	—	45.5	.1	54.4	45.5	.1	54.4	
2002	—	45.2	.1	54.8	45.2	.1	54.8	
2003	—	44.5	.2	55.3	44.5	.2	55.3	
2004	—	43.5	1.1	55.4	43.5	1.1	55.4	
2005	—	41.0	3.4	55.5	41.0	3.4	55.5	
2006	0.3	38.5	6.1	55.1	38.6	6.1	55.2	
2007	11.9	37.7	5.0	45.4	42.8	5.6	51.5	

¹ Data for claims filed in 1991-2006 reflect results as of August 2007 at the DDS and OFedRO levels and as of September 2007 at the hearing and Appeals Council levels and the Federal courts. The numbers of total claims filed for 2004-06 are subject to change. Data for claims filed in 2007 are preliminary estimates as of February 2008. The ultimate numbers of allowances and denials are subject to change until all initial decisions have been completed and all appeals are final.

² Percentage of decisions at this level.

³ Includes certain cases which can be appealed directly to the hearing level.

⁴ Percentage of denials at this level appealed to next level.

⁵ Includes cases reviewed by a Federal Reviewing Official (FedRO) as part of the DSI process.

⁶ Includes cases appealed to the hearing and Appeals Council levels and to the Federal courts.

⁷ Number of persons appealing beyond the reconsideration level.

⁸ Includes cases remanded to SSA from the Federal courts.

⁹ Percentage of decisions at this level. For years in which decisions are still pending, the preliminary percentage shown is expected to ultimately be lower as all cases are processed. This occurs because allowances are generally processed more quickly than denials.

¹⁰ Includes denied claims where the final administrative action was a dismissal of an appeal request (e.g., the appeal was not filed timely or the applicant failed to appear at the scheduled hearing).

D. HISTORICAL REDETERMINATION AND CONTINUING DISABILITY REVIEW DATA**1. Redeterminations**

Redeterminations are reviews of all of the nonmedical factors of eligibility to determine whether a recipient is still eligible for SSI and still receiving the correct payment amount. There are two types of redeterminations: scheduled and unscheduled. Except for certain institutionalized individuals, all recipients are periodically scheduled for a redetermination. Every year SSA schedules for redetermination the cases most likely to have payment error, but even the cases unlikely to have payment error are scheduled for review at least once every 6 years. Unscheduled redeterminations are completed on an as needed basis when recipients report, or we discover, certain changes in circumstances that could affect the continuing SSI payment amount. The numbers of redeterminations completed are subject to some year-to-year fluctuation because of variation in the numbers of unscheduled redeterminations completed and in the numbers of scheduled redeterminations that were completed during the fiscal year due to administrative resource limitations and the impact of other workload requirements on the field offices. When redeterminations cannot be completed in the fiscal year scheduled, they are carried over into the next fiscal year. Table V.D1 provides historical data on numbers of redeterminations completed by fiscal year.

Table V.D1.—SSI Redeterminations Completed, Fiscal Years 1986-2007
[In thousands]

Fiscal year	Number of redeterminations
1986.....	2,278
1987.....	2,244
1988.....	1,997
1989.....	2,226
1990.....	2,103
1991.....	2,138
1992.....	2,321
1993.....	2,223
1994.....	¹ 1,900
1995.....	² 1,597
1996.....	1,763
1997.....	1,773
1998.....	1,853
1999.....	2,122
2000.....	2,182
2001.....	2,316
2002.....	2,311
2003.....	2,450
2004.....	2,279
2005.....	³ 1,725
2006.....	³ 1,071
2007.....	³ 1,039

¹ Decrease in number of redeterminations completed in fiscal year 1994 due to low-error profile redeterminations not being completed from January through September 1994.

² Effective fiscal year 1995, approximately 200,000 fewer redeterminations were selected annually due to a change from a 3-year to a 6-year redetermination cycle for low-error profile cases.

³ Fewer redeterminations were selected in fiscal years 2005-2007 due to limitations on administrative funding.

During periods between scheduled redeterminations, SSA uses the limited issue process to detect situations that have the potential to affect the continuing eligibility of SSI recipients and SSI payment amounts. SSA conducts periodic computer matches between its own systems and the systems of other Federal and State agencies to determine if the income and resources information on SSI recipients' records is in conflict with data obtained from the other systems. Matches detecting conflicting information usually result in the posting of an indicator to the Supplemental Security Record of the SSI recipient. The limited issue case is then selected for a field office review of the issue for which the indicator was posted. In fiscal year 2007, SSA released over 328,000 limited issue cases for development by field offices. The field offices processed over 345,000 limited issue cases.¹

¹ Beginning with fiscal year 2007, SSA measures the total number of limited issues processed by field offices instead of the percent of the selected limited issues processed by the field offices.

2. Continuing Disability Reviews

Following enactment of the Social Security Disability Amendments of 1980, section 221(i) of the Social Security Act generally requires SSA to review the continuing eligibility of title II disabled beneficiaries at least every 3 years. A similar requirement was not put in place at that time for disabled title XVI recipients. Although the Committee on Finance of the Senate stated in its report on this legislation that the same continuing disability review (CDR) procedures should be applied with respect to both the title II and title XVI programs, title XVI was not amended to accomplish this. Section 1614(a)(4) of the Act gives SSA discretionary authority to conduct periodic CDRs on SSI recipients. On September 28, 1994, SSA issued a Federal Register notice that periodic SSI CDRs would begin on October 1, 1994. In 1994 and again in 1996 legislation was enacted adding some mandates for the performance of CDRs under the SSI program.

Public Law 103-296 specified that during each of fiscal years 1996, 1997, and 1998, SSA was required to conduct CDRs on a minimum of 100,000 SSI recipients. In addition, during the same period, SSA was required to redetermine the SSI eligibility of at least one-third of all SSI child recipients who reached age 18 after April 1995 during the 1-year period following attainment of age 18. Such redeterminations for persons turning age 18 could count toward the 100,000 CDR requirement.

Public Law 104-193 extended the requirement of redetermination of SSI eligibility to all SSI child recipients who reach age 18, with such redetermination being based on the adult eligibility criteria. This law also added the requirement that a CDR be performed:

- At least once every 3 years for SSI recipients under age 18 who are eligible by reason of an impairment which is likely to improve, and
- Not later than 12 months after birth for recipients whose low birth weight is a contributing factor material to the determination of their disability unless the Commissioner determines that the impairment is not expected to improve within 12 months of the child's birth.

Public Law 105-33 gave SSA some additional flexibility in the scheduling of these categories of CDRs.

In order to handle the large CDR workload mandated under these various provisions, SSA developed, beginning in 1993, a process by which certain title II cases scheduled for a CDR would be screened using the results of a profiling process which included a mailer interview for some cases. In 1996 the profiling process was extended to title XVI adults who were scheduled for a CDR. The screening process resulted in the deferral of full medical reviews for 103,119 cases for which a scheduled title XVI CDR was processed in fiscal year 2007.

For cases involving individuals who receive both title II and title XVI benefits, CDRs are typically initiated as title II CDRs with the results of the review affecting eligibility for benefits under both programs. Tables V.D2 and V.D3 present the latest available summary of results¹ on CDRs of title XVI recipients performed under titles II and XVI since 1993. These tables include only cases for which a full medical review was conducted. In particular they do not include:

- Cases for which a mailer was completed, but for which a full medical review was deferred;
- CDRs initiated as the result of work activity on the part of the beneficiary/recipient; and

¹ The numbers of SSI recipients whose benefits are ceased as a result of CDRs are included in these tables. Estimates of Federal SSI program savings resulting from the cessation of benefits are reported to Congress in the Annual Report of Continuing Disability Reviews. The most recent such report was issued November 5, 2007, presenting estimates of the effects of CDRs conducted in fiscal year 2006.

2008 SSI Annual Report

- Miscellaneous other CDRs processed by the State Disability Determination Services but not as part of the normal CDR scheduling process (such as voluntary and third-party reports of medical improvement, post-transplant end-stage renal disease cases, and vocational rehabilitation reports).

In contrast with the allowance data presented in section V.C, the CDR data is tabulated on a cohort basis by the date of initial decision.

Table V.D2.—SSI Disabled Adult Reviews: *Disposition¹ of Continuing Disability Medical Reviews by Fiscal Year of Initial Decision and Level of Decision*

Fiscal year of initial DDS decision	Initial decisions						
	Total initial DDS decisions	Continuations		Cessations		Appeals to reconsideration	
		Number	Percent ²	Number	Percent ²	Number	Percent ³
Reviews of concurrent title II/XVI cases initiated under title II							
1993	1,143	1,083	94.8	60	5.2	52	86.7
1994	10,945	9,127	83.4	1,818	16.6	1,253	68.9
1995	16,736	12,484	74.6	4,252	25.4	2,905	68.3
1996	26,884	20,636	76.8	6,248	23.2	4,119	65.9
1997	51,466	40,741	79.2	10,725	20.8	7,344	68.5
1998	81,185	68,533	84.4	12,652	15.6	8,723	68.9
1999	80,816	70,353	87.1	10,463	12.9	6,201	59.3
2000	105,787	93,962	88.8	11,825	11.2	6,851	57.9
2001	110,341	99,666	90.3	10,675	9.7	6,294	59.0
2002	103,947	92,069	88.6	11,878	11.4	7,090	59.7
2003	72,175	63,021	87.3	9,154	12.7	5,448	59.5
2004	84,622	75,047	88.7	9,575	11.3	5,920	61.8
2005	80,597	70,687	87.7	9,910	12.3	6,033	60.9
2006	71,825	63,789	88.8	8,036	11.2	5,026	62.5
2007	26,469	22,893	86.5	3,576	13.5	1,687	47.2
Title XVI initiated reviews							
1993	—	—	—	—	—	—	—
1994	—	—	—	—	—	—	—
1995	4,287	3,277	76.4	1,010	23.6	665	65.8
1996	55,025	46,273	84.1	8,752	15.9	6,146	70.2
1997	69,557	57,662	82.9	11,895	17.1	8,722	73.3
1998	75,071	64,829	86.4	10,242	13.6	7,239	70.7
1999	140,429	125,079	89.1	15,350	10.9	10,292	67.0
2000	173,470	156,065	90.0	17,405	10.0	10,923	62.8
2001	143,902	126,610	88.0	17,292	12.0	10,262	59.3
2002	172,527	150,837	87.4	21,690	12.6	13,342	61.5
2003	213,212	191,061	89.6	22,151	10.4	14,682	66.3
2004	221,129	199,938	90.4	21,191	9.6	14,636	69.1
2005	110,072	97,330	88.4	12,742	11.6	8,205	64.4
2006	40,605	35,957	88.6	4,648	11.4	2,916	62.7
2007	18,172	16,006	88.1	2,166	11.9	1,109	51.2
Total reviews, SSI disabled adults							
1993	1,143	1,083	94.8	60	5.2	52	86.7
1994	10,945	9,127	83.4	1,818	16.6	1,253	68.9
1995	21,023	15,761	75.0	5,262	25.0	3,570	67.8
1996	81,909	66,909	81.7	15,000	18.3	10,265	68.4
1997	121,023	98,403	81.3	22,620	18.7	16,066	71.0
1998	156,256	133,362	85.3	22,894	14.7	15,962	69.7
1999	221,245	195,432	88.3	25,813	11.7	16,493	63.9
2000	279,257	250,027	89.5	29,230	10.5	17,774	60.8
2001	254,243	226,276	89.0	27,967	11.0	16,556	59.2
2002	276,474	242,906	87.9	33,568	12.1	20,432	60.9
2003	285,387	254,082	89.0	31,305	11.0	20,130	64.3
2004	305,751	274,985	89.9	30,766	10.1	20,556	66.8
2005	190,669	168,017	88.1	22,652	11.9	14,238	62.9
2006	112,430	99,746	88.7	12,684	11.3	7,942	62.6
2007	44,641	38,899	87.1	5,742	12.9	2,796	48.7

Table V.D2.—SSI Disabled Adult Reviews: Disposition¹ of Continuing Disability Medical Reviews by Fiscal Year of Initial Decision and Level of Decision (Cont.)

Fiscal year of initial DDS decision	Reconsiderations						Appeals beyond reconsideration ⁴			
	Pending	Continuations		Cessations	Appeals to beyond reconsideration		Pending	Continuations		Cessations
		Number	Percent ²		Number ⁵	Percent ³		Number	Percent	
Reviews of concurrent title II/XVI cases initiated under title II										
1993	—	22	42.3	30	14	46.7	—	9	64.3	5
1994	—	541	43.2	712	399	56.0	—	177	44.4	222
1995	—	1,245	42.9	1,660	1,007	60.7	—	382	37.9	625
1996	—	1,875	45.5	2,244	1,313	58.5	—	427	32.5	886
1997	—	4,297	58.5	3,047	2,257	74.1	—	973	43.1	1,284
1998	—	5,503	63.1	3,220	2,466	76.6	—	1,158	47.0	1,308
1999	—	3,974	64.1	2,227	1,542	69.2	—	679	44.0	863
2000	3	4,427	64.6	2,421	1,556	64.3	—	659	42.4	897
2001	6	4,177	66.4	2,111	1,240	58.7	—	494	39.8	746
2002	12	4,787	67.6	2,291	1,450	63.3	3	589	40.7	858
2003	8	3,575	65.7	1,865	1,177	63.1	3	477	40.6	697
2004	42	3,781	64.3	2,097	1,409	67.2	67	544	40.5	798
2005	182	3,833	65.5	2,018	1,407	69.7	310	455	41.5	642
2006	419	3,042	66.0	1,565	1,050	67.1	535	243	47.2	272
2007	189	1,104	73.7	394	155	39.3	124	14	45.2	17
Title XVI initiated reviews										
1993	—	—	—	—	—	—	—	—	—	—
1994	—	—	—	—	—	—	—	—	—	—
1995	—	241	36.2	424	267	63.0	—	87	32.6	180
1996	—	3,289	53.5	2,857	1,946	68.1	—	623	32.0	1,323
1997	—	5,271	60.4	3,451	2,575	74.6	—	986	38.3	1,589
1998	—	4,527	62.5	2,712	1,987	73.3	—	781	39.3	1,206
1999	—	6,610	64.2	3,682	2,508	68.1	—	973	38.8	1,535
2000	—	6,823	62.5	4,100	2,778	67.8	—	1,057	38.0	1,721
2001	—	6,224	60.7	4,038	2,618	64.8	—	934	35.7	1,684
2002	31	8,160	61.3	5,151	3,322	64.5	2	1,099	33.1	2,221
2003	18	9,656	65.8	5,008	3,334	66.6	2	1,212	36.4	2,120
2004	12	9,405	64.3	5,219	3,763	72.1	138	1,337	36.9	2,288
2005	131	5,237	64.9	2,837	2,000	70.5	413	553	34.8	1,034
2006	155	1,801	65.2	960	625	65.1	303	105	32.6	217
2007	80	755	73.4	274	134	48.9	116	4	22.2	14
Total reviews, SSI disabled adults										
1993	—	22	42.3	30	14	46.7	—	9	64.3	5
1994	—	541	43.2	712	399	56.0	—	177	44.4	222
1995	—	1,486	41.6	2,084	1,274	61.1	—	469	36.8	805
1996	—	5,164	50.3	5,101	3,259	63.9	—	1,050	32.2	2,209
1997	—	9,568	59.6	6,498	4,832	74.4	—	1,959	40.5	2,873
1998	—	10,030	62.8	5,932	4,453	75.1	—	1,939	43.5	2,514
1999	—	10,584	64.2	5,909	4,050	68.5	—	1,652	40.8	2,398
2000	3	11,250	63.3	6,521	4,334	66.5	—	1,716	39.6	2,618
2001	6	10,401	62.8	6,149	3,858	62.7	—	1,428	37.0	2,430
2002	43	12,947	63.5	7,442	4,772	64.1	5	1,688	35.4	3,079
2003	26	13,231	65.8	6,873	4,511	65.6	5	1,689	37.5	2,817
2004	54	13,186	64.3	7,316	5,172	70.7	205	1,881	37.9	3,086
2005	313	9,070	65.1	4,855	3,407	70.2	723	1,008	37.6	1,676
2006	574	4,843	65.7	2,525	1,675	66.3	838	348	41.6	489
2007	269	1,859	73.6	668	289	43.3	240	18	36.7	31

Table V.D2.—SSI Disabled Adult Reviews: Disposition¹ of Continuing Disability Medical Reviews by Fiscal Year of Initial Decision and Level of Decision (Cont.)

Fiscal year of initial DDS decision	Selected summary case information by decision status as of February 2008						
	Total initial decisions	Numbers of cases			Numbers as a percentage of total initial decisions		
		Continuations	Cessations pending an appeal decision	Cessations with no appeal pending	Continuations	Cessations pending an appeal decision	Cessations with no appeal pending
Reviews of concurrent title II/XVI cases initiated under title II							
1993	1,143	1,114	—	29	97.5	—	2.5
1994	10,945	9,845	—	1,100	89.9	—	10.1
1995	16,736	14,111	—	2,625	84.3	—	15.7
1996	26,884	22,938	—	3,946	85.3	—	14.7
1997	51,466	46,011	—	5,455	89.4	—	10.6
1998	81,185	75,194	—	5,991	92.6	—	7.4
1999	80,816	75,006	—	5,810	92.8	—	7.2
2000	105,787	99,048	3	6,736	93.6	6/	6.4
2001	110,341	104,337	6	5,998	94.6	6/	5.4
2002	103,947	97,445	15	6,487	93.7	6/	6.2
2003	72,175	67,073	11	5,091	92.9	6/	7.1
2004	84,622	79,372	109	5,141	93.8	0.1	6.1
2005	80,597	74,975	492	5,130	93.0	.6	6.4
2006	71,825	67,074	954	3,797	93.4	1.3	5.3
2007	26,469	24,011	313	2,145	90.7	1.2	8.1
Title XVI initiated reviews							
1993	—	—	—	—	—	—	—
1994	—	—	—	—	—	—	—
1995	4,287	3,605	—	682	84.1	—	15.9
1996	55,025	50,185	—	4,840	91.2	—	8.8
1997	69,557	63,919	—	5,638	91.9	—	8.1
1998	75,071	70,137	—	4,934	93.4	—	6.6
1999	140,429	132,662	—	7,767	94.5	—	5.5
2000	173,470	163,945	—	9,525	94.5	—	5.5
2001	143,902	133,768	—	10,134	93.0	—	7.0
2002	172,527	160,096	33	12,398	92.8	6/	7.2
2003	213,212	201,929	20	11,263	94.7	6/	5.3
2004	221,129	210,680	150	10,299	95.3	.1	4.7
2005	110,072	103,120	544	6,408	93.7	.5	5.8
2006	40,605	37,863	458	2,284	93.2	1.1	5.6
2007	18,172	16,765	196	1,211	92.3	1.1	6.7
Total reviews, SSI disabled adults							
1993	1,143	1,114	—	29	97.5	—	2.5
1994	10,945	9,845	—	1,100	89.9	—	10.1
1995	21,023	17,716	—	3,307	84.3	—	15.7
1996	81,909	73,123	—	8,786	89.3	—	10.7
1997	121,023	109,930	—	11,093	90.8	—	9.2
1998	156,256	145,331	—	10,925	93.0	—	7.0
1999	221,245	207,668	—	13,577	93.9	—	6.1
2000	279,257	262,993	3	16,261	94.2	6/	5.8
2001	254,243	238,105	6	16,132	93.7	6/	6.3
2002	276,474	257,541	48	18,885	93.2	6/	6.8
2003	285,387	269,002	31	16,354	94.3	6/	5.7
2004	305,751	290,052	259	15,440	94.9	.1	5.0
2005	190,669	178,095	1,036	11,538	93.4	.5	6.1
2006	112,430	104,937	1,412	6,081	93.3	1.3	5.4
2007	44,641	40,776	509	3,356	91.3	1.1	7.5

¹ Data reflect results as of February 2008. The ultimate numbers of continuations and cessations are subject to change until all appeals are final.

² Percentage of decisions at this level.

³ Percentage of cessations at this level appealed to next level.

⁴ The status and disposition of cases in the Federal courts are not reflected here. However, for cases remanded by the courts to SSA, the status and disposition at ODAR are included. The excluded experience in the Federal courts has a minimal impact on the number of continuations.

⁵ Number of persons appealing beyond the reconsideration level.

⁶ Less than 0.05 percent.

Table V.D3.—SSI Disabled Child Reviews: Disposition¹ of Continuing Disability Medical Reviews by Fiscal Year of Initial Decision and Level of Decision

Fiscal year of initial DDS decision	Total initial DDS decisions	Initial decisions					
		Continuations		Cessations		Appeals to reconsideration	
		Number	Percent ²	Number	Percent ²	Number	Percent ³
Reviews of low-birth-weight children							
1994	1,225	771	62.9	454	37.1	159	35.0
1995	4,231	2,083	49.2	2,148	50.8	665	31.0
1996	5,709	2,491	43.6	3,218	56.4	904	28.1
1997	7,091	4,482	63.2	2,609	36.8	821	31.5
1998	17,620	6,092	34.6	11,528	65.4	3,640	31.6
1999	9,773	4,114	42.1	5,659	57.9	1,639	29.0
2000	10,178	4,566	44.9	5,612	55.1	1,561	27.8
2001	9,086	4,152	45.7	4,934	54.3	1,404	28.5
2002	12,732	5,869	46.1	6,863	53.9	1,959	28.5
2003	7,283	3,516	48.3	3,767	51.7	1,028	27.3
2004	12,060	6,075	50.4	5,985	49.6	1,784	29.8
2005	13,710	6,540	47.7	7,170	52.3	2,033	28.4
2006	8,303	4,030	48.5	4,273	51.5	1,277	29.9
2007	3,175	1,368	43.1	1,807	56.9	387	21.4
Redeterminations at age 18							
1994	—	—	—	—	—	—	—
1995	71	64	90.1	7	9.9	5	71.4
1996	12,640	8,158	64.5	4,482	35.5	2,055	45.9
1997	48,834	22,431	45.9	26,403	54.1	16,741	63.4
1998	40,945	21,453	52.4	19,492	47.6	10,915	56.0
1999	49,557	27,413	55.3	22,144	44.7	10,879	49.1
2000	51,713	28,863	55.8	22,850	44.2	11,022	48.2
2001	48,944	28,167	57.5	20,777	42.5	10,052	48.4
2002	54,947	32,388	58.9	22,559	41.1	11,572	51.3
2003	53,905	31,862	59.1	22,043	40.9	11,762	53.4
2004	53,232	31,890	59.9	21,342	40.1	11,592	54.3
2005	55,331	31,434	56.8	23,897	43.2	12,577	52.6
2006	40,640	21,796	53.6	18,844	46.4	9,599	50.9
2007	71,359	36,339	50.9	35,020	49.1	16,757	47.8
All other reviews of SSI disabled children							
1994	—	—	—	—	—	—	—
1995	3,535	2,501	70.7	1,034	29.3	541	52.3
1996	789	399	50.6	390	49.4	210	53.8
1997	14	8	57.1	6	42.9	3	50.0
1998	91,157	67,203	73.7	23,954	26.3	13,267	55.4
1999	183,211	129,420	70.6	53,791	29.4	28,410	52.8
2000	140,699	106,583	75.8	34,116	24.2	17,015	49.9
2001	95,835	72,896	76.1	22,939	23.9	11,815	51.5
2002	163,768	130,434	79.6	33,334	20.4	17,931	53.8
2003	127,444	100,522	78.9	26,922	21.1	14,911	55.4
2004	103,437	80,748	78.1	22,689	21.9	12,853	56.6
2005	61,387	45,597	74.3	15,790	25.7	8,493	53.8
2006	19,384	14,428	74.4	4,956	25.6	2,606	52.6
2007	4,440	3,161	71.2	1,279	28.8	468	36.6
Total reviews, SSI disabled children							
1994	1,225	771	62.9	454	37.1	159	35.0
1995	7,837	4,648	59.3	3,189	40.7	1,211	38.0
1996	19,138	11,048	57.7	8,090	42.3	3,169	39.2
1997	55,939	26,921	48.1	29,018	51.9	17,565	60.5
1998	149,722	94,748	63.3	54,974	36.7	27,822	50.6
1999	242,541	160,947	66.4	81,594	33.6	40,928	50.2
2000	202,590	140,012	69.1	62,578	30.9	29,598	47.3
2001	153,865	105,215	68.4	48,650	31.6	23,271	47.8
2002	231,447	168,691	72.9	62,756	27.1	31,462	50.1
2003	188,632	135,900	72.0	52,732	28.0	27,701	52.5
2004	168,729	118,713	70.4	50,016	29.6	26,229	52.4
2005	130,428	83,571	64.1	46,857	35.9	23,103	49.3
2006	68,327	40,254	58.9	28,073	41.1	13,482	48.0
2007	78,974	40,868	51.7	38,106	48.3	17,612	46.2

Table V.D3.—SSI Disabled Child Reviews: Disposition¹ of Continuing Disability Medical Reviews by Fiscal Year of Initial Decision and Level of Decision (Cont.)

Fiscal year of initial DDS decision	Reconsiderations						Appeals beyond reconsideration ⁴			
	Pending	Continuations		Cessations	Appeals to beyond reconsideration		Pending	Continuations		Cessations
		Number	Percent ²		Number ⁵	Percent ³		Number	Percent	
Reviews of low-birth-weight children										
1994	—	44	27.7	115	51	44.3	—	15	29.4	36
1995	—	184	27.7	481	219	45.5	—	53	24.2	166
1996	—	329	36.4	575	232	40.3	—	44	19.0	188
1997	—	292	35.6	529	235	44.4	—	50	21.3	185
1998	—	1,231	33.8	2,409	1,142	47.4	—	244	21.4	898
1999	—	607	37.0	1,032	488	47.3	—	83	17.0	405
2000	—	609	39.0	952	452	47.5	—	99	21.9	353
2001	1	504	35.9	899	405	45.1	—	61	15.1	344
2002	6	698	35.7	1,255	549	43.7	—	111	20.2	438
2003	3	364	35.5	661	301	45.5	2	59	19.7	240
2004	3	644	36.2	1,137	555	48.8	28	72	13.7	455
2005	61	703	35.6	1,269	603	47.5	139	67	14.4	397
2006	94	421	35.6	762	355	46.6	160	34	17.4	161
2007	94	116	39.6	177	61	34.5	52	1	11.1	8
Redeterminations at age 18										
1994	—	—	—	—	—	—	—	—	—	—
1995	—	2	40.0	3	2	66.7	—	1	50.0	1
1996	—	707	34.4	1,348	584	43.3	—	119	20.4	465
1997	—	4,591	27.4	12,150	6,429	52.9	—	1,517	23.6	4,912
1998	—	3,070	28.1	7,845	4,388	55.9	—	1,026	23.4	3,362
1999	—	3,356	30.8	7,523	4,304	57.2	—	1,059	24.6	3,245
2000	2	3,575	32.4	7,445	4,033	54.2	—	1,015	25.2	3,018
2001	3	3,256	32.4	6,793	3,724	54.8	1	966	25.9	2,757
2002	25	3,819	33.1	7,728	4,127	53.4	6	1,089	26.4	3,032
2003	24	3,818	32.5	7,920	4,298	54.3	14	1,108	25.9	3,176
2004	12	3,532	30.5	8,048	4,672	58.1	207	1,158	25.9	3,307
2005	384	3,772	30.9	8,421	4,873	57.9	1,040	967	25.2	2,866
2006	744	2,590	29.2	6,265	3,401	54.3	1,671	429	24.8	1,301
2007	6,434	3,326	32.2	6,997	2,610	37.3	2,214	93	23.5	303
All other reviews of SSI disabled children										
1994	—	—	—	—	—	—	—	—	—	—
1995	—	177	32.7	364	202	55.5	—	52	25.7	150
1996	—	69	32.9	141	55	39.0	—	17	30.9	38
1997	—	1	33.3	2	1	50.0	—	—	—	1
1998	—	4,456	33.6	8,811	5,511	62.5	—	1,305	23.7	4,206
1999	—	9,324	32.8	19,086	11,711	61.4	—	2,615	22.3	9,096
2000	1	6,434	37.8	10,580	6,237	59.0	—	1,427	22.9	4,810
2001	7	4,619	39.1	7,189	4,257	59.2	—	955	22.4	3,302
2002	45	7,238	40.5	10,648	6,152	57.8	3	1,360	22.1	4,789
2003	35	6,248	42.0	8,628	5,003	58.0	11	1,129	22.6	3,863
2004	9	4,871	37.9	7,973	4,981	62.5	246	1,079	22.8	3,656
2005	210	3,123	37.7	5,160	3,209	62.2	834	499	21.0	1,876
2006	131	940	38.0	1,535	912	59.4	473	110	25.1	329
2007	34	187	43.1	247	101	40.9	76	5	20.0	20
Total reviews, SSI disabled children										
1994	—	44	27.7	115	51	44.3	—	15	29.4	36
1995	—	363	30.0	848	423	49.9	—	106	25.1	317
1996	—	1,105	34.9	2,064	871	42.2	—	180	20.7	691
1997	—	4,884	27.8	12,681	6,665	52.6	—	1,567	23.5	5,098
1998	—	8,757	31.5	19,065	11,041	57.9	—	2,575	23.3	8,466
1999	—	13,287	32.5	27,641	16,503	59.7	—	3,757	22.8	12,746
2000	3	10,618	35.9	18,977	10,722	56.5	—	2,541	23.7	8,181
2001	11	8,379	36.0	14,881	8,386	56.4	1	1,982	23.6	6,403
2002	76	11,755	37.5	19,631	10,828	55.2	9	2,560	23.7	8,259
2003	62	10,430	37.7	17,209	9,602	55.8	27	2,296	24.0	7,279
2004	24	9,047	34.5	17,158	10,208	59.5	481	2,309	23.7	7,418
2005	655	7,598	33.8	14,850	8,685	58.5	2,013	1,533	23.0	5,139
2006	969	3,951	31.6	8,562	4,668	54.5	2,304	573	24.2	1,791
2007	6,562	3,629	32.8	7,421	2,772	37.4	2,342	99	23.0	331

Table V.D3.—SSI Disabled Child Reviews: Disposition¹ of Continuing Disability Medical Reviews by Fiscal Year of Initial Decision and Level of Decision (Cont.)

		Selected summary case information by decision status as of February 2008					
Fiscal year of initial DDS decision	Total initial decisions	Numbers of cases			Numbers as a percentage of total initial decisions		
		Continuations	Cessations pending an appeal decision	Cessations with no appeal pending	Continuations	Cessations pending an appeal decision	Cessations with no appeal pending
Reviews of low-birth-weight children							
1994	1,225	830	—	395	67.8	—	32.2
1995	4,231	2,320	—	1,911	54.8	—	45.2
1996	5,709	2,864	—	2,845	50.2	—	49.8
1997	7,091	4,824	—	2,267	68.0	—	32.0
1998	17,620	7,567	—	10,053	42.9	—	57.1
1999	9,773	4,804	—	4,969	49.2	—	50.8
2000	10,178	5,274	—	4,904	51.8	—	48.2
2001	9,086	4,717	1	4,368	51.9	6/	48.1
2002	12,732	6,678	6	6,048	52.5	6/	47.5
2003	7,283	3,939	5	3,339	54.1	0.1	45.8
2004	12,060	6,791	31	5,238	56.3	.3	43.4
2005	13,710	7,310	200	6,200	53.3	1.5	45.2
2006	8,303	4,485	254	3,564	54.0	3.1	42.9
2007	3,175	1,485	146	1,544	46.8	4.6	48.6
Redeterminations at age 18							
1994	—	—	—	—	—	—	—
1995	71	67	—	4	94.4	—	5.6
1996	12,640	8,984	—	3,656	71.1	—	28.9
1997	48,834	28,539	—	20,295	58.4	—	41.6
1998	40,945	25,549	—	15,396	62.4	—	37.6
1999	49,557	31,828	—	17,729	64.2	—	35.8
2000	51,713	33,453	2	18,258	64.7	6/	35.3
2001	48,944	32,389	4	16,551	66.2	6/	33.8
2002	54,947	37,296	31	17,620	67.9	.1	32.1
2003	53,905	36,788	38	17,079	68.2	.1	31.7
2004	53,232	36,580	219	16,433	68.7	.4	30.9
2005	55,331	36,173	1,424	17,734	65.4	2.6	32.1
2006	40,640	24,815	2,415	13,410	61.1	5.9	33.0
2007	71,359	39,758	8,648	22,953	55.7	12.1	32.2
All other reviews of SSI disabled children							
1994	—	—	—	—	—	—	—
1995	3,535	2,730	—	805	77.2	—	22.8
1996	789	485	—	304	61.5	—	38.5
1997	14	9	—	5	64.3	—	35.7
1998	91,157	72,964	—	18,193	80.0	—	20.0
1999	183,211	141,359	—	41,852	77.2	—	22.8
2000	140,699	114,444	1	26,254	81.3	6/	18.7
2001	95,835	78,470	7	17,358	81.9	6/	18.1
2002	163,768	139,032	48	24,688	84.9	6/	15.1
2003	127,444	107,899	46	19,499	84.7	6/	15.3
2004	103,437	86,698	255	16,484	83.8	.2	15.9
2005	61,387	49,219	1,044	11,124	80.2	1.7	18.1
2006	19,384	15,478	604	3,302	79.8	3.1	17.0
2007	4,440	3,353	110	977	75.5	2.5	22.0
Total reviews, SSI disabled children							
1994	1,225	830	—	395	67.8	—	32.2
1995	7,837	5,117	—	2,720	65.3	—	34.7
1996	19,138	12,333	—	6,805	64.4	—	35.6
1997	55,939	33,372	—	22,567	59.7	—	40.3
1998	149,722	106,080	—	43,642	70.9	—	29.1
1999	242,541	177,991	—	64,550	73.4	—	26.6
2000	202,590	153,171	3	49,416	75.6	6/	24.4
2001	153,865	115,576	12	38,277	75.1	6/	24.9
2002	231,447	183,006	85	48,356	79.1	6/	20.9
2003	188,632	148,626	89	39,917	78.8	6/	21.2
2004	168,729	130,069	505	38,155	77.1	.3	22.6
2005	130,428	92,702	2,668	35,058	71.1	2.0	26.9
2006	68,327	44,778	3,273	20,276	65.5	4.8	29.7
2007	78,974	44,596	8,904	25,474	56.5	11.3	32.3

¹ Data reflect results as of February 2008. The ultimate numbers of continuations and cessations are subject to change until all appeals are final.

² Percentage of decisions at this level.

³ Percentage of cessations at this level appealed to next level.

⁴ The status and disposition of cases in the Federal courts are not reflected here. However, for cases remanded by the courts to the SSA, the status and disposition at ODAR are included. The excluded experience in the Federal courts has a minimal impact on the number of continuations.

⁵ Number of persons appealing beyond the reconsideration level.

⁶ Less than 0.05 percent.

E. INCENTIVES FOR WORK AND OPPORTUNITIES FOR REHABILITATION

1. Work Incentives

Since the beginning of the SSI program, a number of disabled or blind recipients have worked and received SSI payments. Initially, the program contained a basic earned income exclusion that recognized the additional costs associated with employment. In addition, the law contained a number of special income exclusions which were intended as work incentives. Among these provisions were the income exclusion for blind work expenses (BWE), plan to achieve self-support (PASS), and student earned income exclusion (SEIE).

In the 1980 amendments to the Social Security Act, Congress provided additional incentives to help SSI disabled recipients become self-supporting. These incentives included:

- Providing for an earned income exclusion for impairment-related work expenses (IRWE);
- Changing the treatment of sheltered workshop earnings from unearned income to earned income, thereby qualifying sheltered workshop earnings for the earned income exclusion;
- Providing for the continuation of SSI payments for certain disabled individuals enrolled in vocational rehabilitation programs whose disability ceased due to medical recovery (extended to SSI blind recipients, effective April, 1988);
- Establishing section 1619 which provided:
 - In subsection 1619(a), special SSI cash benefits to disabled individuals who lose eligibility for SSI payments because they have earnings exceeding the level that is ordinarily considered to represent substantial gainful activity (SGA), and
 - In subsection 1619(b), special SSI recipient status for Medicaid purposes to working disabled or blind individuals when their earnings make them ineligible for cash payments.

The incentives for work and opportunities for rehabilitation are discussed in more detail in section III.E. In the tables that follow we provide historical information on participation by SSI recipients in work incentive programs.¹

a. Numbers of Participants in Work Incentive Programs

In this section, we present historical data on participation by SSI recipients in work incentive programs. Table V.E1 presents historical numbers of SSI recipients categorized according to their section 1619 status. Figure V.E1 presents this information in graphical form.

¹ More detailed information on participation by SSI recipients in work incentive programs is provided in the *SSI Annual Statistical Report. Pub. No. 13-11827*, prepared by the Office of Research, Evaluation, and Statistics, Social Security Administration.

Table V.E1.—SSI Federally-Administered Blind or Disabled Working Recipients as of December, 1987-2007

Year	SGA level ¹	In current-payment status		1619(b) workers ⁴	Total workers
		1619(a) workers ²	Other workers ³		
1987.....	\$300	14,559	142,664	15,632	172,855
1988.....	300	19,920	153,599	15,625	189,144
1989.....	300	25,655	161,928	18,254	205,837
1990.....	500	13,994	182,421	23,517	219,932
1991.....	500	15,531	186,824	27,264	229,619
1992.....	500	17,603	199,665	31,649	248,917
1993.....	500	20,028	210,322	35,299	265,649
1994.....	500	24,315	217,478	40,683	282,476
1995.....	500	28,060	223,573	47,002	298,635
1996.....	500	31,085	225,310	51,905	308,300
1997.....	500	34,673	228,093	57,089	319,855
1998.....	500	37,271	229,662	59,542	326,475
1999.....	⁵ 700	25,528	245,825	69,265	340,618
2000.....	700	27,542	249,313	83,572	360,427
2001.....	740	22,100	247,555	76,455	346,110
2002.....	780	17,271	241,462	82,177	340,910
2003.....	800	17,132	235,453	71,097	323,682
2004.....	810	17,114	237,409	73,681	328,204
2005.....	830	17,621	240,744	78,205	336,570
2006.....	860	17,394	242,676	89,350	349,420
2007.....	900	16,939	242,854	97,551	357,344

¹ Increases in 2001 and subsequent years are based on increases in the national average wage index.

² Workers' earnings are above SGA level.

³ Workers' earnings are at or below SGA level.

⁴ 1619(b) recipients are not in current-payment status but retain SSI recipient status for Medicaid purposes.

⁵ Increased to \$700 in July 1999.

Figure V.E1.—SSI Federally-Administered Blind or Disabled Working Recipients as of December, 1987-2007

[In thousands]

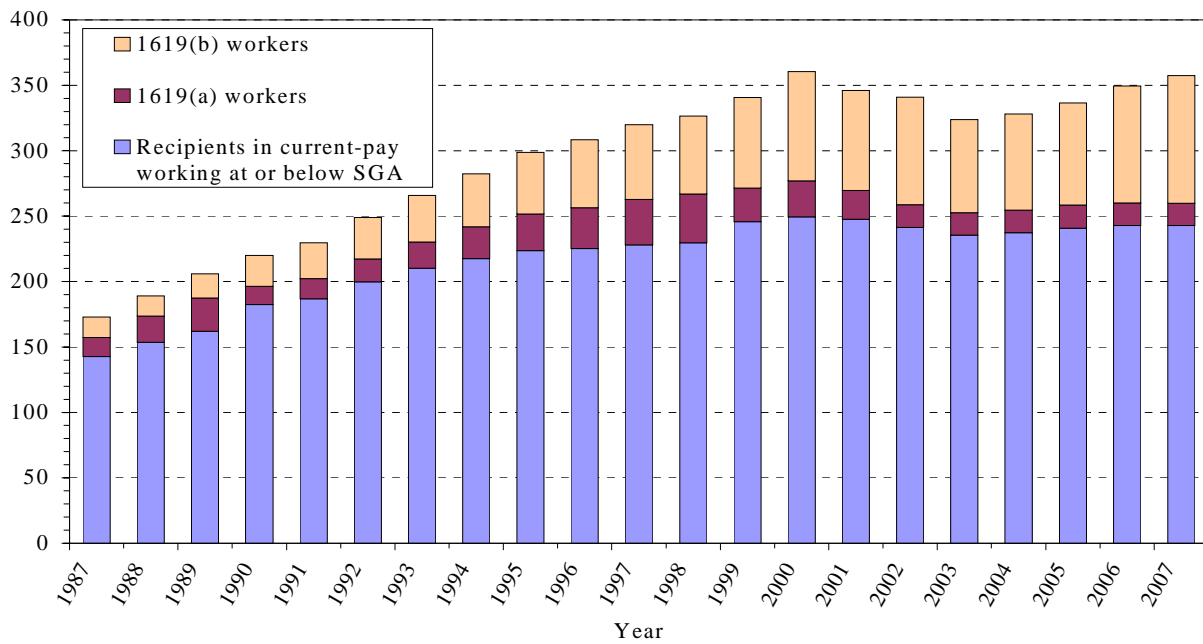


Table V.E2 presents historical numbers of SSI recipients who benefit from other selected work incentive provisions: (1) plan to achieve self-support (PASS), (2) impairment-related work expense exclusion (IRWE), and (3) blind work expense exclusion (BWE). These recipients may be benefiting from more than one of these selected work incentive provisions. This information is available only for calendar years 1990 and later.

Table V.E2.—SSI Federally-Administered Blind or Disabled Individuals with SSI Recipient Status Participating in Other Work Incentives as of December, 1990-2007

Year	PASS ¹			IRWE	BWE
	Non-workers	Workers	Total		
1990	1,215	1,040	2,255	5,384	4,385
1991	1,969	1,601	3,570	6,546	4,330
1992	3,189	2,658	5,847	7,813	4,454
1993	4,528	3,602	8,130	8,629	4,406
1994	5,842	4,487	10,329	9,484	4,380
1995	5,719	4,603	10,322	9,940	4,433
1996	2,760	1,944	4,704	9,799	4,230
1997	1,290	708	1,998	9,637	4,116
1998	712	362	1,074	9,301	3,802
1999	698	347	1,045	9,520	3,971
2000	862	520	1,382	9,422	3,895
2001	1,024	576	1,600	8,798	3,642
2002	1,150	571	1,721	8,047	3,386
2003	1,181	524	1,705	7,604	3,074
2004	1,112	486	1,598	6,874	2,827
2005	1,089	493	1,582	6,310	2,552
2006	1,098	485	1,583	5,650	2,370
2007	1,003	512	1,515	5,161	2,142

¹ For years 1990 through 1996, data do not include PASS plans which exclude only resources.

Note: Working recipients participating in these other work incentives may be 1619(a) recipients, 1619(b) recipients or working recipients whose earnings are at or below the SGA level.

b. Average Earnings of Participants in Work Incentive Programs

In this section, we present historical data on average earnings of SSI working recipients. Table V.E3 presents average earnings of SSI recipients categorized according to their section 1619 status.

Table V.E3.—Average Monthly Earnings of SSI Federally-Administered Blind or Disabled Working Recipients, as of December, 1987-2007

Year	Blind or disabled workers with SSI recipient status			
	In current-payment status		1619(b) workers ³	Total workers
	1619(a) workers ¹	Other workers ²		
1987	\$494	⁴ \$124	\$739	⁴ \$211
1988	522	⁴ 127	721	⁴ 218
1989	518	⁴ 131	712	⁴ 231
1990	712	145	746	245
1991	724	148	780	262
1992	726	150	781	271
1993	728	153	784	280
1994	746	157	803	301
1995	754	160	834	322
1996	764	162	881	344
1997	772	164	932	367
1998	772	182	954	390
1999	926	207	980	418
2000	945	239	1,048	481
2001	1,004	252	1,043	475
2002	1,043	253	1,094	495
2003	1,059	241	1,081	469
2004	1,076	246	1,070	474
2005	1,111	255	1,118	500
2006	1,166	258	1,193	542
2007	1,193	262	1,267	581

¹ In January, 1990, the SGA level was raised from \$300 to \$500 and section 1619(a) participants with earnings at or below \$500 became eligible for regular SSI benefits rather than the special cash payments under section 1619(a). The SGA level was further increased to \$700 in July 1999, with increases in 2001 and subsequent years based on increases in the national average wage index. In January 2008 the SGA level was increased to \$940.

² Workers' earnings are at or below the SGA level.

³ 1619(b) recipients are not in current-payment status but retain SSI recipient status for Medicaid purposes.

⁴ Estimated.

2. Vocational Rehabilitation/Ticket to Work Program

Provisions designed to make vocational rehabilitation (VR) services available to SSI blind or disabled recipients have been part of the SSI program since its inception. From the beginning, SSI recipients were referred to State VR agencies, which provided services to those recipients who were accepted as clients. Prior to 1981, SSA made block grants to VR agencies to fund services to disabled beneficiaries. The 1981 amendments changed this and established a “cost” reimbursement provision. VR agencies would be reimbursed for the cost of VR services furnished to blind or disabled SSI recipients only if the services resulted in the recipient returning to work. For reimbursement purposes, recipients are considered to have returned to work if they have had earnings exceeding the SGA level for 9 continuous months.

The 1984 amendments authorized reimbursement for cases¹ where the recipient medically recovers while engaged in a program of rehabilitation services approved by SSA and SSA determines that continuation or completion of such a program would increase the likelihood the individual will be permanently removed from the rolls. Effective with the 1990 amendments, reimbursement for the cost of VR services was authorized for services provided in months in which the individual was not receiving Federal SSI benefits if the individual:

- Had special SSI recipient status for Medicaid purposes under section 1619(b) of the Social Security Act;
- Received a Federally-administered State supplementary payment; or
- Had SSI benefits suspended for fewer than 13 consecutive months for a reason other than cessation of disability or blindness.

In 1994, the regulations were amended to include reimbursement to alternate private and non-State public VR providers (referred to as “alternate participants”) that provided VR services to recipients that a State VR agency had not accepted as clients. The alternate provider program has subsequently been replaced by the Ticket to Work and Self-Sufficiency program (Ticket to Work program) established by the Ticket to Work and Work Incentives Improvement Act of 1999.

Under the Ticket to Work program, a disabled beneficiary may obtain vocational rehabilitation, employment and other support services from qualified private or public providers that are referred to as “Employment Networks” (ENs). The Ticket to Work program authorized the Commissioner to provide payments to ENs under either an outcome payment system or an outcome-milestone payment system. (State VR agencies were provided the option to elect on a case-by-case basis to be paid either under the traditional VR reimbursement system, or either the outcome or outcome-milestone payment system.) By expanding the pool of providers and giving the providers incentives for achieving success, this program expands access to these services for persons with disabilities to assist them in finding, entering, and retaining employment as well as reducing their dependence on cash benefits.

The Ticket to Work program was implemented on a State-by-State basis beginning in February 2002 and has been fully implemented nationwide since November 2003. As the Ticket to Work program was implemented in a State, the alternate provider and the traditional VR referral process described earlier were eliminated. SSA provided eligible individuals who received SSI benefits due to blindness or disability in such State with a Ticket to Work document (“ticket”). Beneficiaries who receive a ticket may use it to obtain from ENs or their State VR agencies vocational rehabilitation services, employment services and other support services needed to return to work or go to work for the first time. Individuals

¹ The 1980 amendments provided for benefit continuation for such SSI recipients who were continuing in a VR program after their disability had ceased. The provision was extended to blind recipients effective April, 1988.

not eligible for a ticket may still request services from a State VR agency; the VR agency continues to decide whether each beneficiary is eligible for services under the Rehabilitation Act of 1973.

The Ticket legislation required that SSA establish a corps of work incentives specialists to disseminate accurate information about work incentives. In addition, the Social Security Protection Act of 2004 mandated that SSA provide a work report receipt to the beneficiary. In response to these mandates, SSA:

- In fiscal year 2003, established the Area Work Incentives Coordinator (AWIC) position and trained a total of 58 AWICs, with at least one AWIC being assigned to each Area Office. The AWIC position was created to improve the quality of employment support services provided to beneficiaries through training, outreach, and better coordination of support services. As of fiscal year 2008, there are 54 AWICs on duty.
- In fiscal year 2004, released a web-based design application known as eWork that provides the Agency with a uniform electronic system to process and control title II return to work cases. Since eWork does not communicate with any title XVI systems, the Agency developed a web-based application, the SSI Monthly Wage Verification (SSIMWV), to process and control SSI work reports. The SSIMWV allows SSA employees to issue the mandated work report receipt in addition to processing the wage report. The SSIMWV was released nationally in November 2006.
- In fiscal year 2006, SSA awarded cooperative agreements under the new Work Incentives Planning and Assistance (WIPA) program, which replaced and enhanced the former Benefits Planning, Assistance, and Outreach (BPAO) program. The WIPA program provides information as well as planning and assistance services in all States and Territories to SSA's beneficiaries with disabilities who want to work.

In fiscal year 2003, AWIC employees provided refresher training on employment supports to the local Work Incentive Liaisons (WIL) located in each of the 1,335 local field offices. The systems application phase of this training was updated beginning in fiscal year 2004 with the release of eWork. Training has been provided to all direct service employees in field offices, teleservice centers and the payment processing centers. This training initiative was completed in November 2004.

AWICs have also been very active in participating in outreach activities in their local areas and continue to be the primary point of contact for public information outreach in the communities. They have strengthened the relationship with our Ticket to Work partners: the ENs; WIPAs; Protection and Advocacy (P&A) agencies and Disability Program Navigators. AWICs also work closely with the regional Plan to Achieve Self-Support (PASS) cadres in SSA to make joint educational presentations to the community about our employment support programs. The partnership has strengthened support of one of the objectives of the Ticket to Work program which is to educate the public about the benefits of returning to work and becoming self-sufficient. Presentations that have been made directly to persons with disabilities and/or entities that provide services to this target group include presentations at:

- Disability Employment Fairs
- Disability Forums and Expos
- Technical Colleges
- Universities
- Disability Resource Centers
- One-Stop Career Centers

- Small Business Administration Groups
- Workforce Investment Fairs
- Independent Living Councils' Conferences
- United Way Agencies
- State Advocacy Groups

In 2008, SSA revised the Ticket to Work regulations to enhance beneficiary choice and improve the effectiveness of the program. The revisions extended the program to all adult SSDI and SSI blind or disabled beneficiaries, removed disincentives for Employment Networks to participate in the program, provided incentives for them to support beneficiaries through a more gradual return to work and positioned them to better support ongoing retention of employment.

See section V.G.1.d for information on the evaluation of the Ticket to Work program.

Table V.E4 provides historical data on the number of reimbursement claims allowed and the amount of such awards for SSI recipients.

Table V.E4.—Vocational Rehabilitation Reimbursement Claims Allowed, Fiscal Years 1987-2007

Fiscal year	Concurrent title II/XVI claims		Title XVI only claims		Total claims	
	Number	Amount ¹ (in thousands)	Number	Amount (in thousands)	Number	Amount ¹ (in thousands)
1987	2/	2/	1,493	\$10,010	2/	2/
1988	2/	2/	1,720	14,831	2/	2/
1989	2/	2/	1,871	18,366	2/	2/
1990	1,267	\$3,290	2,819	22,832	4,086	\$26,122
1991	1,445	4,325	2,171	20,615	3,616	24,940
1992	1,634	5,312	2,834	28,276	4,468	33,588
1993	1,928	6,670	2,158	22,264	4,086	28,934
1994	1,880	7,057	2,074	23,400	3,954	30,457
1995	2,140	7,761	2,229	26,402	4,369	34,162
1996	2,033	6,518	2,138	24,334	4,171	30,852
1997	2,735	8,541	2,914	31,532	5,649	40,073
1998	3,329	10,089	3,446	36,313	6,775	46,402
1999	3,572	11,403	4,046	42,281	7,618	53,684
2000	3,260	11,357	3,589	40,793	6,849	52,150
2001	2,388	9,590	2,763	34,842	5,151	44,432
2002	3,241	12,201	3,474	43,244	6,715	55,445
2003	2,139	8,110	1,993	25,238	4,132	33,348
2004	1,999	7,759	2,150	26,390	4,149	34,149
2005	1,883	7,420	1,692	21,866	3,575	29,286
2006	2,581	10,382	2,257	28,597	4,838	38,979
2007	2,037	8,407	1,871	26,468	3,908	34,875

¹ For concurrent title II/XVI claims, amounts shown represent title XVI portion of claim.

² For fiscal years 1987-89, data on title II reimbursement claims involving concurrent title XVI reimbursement claims are not available.

Note: Totals do not necessarily equal the sums of rounded components.

F. INVOLVEMENT OF SSI RECIPIENTS IN OTHER PROGRAMS

In this appendix we present statistics on participation by SSI recipients in other programs based on data from the Supplemental Security Record (SSR), the main administrative file for the SSI program. Data summarized from the SSR are representative of the overall SSI recipient population since the information is generally based on a 100-percent extract; however, information on previous participation in other programs by SSI recipients is based on a 10-percent extract from the SSR. Data from the SSR are presented below. Since the amount of an individual's income is used to determine both the eligibility for, and the amount of his/her SSI benefit, it is necessary for the SSR to contain information on participation by SSI recipients in certain other programs which may provide countable income to the SSI recipient. A significant number of SSI recipients are Social Security beneficiaries whose total countable income, including OASDI benefits, is less than the Federal benefit rate plus the amount of applicable Federally-administered State supplementary payment. A smaller number of SSI recipients participate in other programs and receive income such as Workers' Compensation benefits or disability cash benefits from the Department of Veterans Affairs.

SSA does not maintain complete information in its administrative files concerning the involvement of SSI recipients in other assistance programs, because under the law payments from such programs are excluded from countable income attributable to the individual. We do, however, have some data with regard to entitlement to benefits under two other programs—Temporary Assistance for Needy Families (TANF) (which replaced Aid to Families with Dependent Children (AFDC)) and State Interim Assistance Reimbursement—at the point that the individual applied for SSI benefits. TANF (and AFDC previously) is a State program funded under Part A of title IV of the Social Security Act. Interim assistance is assistance a State gives to SSI applicants in cash or vendor payments for meeting basic needs while they are awaiting the outcome of the SSI eligibility determination process.

Table V.F1 presents percentages of SSI recipients who (1) concurrently receive payments from certain other selected programs or (2) have previously been enrolled in TANF/AFDC or received Interim Assistance Reimbursement.

Table V.F1.—Percentage of SSI Federally-Administered Recipients in Current-Payment Status with Participation¹ in Selected Programs Based on SSA Administrative Records, December, 2007

	Age groups			All
	0-17	18-64	65 or older	
Number of Federally-administered recipients, December, 2007 (in thousands).....	1,121	4,222	2,017	7,360
Program	(In percent)			
Program participation by SSI recipients, December, 2007				
Federal SSI.....	99.8	96.5	92.7	95.9
Federally-administered State SSI supplementation.....	20.2	27.9	44.6	31.3
OASDI.....	7.2	31.7	57.0	34.9
Black Lung.....	2/	2/	2/	2/
Railroad Retirement.....	2/	2/	0.1	2/
Veterans Affairs disability cash benefits.....	0.1	0.5	1.8	0.8
Workers' Compensation.....	2/	0.1	2/	0.1
Previous program participation by SSI recipients, December, 2007				
TANF/AFDC.....	35.3	26.9	9.6	23.4
Interim Assistance Reimbursement.....	0.6	14.6	10.4	11.3

¹ SSI recipients or the households of SSI recipients may participate in more than one of these programs.

² Less than 0.05 percent of SSI recipients in this gender/age grouping participate in the program.

Note: Total numbers of recipients do not necessarily equal the sums of rounded components.

There are other potential sources for information on SSI recipients when that information is not available on the SSI administrative files. One source in particular is the Survey of Income and Program Participation (SIPP), a U.S. Census Bureau sample survey that collects information such as the source and amount of income, program participation and general demographic characteristics for the U.S. civilian noninstitutionalized population. Data from the SIPP were last presented in the 2005 SSI Annual Report.

G RESEARCH ON RELATED TOPICS

The legislative mandate for this report requires inclusion of information about “relevant research on the SSI program by the Social Security Administration (SSA) and others.” Section 1 of this appendix describes major ongoing projects. Section 2 presents a bibliography of studies regarding SSI payment levels, recipients, and reform proposals that were published in the past 10 years by both public and private entities.

1. Ongoing Research

a. SSI Policy Simulations

Using Survey of Income and Program Participation (SIPP) data matched to administrative records, SSA researchers have developed a model of financial eligibility for SSI that has been used to estimate the rate of participation among the eligible elderly and the effects of various options to modify the SSI program (see Davies et al. 2001/2002). The model suggests that the rate of participation among the eligible elderly was about 62 percent in 1991. The comparable participation rate estimate at the end of 1996 was also 62 percent. The model is currently being updated to use the 2004 SIPP matched to administrative records.

The model was also utilized to simulate the potential effects of several approaches to expand the SSI program to fight poverty among the elderly. Approaches focusing on incremental changes in the Federal benefit rate, the general income exclusion, and the resources test appear roughly equally effective in reducing the poverty gap among the elderly on a cost-equivalent basis, while two approaches focusing on relaxing the earned income exclusion are less effective (Davies, Rupp, and Strand, 2004). More recently, the model has been expanded to address SSI participation and financial eligibility among the working-age disabled, and to assess SSI benefit restructuring options for the entire SSI population. The working-aged model allows for the identification of working-aged persons by their SSI financial eligibility status, DI insured status, and participation in both programs. The model is currently being used to assess SSI’s role in complementing and enhancing the safety net for the working-aged population, focusing on the role of SSI in providing cash benefits to some DI beneficiaries during the 5-month waiting period and beyond, and increasing health insurance coverage among the disabled by providing access to Medicaid. The model has been used to simulate the effects of several approaches to changing in-kind support and maintenance rules and options for altering the calculation of the Federal benefit rate for certain living arrangement categories. Simulation results are applied to current elderly, working-age, and child SSI populations to provide up-to-date estimates for potential program changes. The financial eligibility model has also been utilized to study eligibility for Medicare buy-in programs (see Rupp and Sears 2000; Sears 2001/2002). More recently the model has been extensively utilized to estimate the size of the population potentially eligible for the Medicare Part D low income subsidy.

b. National Survey of SSI Children and Families

The National Survey of SSI Children and Families (NSCF) was designed to address a number of SSA policy and program objectives. One objective was to address issues specifically pertaining to the effects of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (welfare reform). However, the survey as designed is useful for the study of a broader range of issues of current interest to policy makers. Most importantly it allows for the analysis of a nationally representative cross-section of SSI beneficiary children aged 0-17 and young adults aged 18-23. Among the questions the survey answers are the following:

- What are the characteristics of SSI children?
- What alternative sources of care are available to disabled children who lose SSI benefits?
- How is quality of life and utilization of medical services impacted by gaining or losing SSI benefits?
- What is the cost of caring for a child with disabilities?
- What are the uses of SSI benefits?
- What is the impact of the nature and severity of the child's disabilities on parental labor force participation?

The NSCF data collection began July 2001 and concluded June 2002. The NSCF sample size was considerably larger for SSI children and young adults than the sample size available in other surveys. Altogether, 8,535 interviews were completed for the NSCF, including 5,006 who received SSI benefits in December 2000 and 5,033 who received SSI benefits in December 1996. A public use file and documentation from the NSCF are available on the SSA website at <http://www.socialsecurity.gov/disabilityresearch/nscf.htm>. Davies and Rupp (2005/2006) provides an overview of the survey and describes some key features. Other analyses underway using these data are discussed in section c below. Although it was a cross-sectional data collection effort, longitudinal data on SSI program participation are being added to the NSCF through continuing efforts to update the match between NSCF and SSI administrative records.

c. Analytic Studies

SSA researchers have conducted a number of research studies designed to provide a better understanding of the SSI program, the elderly and disabled target populations, program interactions, and the role of the SSI program in the United States social safety net. Koenig and Rupp (2003/2004) estimated the prevalence of households and families with multiple SSI recipients and provided an assessment of the poverty status of multirecipient households. Rupp and Davies (2004) tracked survey respondents from the 1984 SIPP for 14 years using administrative records on SSI and DI participation and death events to assess the relationship between self-reported health status, disabilities, mortality, and participation in the SSI and DI programs. Weathers et al. (2007) uses a unique longitudinal dataset based on administrative data from the National Technical Institute for the Deaf (NTID) linked to SSA administrative records to conduct a case study of SSI children who applied for postsecondary education at NTID.

Several studies focus on the distributional effects of the SSI program through its interactions with other Federal and State programs. One study is utilizing longitudinal data from the Health and Retirement Study (HRS) to assess the role of SSI and related social safety net programs in providing a buffer against the potentially adverse effects of disability shocks in the near-elderly population on financial well-being. Rupp et al. (2007) provides an empirical analysis of the SSI Federal benefit rate for assessing benefit adequacy among elderly Social Security beneficiaries and the effectiveness of the SSI benefit eligibility screens for targeting economically vulnerable elderly beneficiaries. Another project highlights the distributional implications of Social Security reform scenarios involving a potential shift from wage indexing to price indexing or longevity indexing in the establishment of initial benefits. Another study uses matched SIPP records to examine potential eligibility for three major means-tested programs (SSI, Medicaid, and Food Stamp) among near retirees aged 55 to 64 and eventual SSI participation upon reaching age 65. A related research project analyzes interactions between SSI, DI, Medicaid and Medicare on a cohort of SSI and DI awardees utilizing matched administrative data from SSA and the Centers for Medicare & Medicaid Services. Wamhoff and Wiseman (2005/2006) examines the financial consequences of TANF-to-SSI transfers and develops new estimates of both the prevalence of receipt of SSI benefits among families receiving cash assistance from TANF and the proportion of new SSI awards that go to adults and children residing in families receiving TANF-related benefits. SSA, with the Administration for Children and Fam-

ilies, is also developing an initiative to find and test ways of more effectively and efficiently addressing disability issues affecting TANF-related persons who apply for SSI. Related research addresses the connections between the SSI and Food Stamp programs.

In 2003 and again in 2005 SSA provided funding for interviewing supplemental samples of SSI and DI beneficiaries to increase the SIPP sample size available for analyses of these target groups. DeCesaro and Hemmeter (2008) examines the characteristics of DI and SSI program participants using the 2003 supplemental sample combined with the 2001 SIPP, both matched to administrative records. Using data from the Current Population Survey matched to SSA administrative records, an on-going study assesses the impact of using administrative records on poverty estimation among elderly SSI recipients using the official and alternative definitions of poverty.

A number of studies are utilizing the NSCF to focus on children and young adults receiving SSI. Rupp et al. (2005/2006) presents highlights from the survey characterizing SSI children with disabilities and their families. Additional research is currently underway to study employment and caregiving patterns of parents of SSI children, to examine employment and program outcomes among young adults after their eligibility redetermination at age 18, and to analyze factors affecting out-of-pocket medical expenses and unmet health care needs of disabled children. These papers are scheduled to be published in a special issue of the *Journal of Vocational Rehabilitation* devoted to SSI children and young adults and the transition to adulthood.

d. Evaluation of the Ticket to Work Program

The Ticket to Work and Work Incentives Improvement Act of 1999 requires the Commissioner of Social Security to provide for independent evaluations to assess the effectiveness of the Ticket to Work program and to submit three separate evaluation reports to Congress. In May 2003, SSA awarded two 5-year contracts to Mathematica Policy Research to conduct the evaluation of the Ticket to Work program. The first contract focuses on data development, qualitative data collection, and implementation of the comprehensive evaluation analyses. The second contract focuses on a survey of beneficiaries, which is designed to collect information on the health and well-being of beneficiaries and on how beneficiaries use the Ticket to Work program.

Rounds one, two, and three of the National Beneficiary Survey (NBS) have concluded with an overall response rate of 78 percent. SSA has now completed interviews with more than 20,000 beneficiaries with disabilities.

The first evaluation report was submitted to Congress in 2004 (Thornton et al. 2004)¹, and SSA also published the first interim evaluation report early in 2006 (Thornton et al. 2006)¹. The third, post-FY 2005, evaluation report was sent to Congress in October 2007. This report confirmed earlier findings of low but growing participation rates and domination of ticket assignments by State vocational rehabilitation agencies. The findings thus far indicate that the Ticket to Work program has significant potential but improvements in beneficiary awareness and Employment Network (EN) incentives are needed. Survey findings show that many more beneficiaries are interested in employment and working their way off disability benefits than is reflected in Ticket to Work participation. Most beneficiaries remain unaware of the Ticket to Work program despite various efforts by SSA to publicize the program. Among those who are aware, a small, but significant number who have tried to use their ticket have been unable to find an EN to accept it. Participation by ENs has been anemic and the evaluation indicates that the current payment rules are insufficient for ENs to cover their costs. SSA initiatives to reduce EN costs have helped but have not yet significantly affected EN financial viability. The evaluation also found that the recently published changes

¹ Available at <http://www.socialsecurity.gov/disabilityresearch/research.htm>.

to the Ticket regulations are likely to significantly increase the early payments to ENs, thereby making the program more financially attractive to a broader range of service providers. This in turn holds promise for expanding EN availability and reinvigorating the program.

The fourth evaluation report is near completion and should be available in the summer of 2008. This report focuses on updating the third report, adding analyses of new administrative data through the end of 2005, and survey data from the second round of the NBS. Work has also begun on the fifth evaluation report that will use research data files through the end of 2006. The contractor is also collecting information for analyses of Ticket program costs and implementing the fifth round of process interviews. The data analysis files from the third round of the national NBS have also been completed. This data will be analyzed as part of the fifth report to examine the longitudinal aspects of Ticket program participation by beneficiaries. SSA has also modified the Ticket evaluation contract to include a more comprehensive analysis of the early Work Incentives Planning and Assistance program. The fifth report will include findings from those analyses. Release of the fifth report is expected in 2009.

e. Homeless Outreach Projects and Evaluation (HOPE)

In fiscal years 2003-2005, SSA's appropriations included earmarked funds totaling \$24 million to conduct outreach and application assistance to the homeless and other under-served populations in support of the President's initiative to end chronic homelessness. In 2004, SSA awarded funds to 41 service providers in 20 States and the District of Columbia that provide services to the homeless. The service providers began enrolling project participants in September 2004. Of the 41 service providers, 34 provided outreach efforts through April 2008, and the remaining seven service providers will continue through October 2008. As of January 2008, HOPE grantees assisted 9,596 homeless individuals with their applications for SSI. Of those, 3,179 have been awarded benefits based on disability.

In October 2007, Westat, of Rockville, Maryland released the final evaluation report of the HOPE program. The overall findings of the independent evaluation showed that HOPE programs were more effective than similar programs without HOPE funding in facilitating determinations for benefits and in obtaining positive housing outcomes.

f. Youth Transition Demonstration (YTD)

To further the President's New Freedom Initiative goal of increasing employment of individuals with disabilities, SSA created the Youth Transition Demonstration (YTD). The YTD establishes partnerships to improve employment outcomes for youth ages 14-25 who receive (or could receive) SSI or SSDI payments on the basis of their own disability. The YTD projects include service delivery systems and a broad array of services and supports to assist youth with disabilities in their transition from school to employment and to help them gain economic self-sufficiency.

YTD began in 2003, with seven projects in six States. In 2007, SSA piloted new projects in five States, choosing a total of three new projects in Florida, Maryland, and West Virginia. These three projects are joining three (Colorado and two New York) of the original seven projects in a random assignment study. This study will produce the first evaluation of the empirical evidence of the effects of youth transition programs and modified SSI work incentives.

The modified SSI program rules that we are testing under the YTD include the following five elements.

- Despite the finding of a continuing disability review or an age-18 medical redetermination that an individual is no longer eligible for benefits, SSA will continue paying benefits for as long as the individual continues to be a YTD participant.

- The student earned income exclusion (section 1612(b)(1) of the Act), which normally applies only to students who are under age 22, will apply to all participants who meet school attendance requirements.
- The general earned income exclusion (section 1612(b)(4) of the Act) permits the exclusion of \$65 plus half of what an individual earns in excess of \$65. For the YTD, SSA will exclude the first \$65 plus three-fourths of any additional earnings.
- SSA will extend the SSI program's treatment of Federally supported Individual Development Accounts (IDA) to IDAs that do not involve Federal funds.
- Ordinarily, a plan to achieve self-support (PASS) must specify an employment goal that refers to getting a particular kind of job or starting a particular business. For the YTD, SSA will approve an otherwise satisfactory PASS that has either career exploration or postsecondary education as its goal. Income and assets that an individual uses for PASS expenses do not count when SSA determines SSI eligibility and payment amount.

As of December 2007, 306 of the 1,317 YTD participants (23 percent) were employed full-time or part-time. Most are students, so the nature of work varies widely and some of it is short term. As a rough comparison, only about 11 percent of all SSI recipients aged 18-21 were working as of December 2006.

g. Disability Program Navigators (DPNs)

The Department of Labor (DOL) and SSA jointly established the Disability Program Navigator (DPN) position. DPNs are located in DOL's One-Stop Career Centers and help disabled individuals navigate the challenges of seeking work. The rules surrounding entitlement programs and a fear of losing cash assistance and health benefits often discourage people with disabilities from working. DOL and SSA established the DPN initiative to better inform beneficiaries and other people with disabilities about the work support programs available at DOL-funded One-Stop Career Centers. This initiative is developing new/ongoing partnerships to achieve seamless, comprehensive, and integrated access to services, creating systemic change, and expanding the workforce development system's capacity to serve customers with disabilities and employers. As of October, 2007, there were approximately 500 Navigators in 45 States, the District of Columbia and Puerto Rico. See <http://www.doleta.gov/disability/> for the list of DPN States/contacts.

2. Bibliography of Recent Publications

Alterman, A. I., Q. Shen, J. C. Merrill, A. T. McLellan, J. Durell, and J. R. McKay. "Treatment Services Received by Supplemental Security Income Drug and Alcohol Clients." *Journal of Substance Abuse Treatment* 18, 3 (2000): 209-215.

American Academy of Pediatrics. Committee on Children with Disabilities. "The Continued Importance of Supplemental Security Income (SSI) for Children and Adolescents with Disabilities." *Pediatrics* 107, 4, Part 1 of 2 (April 2001): 790-793.

Angel, Ronald J. "Living Arrangements and Supplemental Security Income Use Among Elderly Asians and Hispanics in the United States: The Role of Nativity and Citizenship." *Journal of Ethnic and Migration Studies* 28, 3 (2002): 553-563.

Angel, Ronald J., Jacqueline L. Angel, Geum-Yong Lee, and Kyriakos S. Markides. "Age at Migration and Family Dependency Among Older Mexican Immigrants: Recent Evidence from the Mexican American EPESE." *Gerontologist* 39, 1 (February 1999): 59-65.

Aron, Laudan Y. and Pamela Loprest. *Meeting the Needs of Children with Disabilities*. Washington, DC: The Urban Institute Press, 2007.

Autor, David H. and Mark G. Duggan. *The Rise in Disability Reciprocity and the Decline in Unemployment*. JCPR Working Paper No. 226, Joint Center for Poverty Research, June 2001.

Auxter, David, William Halloran, Hugh G. Berry, and Susan O'Mara. "The Precarious Safety Net: The Supplemental Security Income and Age 18 Redeterminations." *Focus on Autism & Other Developmental Disabilities* 14, 4 (Winter 1999): 194-203, 211.

Balkus, Richard and Susan Wilschke. "Annual Wage Trends for Supplemental Security Income Recipients." *Social Security Bulletin* 65, 2 (2003/2004): 49-58.

_____. *Treatment of Married Couples in the SSI Program. Issue Paper No. 2003-01*. Washington, DC: Office of Disability and Income Assistance Policy, Office of Policy, Social Security Administration, December 2003.

Balkus, Richard L., L. Scott Muller, Mark Nadel, and Michael Wiseman. "The Challenge of Growth: Public Disability Benefits in the United States." In *Sick Societies? Trends in Disability Benefits in Post-Industrial Welfare States*, edited by Peter A. Kemp, Annika Sunden, and Bernhard Bakker Tauritz. Geneva, Switzerland: International Social Security Association, 2006.

Barrilleaux, Charles and Ethan Bernick. "Deservingness, Discretion, and the State Politics of Welfare Spending, 1990-96." *State Politics & Policy Quarterly* 3, 1 (Spring 2003): 1-23.

Battaglia, Carol. "SSI and Medicaid Recipients Have a Responsibility to Report Changes that Can Affect Benefits." *Exceptional Parent* 37, 2 (February 2007): 47-48.

Beedon, Laurel and Charles Ford. "Supplemental Security Income (SSI): Yesterday, Today and Tomorrow." *Data Digest AARP Public Policy Institute* 43 (February 2000): 1-4.

Beekman, John A. and Eli N. Donkar. "The Relationship Between the Supplemental Security Income and the Old-Age, Survivors, and Disability Insurance Programs During the 1990s." *North American Actuarial Journal* 5, 4 (2001): 1-23.

Beers, Nathaniel S., Alexa Kemeny, Lon Sherritt, and Judith S. Palfrey. "Variations in State-Level Definitions: Children with Special Health Care Needs." *Public Health Reports* 118, 5 (September/October 2003): 434-447.

Benitez-Silva, Hugo, Moshe Buchinsky, and John Rust. *How Large are the Classification Errors in the Social Security Disability Award Process?* National Bureau of Economic Research Working Paper No. 10219, January 2004.

Berry, Hugh G. "The Supplemental Security Income Program and Employment for Young Adults with Disabilities: An Analysis of the National Health Interview Survey on Disability." *Focus on Autism & Other Developmental Disabilities* 15, 3 (Fall 2000): 176-182.

Bond, Gary R, Haiyi Xie, and Robert E. Drake. "Can SSDI and SSI Beneficiaries with Mental Illness Benefit from Evidence-Based Supported Employment?" *Psychiatric Services* 58, 11 (November 2007): 1412-1420.

Bound, John and Richard V. Burkhauser. *Tracking the Household Income of SSDI and SSI Applicants*. Michigan Retirement Research Center Working Paper No. 99-03, Michigan Retirement Research Center at the University of Michigan, May 2001.

Bound, John, Julie Berry Cullen, Austin Nichols, and Lucie Schmidt. "The Welfare Implications of Increasing Disability Insurance Benefit Generosity" *Journal of Public Economics* 88, 12 (December 2004): 2487-2514.

Bound, John, Michael Schoenbaum, and Timothy A. Waidman. *Health Limitations and Early Retirement*. Michigan Retirement Research Center Working Paper No. 99-Q2, Michigan Retirement Research Center at the University of Michigan, September 2000.

Brown, Michael Hayden. *Geographic and Group Variation in Supplemental Security Income*. Ph.D. dissertation, University of Kentucky, 2002.

Burkhauser, Richard V. and Mary C. Daly. "U.S. Disability Policy in a Changing Environment." *Journal of Economic Perspectives* 16, 1 (2002): 213-224.

Burstein, Nancy R., Erik Beecroft, Jordan Hiller, and Michelle L. Wood. "Effects of the Project NetWork Demonstration Waiver Provisions: Final Report." Bethesda, MD: Abt Associates Inc., 1999.

Butrica, Barbara A. and Gordon B.T. Mermin. *Annuitized Wealth and Consumption at Older Ages*. Center for Retirement Research Working Paper No. 2006-26, Center for Retirement Research at Boston College, December 2006.

Campbell, Kevin, Jim Baumohl, and Sharon R. Hunt. "The Bottom Line: Employment and Barriers to Work among Former SSI DA&A Beneficiaries." *Contemporary Drug Problems* 30, 1-2 (Spring/Summer 2003): 195-240.

Chatterji, Pinka and Ellen Meara. *Health and Labor Market Consequences of Eliminating Federal Disability Benefits for Substance Abusers*. National Bureau of Economic Research Working Paper No. 13407, September 2007.

Clarke, George R.G. "The Effect of Medicaid on Cash Assistance to the Aged and Disabled Poor." *Public Finance Review* 31, 1 (January 2003): 3- 43.

Daly, Mary C. and Richard V. Burkhauser. *The Supplemental Security Income Program*. Federal Reserve Bank of San Francisco Working Paper No. 2001-06, September 2000.

Davies, Paul S. "SSI Eligibility and Participation Among the Oldest Old: Evidence from the AHEAD." *Social Security Bulletin* 64, 3 (2001/2002): 38-63.

Davies, Paul S. and Kalman Rupp. "An Overview of the National Survey of SSI Children and Families and Related Products." *Social Security Bulletin* 66, 2 (2005/2006): 7-20.

Davies, Paul S. and Melissa M. Favreault. *Interactions between Social Security Reform and the Supplemental Security Income for the Aged*. Center for Retirement Research Working Paper No. 2004-02, Center for Retirement Research at Boston College, February 2004.

Davies, Paul S. and Michael J. Greenwood. *Welfare Reform and Immigrant Participation in the Supplemental Security Income Program*. Michigan Retirement Research Center Working Paper No. 2004-087, Michigan Retirement Research Center at the University of Michigan, September 2004.

Davies, Paul S., Howard Iams, and Kalman Rupp. "The Effect of Welfare Reform on SSA's Disability Programs: Design of Policy Evaluation and Early Evidence." *Social Security Bulletin* 63, 1 (2000): 3-11.

Davies, Paul S., Kalman Rupp, and Alexander Strand. "The Potential of the SSI Program to Fight Poverty among the Poorest Elderly." *Journal of Aging and Social Policy* 16, 1 (2004): 21-42.

Davies, Paul S., Minh Huynh, Chad Newcomb, Paul O'Leary, Kalman Rupp, and Jim Sears. "Modeling SSI Financial Eligibility and Simulating the Effect of Policy Options." *Social Security Bulletin* 64, 2 (2001/2002): 16-45.

DeCesaro, Anne and Jeffrey Hemmeter. *Characteristics of Noninstitutionalized DI and SSI Program Participants*. Research and Statistics Note No. 2008-02. Washington, DC: Office of Research, Evaluation, and Statistics, Office of Retirement and Disability Policy, Social Security Administration, January 2008.

Dietz, Tracy L. "Mexican American Elderly and Supplemental Security Income: Reasons and Characteristics Associated with Nonuse." *Journal of Applied Gerontology* 20, 3 (September 2001): 292-306.

Dobkin, Carlos and Steven L. Puller. "The Effects of Government Transfers on Monthly Cycles in Drug Abuse, Hospitalization and Mortality." *Journal of Public Economics* 91, 11-12 (December 2007): 2137-2157.

DosReis, Susan, Julie Magno Zito, Daniel J. Safer, and Karen L. Soeken. "Mental Health Services for Youths in Foster Care and Disabled Youths." *American Journal of Public Health* 91, 7 (July 2001): 1094-1099.

Duggan, Mark G. and Melissa Schettini Kearney. "The Impact of Child SSI Enrollment on Household Outcomes." *Journal of Policy Analysis and Management* 26, 4 (Autumn 2007): 861-886.

_____. *The Impact of Child SSI Enrollment on Household Outcomes: Evidence from the Survey of Income and Program Participation*. National Bureau of Economic Research Working Paper No. 11568, August 2005.

Elder, Todd and Elizabeth Powers. *A Longitudinal Analysis of Entries and Exits of the Low-Income Elderly to and from the Supplemental Security Income Program*. Michigan Retirement Research Center Working Paper No. 2007-156, Michigan Retirement Research Center at the University of Michigan, October 2007.

_____. "The Incredible Shrinking Program: Trends in SSI Participation of the Aged." *Research on Aging* 28, 3 (May 2006): 341-358.

_____. *Public Health Insurance and SSI Program Participation Among the Aged*. Michigan Retirement Research Center Working Paper No. 2006-117, Michigan Retirement Research Center at the University of Michigan, April 2006.

_____. "The Effect of Falling SSI Generosity on SSI Participation Among the Aged Since the 1970s." *Proceedings of the 98th Annual Conference on Taxation of the National Tax Association* (2005): 400-406.

Ettner, Susan L., Karen Kuhlthau, Thomas J. McLaughlin, James M. Perrin, and Steven L. Gortmaker. "Impact of Expanding SSI on Medical Expenditures of Disabled Children." *Health Care Financing Review* 21 (Spring 2000): 185-201.

Favreault, Melissa M. and Douglas A. Wolf. *Living Arrangements and Supplemental Security Income Receipt Among the Aged*. Center for Retirement Research Working Paper No. 2004-03, Center for Retirement Research at Boston College, February 2004.

Feldstein, Martin S. and Jeffrey B. Liebman. Eds. *The Distributional Aspects of Social Security and Social Security Reform*. Chicago, IL: University of Chicago Press, 2002.

Fernandes, Adrienne L., Scott Szymendera, and Emilie Stolfus. *Child Welfare: Social Security and Supplemental Security Income (SSI) Benefits for Children in Foster Care*. Washington, DC: Library of Congress, Congressional Research Service Report No. RL33855, February 2007.

Fitzpatrick, Collen. "Report Highlights Impact of Welfare Reform on Addicted Population." *Alcoholism & Drug Abuse Weekly* 15, 31 (August 2003): 1-3.

Garrett, Bowen and Sherry Glied. "Does State AFDC Generosity Affect Child SSI Participation?" *Journal of Policy Analysis and Management* 19, 2 (Spring 2000): 275-295.

Gibson, Nancy P. "SSI Rules Simplification Provides Helpful Changes." *The Exceptional Parent* 35, 4 (April 2005): 64-65.

Giertz, Seth. *An Examination of the Impact of Federal Disability Programs On Family Labor Supply: Evidence from the Health and Retirement Study*, Center for Retirement Research Dissertation, Center for Retirement Research at Boston College, May, 2001.

Gilmer, Todd, Richard Kronick, Paul Fishman, and Theodore G. Ganiats. "The Medicaid Rx Model: Pharmacy-Based Risk Adjustment for Public Programs." *Medical Care* 39, 11 (November 2001): 1188-1202.

Goulet, Joseph L., Robert Rosenheck, and Leslie Douglas. "Effectiveness of a Targeted Mailing Outreach Program on SSI Applications and Awards." *The Social Service Review* 73, 4 (Dec. 1999): 579-587.

Grady, April. *Primer on Disability Benefits: Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI)*. Washington, DC: Library of Congress, Congressional Research Service Report No. RL32279, March 2005.

Gruber, Jonathan and Jeffrey Kubik. *Health Insurance Coverage and the Disability Insurance Application Decision*. Center for Retirement Research Working Paper No. 2002-04, Center for Retirement Research at Boston College, September 2002.

Guydish, Joseph, Claudia Ponath, Alan Bostrom, Kevin M. Campbell, and Nancy Barron. "Effects of Losing SSI Benefits on Standard Drug and Alcohol Outcomes Measures." *Contemporary Drug Problems* 30, 1-2 (Spring/Summer 2003): 169-193.

Haider, Steven J., Alison Jacknowitz, and Robert F. Schoeni. *The Economic Status of Elderly Divorced Women*. Michigan Retirement Research Center Working Paper No. 2003-046, Michigan Retirement Research Center at the University of Michigan, May 2003.

Hanrahan, Patricia, Daniel J. Luchin, Lea Cloninger, and James Swartz. "Medicaid Eligibility of Former Supplemental Security Income Recipients with Drug or Alcoholism Disability." *American Journal of Public Health* 94, 1 (January 2004): 46-47.

Hao, Lingxin and Yukio Kawano. "Immigrants' Welfare Use and Opportunity for Contact with Co-Ethnics." *Demography* 38, 3 (August 2001): 376-389.

Herd, Pamela, Robert F. Schoeni, and James S. House. "Upstream Solutions: Does the Supplemental Security Income Program Reduce Disability in the Elderly?" *The Milbank Quarterly* 86, 1 (March 2008): 5-45.

Hill, Steven C. and Judith Wooldridge. "Informed Participation in TennCare by People with Disabilities." *Journal of Health Care for the Poor and Underserved* 17, 4 (November 2006): 851-875.

_____. "SSI Enrollees' Health Care in TennCare." *Journal of Health Care for the Poor and Underserved* 14, 2 (May 2003): 229-243.

_____. "Plan Characteristics and SSI Enrollees' Access to and Quality of Care in Four TennCare MCOs." *Health Services Research* 37, 5 (2002): 1197-1220.

Hill, Steven C., Craig Thornton, Christopher Trenholm, and Judith Wooldridge. "Risk Selection Among SSI Enrollees in TennCare." *Inquiry* 39, 2 (Summer 2002): 152-167.

Hogan, Sean R., George J. Unick, Richard Speigman, and Jean C. Norris. "Social Welfare Policy and Public Assistance for Low-Income Substance Abusers: The Impact of 1996 Welfare Reform Legislation on the Economic Security of Former Supplemental Security Income Drug Addiction and Alcoholism Beneficiaries." *Journal of Sociology & Social Welfare* 35, 1 (March 2008): 221-24.

Hunt, Sharon R. and Jim Baumohl. "Now Invited to Testify: Former Beneficiaries Appraise the SSI Drug Addiction and Alcoholism Program." *Contemporary Drug Problems* 30, 1-2 (Spring/Summer 2003): 169-193.

Huynh, Minh, Kalman Rupp, and James Sears. *The Assessment of Survey of Income and Program Participation (SIPP) Benefit Data Using Longitudinal Administrative Records*. SIPP Working Paper No. 238. Census Bureau, 2002.

Inkelas, Moira, Melissa Rowe, Lynn A. Karoly, and Jeannette A. Rogowski. *Policy Evaluation of the Effects of the 1996 Welfare Reform Legislation on SSI Benefits for Disabled Children: Second Round Case Study Findings*. RAND Corporation Report DRU-2224, May 2000.

_____. *Policy Evaluation of the Effects of the 1996 Welfare Reform Legislation on SSI Benefits for Disabled Children: First Round Case Study Findings*. RAND Corporation Report DRU-2017, June 1999.

Karoly, Lynn A. and Paul S. Davies. *Impact of the 1996 Childhood Disability Reforms: Evidence from Matched SIPP-SSA Data*. Michigan Retirement Research Center Working Paper No. 2004-079, Michigan Retirement Research Center at the University of Michigan, June 2004.

Karoly, Lynn A., Randall A. Hirscher, and Jeannette A. Rogowski. *A Descriptive Analysis of the SSI Childhood and Age-18 Disability Redetermination Process: Results through August 28, 1999*. RAND Corporation Report DRU-2328, August 2000.

Katz, Marsha R. *Don't Look for Logic: An Advocate's Manual for Negotiating the SSI and SSDI Programs*. Missoula, MT: University of Montana Rural Institute, 2005.

Kelly, Rachel. *Supplemental Security Income: Efforts to Prevent Prisoners from Receiving Benefits*. Washington, DC: Library of Congress, Congressional Research Service, 1999.

Kennedy, Lenna D. "Earnings Histories of SSI Beneficiaries Working in December 1997." *Social Security Bulletin* 63, 3 (2000): 34-46.

_____. "SSI At Its 25th Year." *Social Security Bulletin* 62, 2 (1999): 52-58.

Kijakazi, Kilolo. *Women's Retirement Income: The Case for Improving Supplemental Security Income*. Washington, DC: Center on Budget and Policy Priorities, 2001.

Kingson, Eric R., Margaret Morse, and Gary Calhoun. *The Evolution of Social Security Disabled Widow(er)s Benefits*. Center for Retirement Research Working Paper No. 2003-9, Center for Retirement Research at Boston College, May 2003.

Koenig, Melissa and Kalman Rupp. "SSI Recipients in Households and Families with Multiple Recipients: Prevalence and Poverty Outcomes." *Social Security Bulletin* 65,2 (2003/2004): 14-27.

Kornfeld, Robert and Kalman Rupp. "The Net Effects of the Project NetWork Return-to-Work Case Management Experiment on Participant Earnings, Benefit Receipt, and Other Outcomes." *Social Security Bulletin* 63, 1 (2000): 12-33.

Kornfeld, Robert J., Michelle L. Wood, Larry L. Orr, and David A. Long. *Impact of the Project NetWork Demonstration: Final Report*. Bethesda, MD: Abt Associates Inc., March 1999.

Kubik, Jeffrey D. "Fiscal Federalism and Welfare Policy: The Role of States in the Growth of Child SSI." *National Tax Journal* 56, 1 (March 2003): 61-79.

_____. "Incentives for the Identification and Treatment of Children with Disabilities: The Supplemental Security Income Program." *Journal of Public Economics* 73, 2 (1999): 187-215.

Lee, Julie, Mark McClellan, and Jonathan Skinner. *The Distributional Effects of Medicare*. In "Tax Policy and the Economy," James Poterba, editor, Volume 13, 1999.

Lewin Group. *Evaluation Design for the Ticket to Work Program: Preliminary Process Evaluation*. Report prepared for the Social Security Administration. March 2003.

_____. *Evaluation Design for the Ticket to Work Program: Preliminary Report on Evaluation Design*. Report prepared for the Social Security Administration. June 2002.

Loprest, Pamela J. *Supplemental Security Income for Children with Disabilities: Part of the Federal Safety Net*. Urban Institute Number A-10 in Series Issues and Options for States, 2000.

Loprest, Pamela J. and David C. Wittenburg. "Posttransition Experiences of Former Child SSI Recipients." *Social Service Review* 81, 4 (December 2007): 583-608.

_____. *Choices, Challenges, and Options: Child SSI Recipients Preparing for the Transition to Adult Life*, report prepared under contract to the Social Security Administration, May 2005.

Lo Sasso, Anthony T. and Deborah A. Freund. "A Longitudinal Evaluation of the Effect of Medi-Cal Managed Care on Supplemental Security Income and Aid to Families with Dependent Children Enrollees in Two California Counties." *Medical Care* 38, 9 (2000): 937-948.

Luchansky, Bill, Dan Fordlund, Sharon Estee, Peter Lund, Antoinette Krupski, and Kenneth Stark. "Substance Abuse Treatment and Criminal Justice Involvement for SSI Recipients: Results from Washington State." *American Journal on Addictions* 15, 5 (September-October 2006): 370-379.

Martin, Patricia P. "Hispanics, Social Security, and Supplemental Security Income." *Social Security Bulletin* 67, 2 (2007): 73-100.

Martin, Teran and Paul S. Davies. "Changes in the Demographic and Economic Characteristics of SSI and DI Beneficiaries between 1984 and 1999." *Social Security Bulletin* 65, 2 (2003/2004): 1-13.

Matherlee, Karen. *Bridging Silos, Part I: Linkages among the DI, SSI, Medicare, and Medicaid Programs*. National Health Policy Forum Background Paper. Washington, DC: National Health Policy Forum. November 2003.

_____. *Bridging Silos, Part II: DI, SSI, Medicare, and Medicaid Issues and Incentives*. National Health Policy Forum Background Paper. Washington, DC: National Health Policy Forum. November 2003.

Mayer, Susan E. *Why Welfare Caseloads Fluctuate: A Review of Research on AFDC, SSI, and the Food Stamp Program*. Joint Center for Poverty Research Working Paper 166 (April 2000).

McGarry, Kathleen. *Guaranteed Income: SSI and the Well-Being of the Elderly Poor*. National Bureau of Economic Research Working Paper No. W7574, March 2000.

Mitchell, Jean M. and Darrell J. Gaskin. "Factors Affecting Plan Choice and Unmet Need Among Supplemental Security Income Eligible Children with Disabilities." *Health Services Research* 40, 5, pt. 1 (October 2005): 1379-1399.

_____. "Do Children Receiving Supplemental Security Income Who Are Enrolled in Medicaid Fare Better Under a Fee-for-Service or Comprehensive Capitation Model?" *Pediatrics* 114, 1 (July 2004): 196-204.

Mitchell, Susan, Colette Lamothe-Galette, and Frank Potter. *Survey Response Incentives for a Low-Income Population: What Works?* Mathematica Policy Research Issue Brief Number 2003-2. Princeton, NJ: Mathematica Policy Research, Inc. November 2003.

Moffitt, Robert. *Economic Effects of Means-Tested Transfers in the U.S.* National Bureau of Economic Research Working Paper No. 8730, January 2002.

Msall, Michael E., Fernando Bobis, and Shelly Field. "Children with Disabilities and Supplemental Security Income." *Infants & Young Children: An Interdisciplinary Journal of Special Care Practices* 19, 1 (January-March 2006): 2-15.

Nadel, Mark, Lisa Alecxih, Rene Parent, and James Sears. "Medicare Premium Buy-in Programs: Results of SSA Demonstration Projects." *Social Security Bulletin* 63, 3 (2000): 26-33.

Nadel, Mark, Steve Wamhoff, and Michael Wiseman. "Disability, Welfare Reform, and SSI." *Social Security Bulletin* 65, 3 (2003/2004): 14-29.

Neumark, David and Elizabeth T. Powers. "The Effects of Changes in State SSI Supplements on Pre-Retirement Labor Supply." *Public Finance Review* 33, 1 (January 2005): 3-35.

_____. "The Effect of the SSI Program on Labor Supply: Improved Evidence from Social Security Administrative Files." *Social Security Bulletin* 65, 3 (2003/2004): 45-60.

_____. "Welfare for the Elderly: the Effects of SSI on Pre-Retirement Labor Supply." *Journal of Public Economics* 78, 1,2 (October 2000): 51-80.

Neumark, David, Elizabeth T. Powers, and Klaus F. Zimmermann. "Supplemental Security Income, Labor Supply, and Migration." *Journal of Population Economics* 19, 3 (July 2006): 447-479.

Norris, Jean, Richard Scott, Richard Speigman, and Rex Green. "Homelessness, Hunger and Material Hardship Among Those Who Lost SSI." *Contemporary Drug Problems* 30, 1-2 (Spring/Summer 2003): 241-273.

Ozawa, Martha N. "SSI and Adults with Disabilities." *Journal of Disability Policy Studies* 13, 3 (2002): 153-162.

_____. "SSI for Children with Mental Disorders: Backgrounds and a Study of Participation." *Children and Youth Review* 21, 6 (1999): 437-462.

Ozawa, Martha N. and Hong-Sik Yoon. "Social Security and SSI as Safety Nets for the Elderly Poor." *Journal of Aging and Social Policy* 14, 2 (2002): 1-25.

Parent, Rene. *Defined Contribution Pension Plans and the Supplemental Security Income Program*. Policy Brief No. 2006-01. Washington, DC: Office of Disability and Income Assistance Policy, Office of Policy, Social Security Administration, March 2006.

Perrin, James M., Karen Kuhlthau, Thomas J. McLaughlin, Susan L. Ettner, and Steven L. Gortmaker. "Changing Patterns of Conditions Among Children Receiving Supplemental Security Income Disability Benefits." *Archives of Pediatrics and Adolescent Medicine* 153, 1 (January 1999): 80-84.

Podus, Deborah, Eunice Chang, Mary Lynn Brecht, James A. Swartz, and Douglas M. Anglin. "Drug Use Prevalence among Former SSI DA&A Recipients." *Contemporary Drug Problems* 30, 1-2 (Spring/Summer 2003): 275-290.

Powers, Elizabeth T. and David Neumark. "The Interaction of Public Retirement Income Programs in the United States." *American Economic Review* 93, 2 (May 2003): 261-265.

_____. *The Supplemental Security Income Program and Incentives to Claim Social Security Retirement Early: Empirical Evidence from Matched SIPP and Social Security Administrative Files*. Michigan Retirement Research Center Working Paper No. 2003-036, Michigan Retirement Research Center at the University of Michigan, January 2003.

_____. *The Supplemental Security Income Program and Incentives to Take Up Social Security Early Retirement: Empirical Evidence from Matched SIPP and Social Security Administration Files*. National Bureau of Economic Research Working Paper No. 8670, December 2001.

Powers, Elizabeth T. and Todd Elder. *SSI for the Aged and the Problem of Take-Up*. Michigan Retirement Research Center Working Paper No. 03-14, Michigan Retirement Research Center at the University of Michigan, January 2004.

Reichman, Nancy E., Hope Corman, and Kelly Noonan. "Effects of Child Health on Sources of Public Support." *Southern Economic Journal* 73, 1 (July 2006): 136-156.

Roberto, Pamela N., Jean M. Mitchell, and Darrell J. Gaskin. "Plan Choice and Changes in Access to Care over Time for SSI-Eligible Children with Disabilities." *Inquiry* 42, 2 (Summer 2005): 145-159.

Roberts-DeGennaro, Maria. "Welfare Reform: Impact on Children Under Age 18 Receiving SSI." *Journal of Health and Social Policy* 14, 2 (2001): 1-24.

_____. "Impact of U.S. Federal Welfare Reform Law on Children with Mental Disorders Receiving SSI." *Journal of Health and Social Policy* 13, 2 (2001): 1-20.

Rogers, Jackie B., Malachy Bishop, and Ralph M. Crystal. "Predicting Rehabilitation Outcome for Supplemental Security Income and Social Security Disability Income Recipients: Implications for Consideration with the Ticket to Work Program." *Journal of Rehabilitation* 71, 3 (July/August/September 2005): 5-10.

Rogowski, Jeannette A., Lynn A. Karoly, Jacob A. Klerman, Moira Inkelas, Melissa Rowe, and Randall A. Hirscher. *Final Report for Policy Evaluation of the Effect of the 1996 Welfare Reform Legislation on SSI Benefits for Disabled Children*. RAND Corporation Report DRU-2559-SSA, March 2002.

Rosen, Marc I., Thomas J. McMahon, and Robert A. Rosenheck. "Homeless People Whose Self-Reported SSI/DI Status Is Inconsistent with Social Security Administration Record." *Social Security Bulletin* 67, 1 (2007): 53-62.

Rosen, Marc I., Thomas J. McMahon, HaiQun Lin, and Robert A. Rosenheck. "Effect of Social Security Payments on Substance Abuse in a Homeless Mentally Ill Cohort." *Health Services Research* 41, 1 (February 2006) 173-191.

Rudbeck, Jason. "Paying Attention to Welfare: Supplemental Security Income, Attention Deficit Hyperactivity Disorder, and the Incentives of Parents" Ph.D. diss., Clemson University, 2006.

Rupp, Kalman, Alexander Strand, and Paul Davies. "Poverty among Elderly Women: Assessing SSI Options to Strengthen Social Security Reform." *Journals of Gerontology Series B: Psychological Sciences & Social Sciences* 58B, 6 (November 2003): S359-S368.

_____. "The Potential of the Supplemental Security Program to Fight Poverty among Elderly Women." In Proceedings of the Sixth Women's Policy Research Conference, *The Status of Women: Facing the Facts, Forging the Future, June 8-9, 2001*, by the Institute for Women's Policy Research, pp. 265-269. Washington, DC: Institute for Women's Policy Research, Spring 2003.

Rupp, Kalman, Alexander Strand, Paul S. Davies, and James Sears. "Benefit Adequacy Among Elderly Social Security Retired Worker Beneficiaries and the SSI Federal Benefit Rate," *Social Security Bulletin* 67, 3: 29-52.

Rupp, Kalman and James Sears. "Eligibility for the Medicare Buy-In Programs, Based on a Survey of Income and Program Participation Simulation." *Social Security Bulletin* 63, 3 (2000): 13-25.

Rupp, Kalman and Paul S. Davies. "A Long-Term View of Health Status, Disabilities, Mortality, and Participation in the DI and SSI Disability Programs." In *Research in Labor Economics, Accounting for Worker Well-Being, Volume 23*, edited by Solomon W. Polachek. Amsterdam: Elsevier, JAI Press, 2004.

Rupp, Kalman and Stephen H. Bell eds. *Paying for Results in Vocational Rehabilitation: Will Provider Incentives Work for Ticket to Work?* Washington, DC: The Urban Institute, 2003.

Rupp, Kalman, Dianne Driessen, Robert Kornfeld, and Michelle Wood. "The Development of the Project NetWork Administrative Records Database for Policy Evaluation." *Social Security Bulletin* 62, 2 (1999): 30-42.

Rupp, Kalman, Paul S. Davies, Chad Newcomb, Howard Iams, Carrie Becker, Shanti Mulpuru, Stephen Ressler, Kathleen Romig, and Baylor Miller. "A Profile of Children with Disabilities Receiving SSI Benefits: Highlights from the National Survey of SSI Children and Families." *Social Security Bulletin* 66, 2 (2005/2006): 21-36.

Schmidt, Lucie. *Effects of Welfare Reform on the Supplemental Security Income (SSI) Program*. National Poverty Center Policy Brief No. 4, Gerald R. Ford School of Public Policy, University of Michigan, October 2004.

Schmidt, Lucie and Purvi Sevak. "AFDC, SSI, and Welfare Reform Aggressiveness: Caseload Reductions vs. Caseload Shifting." *Journal of Human Resources* 39, 3 (Summer 2004): 792-812.

Scott, Charles G. "Identifying the Race or Ethnicity of SSI Recipients." *Social Security Bulletin* 62, 4 (1999): 9-20.

Scott, Richard and Jim Baumohl. "Decisions to Appeal, Decisions to Approve: Requalification for SSI by Former DA&A Beneficiaries." *Contemporary Drug Problems* 30, 1-2 (Spring/Summer 2003): 147-168.

Sears, James. "Comparing Beneficiaries of the Medicare Savings Programs with Eligible Nonparticipants." *Social Security Bulletin* 64, 3 (2001/2002): 76-80.

Sim, Joann. "Improving Return-to-Work Strategies in the United States Disability Programs, with Analysis of Program Practices in Germany and Sweden." *Social Security Bulletin* 62, 3 (1999): 41-50.

Smeeding, Timothy M. and Susanna Sandstrom. *Poverty and Income Maintenance in Old Age: A Cross-National View of Low Income Older Women*. Center for Retirement Research Working Paper No. 2004-29, Center for Retirement Research at Boston College, November 2004.

Smith, Lauren A., Paul H. Wise, and Nina S. Wampler. "Knowledge of Welfare Reform Program Provisions Among Families of Children with Chronic Conditions." *American Journal of Public Health* 92, 2 (February 2002): 228-230.

Soss, Joe and Lael R. Keiser. *The Political Roots of Disability Claims: How State Environments and Policies Shape Citizen Demand*. Institute for Research on Poverty Discussion Paper No. 1292-05, January 2005.

Stapleton, David C. and Adam Tucker. "Will Expanding Health Care Coverage for People with Disabilities Increase their Employment and Earnings? Evidence from an Analysis of the SSI Work Incentive Program." In *The Economics of Disability: Research in Human Capital and Development*, edited by David S. Salkever and Alan Sorking. Stamford, CT: JAI Press 2000.

Stapleton, David C., David C. Wittenburg, Michael E. Fishman, and Gina A. Livermore. "Transitions from AFDC to SSI Before Welfare Reform." *Social Security Bulletin* 64, 1 (2001/2002): 84-114.

Stapleton, David C., Michael E. Fishman, Gina A. Livermore, David Wittenburg, Adam Tucker, and Scott Scrivner. *Policy Evaluation of the Overall Effects of Welfare Reform on SSA Programs*, final report and appendix prepared under contract to the Office of the Assistant Secretary for Planning and Evaluation, Department of Health and Human Services and the Social Security Administration, April 1999.

Strand, Alexander. *Social Security Disability Programs: Assessing the Variation in Allowance Rates*. ORES Working Paper No. 98, Office of Research, Evaluation, and Statistics, Social Security Administration, 2002.

Strand, Alexander and Kalman Rupp. "Disabled Workers and the Indexing of Social Security Benefits." (Forthcoming) *Social Security Bulletin* 67, 4 (2007).

Swartz, James A., Arthur J. Lurigio, and Paul Goldstein. "Severe Mental Illness and Substance Use Disorders Among Former Supplemental Security Income Beneficiaries for Drug Addiction and Alcoholism." *Archives of General Psychiatry* 57, 7 (July 2000): 701-707.

Swartz, James A., Jim Baumohl, and Arthur J. Lurigio. "Termination of Supplemental Security Income Benefits for Drug Addiction and Alcoholism: Research of a Longitudinal Study of the Effects on Former Beneficiaries." *Social Service Review* 78, 1 (March 2004): 96-124.

Swartz, James A., Kevin M. Campbell, Jim Baumohl, and Peggy Tonkin. "Drug Treatment Participation and Retention Rates among Former Recipients of Supplemental Security Income for Drug Addiction and Alcoholism." *Contemporary Drug Problems* 30, 1-2 (Spring/Summer 2003): 335-364.

Swartz, James A., Peggy Tonkin, and Jim Baumohl. "The Methodology of the Multi-Site Study of the Termination of Supplemental Security Income Benefits for Drug Addicts and Alcoholics." *Contemporary Drug Problems* 30, 1-2 (Spring/Summer 2003): 77-121.

Swartz, James A., Zoran Martinovich, and Paul Goldstein. "An Analysis of the Criminogenic Effects of Terminating the Supplemental Security Income Impairment Category for Drug Addiction and Alcoholism." *Contemporary Drug Problems* 30, 1-2 (Spring/Summer 2003): 391-424.

Sweeney, Eileen P. and Shawn Fremstad. *Supplemental Security Income: Supporting People with Disabilities and the Elderly Poor*. Washington, DC: Center on Budget and Policy Priorities, August 2005.

Szymendera, Scott. *Potential Effect of Marriage on Supplemental Security Income (SSI) Eligibility and Benefits*. Washington, DC: Library of Congress, Congressional Research Service Report No. RL33675, January 2008.

_____. *Primer on Disability Benefits: Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI)*. Washington, DC: Library of Congress, Congressional Research Service Report No. RL32279, January 2008.

_____. *Supplemental Security Income (SSI): Accounts Not Counted as Resources*. Washington, DC: Library of Congress, Congressional Research Service Report No. RS22512, May 2007.

Szymendera, Scott. *Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI): Proposed Changes to the Disability Determination and Appeals Processes*. Washington, DC: Library of Congress, Congressional Research Service Report No. RL33179, April 2006.

_____. *Social Security Administration: Suspension of Benefits for Fugitive Felons*. Washington, DC: Library of Congress, Congressional Research Service Report No. RS22355, December 2005.

Szymendera, Scott and Carol D. Davis. *Supplemental Security Income (SSI): Benefit Changes for California Residents, 2006 and 2007*. Washington, DC: Library of Congress, Congressional Research Service Report No. RS22365, January 2006.

Thornton, Craig, Gina Livermore, David Stapleton, John Kregel, Tim Silva, Bonnie O'Day, Thomas Fraker, W. Grant Revell, Jr., Heather Schroeder, and Meredith Edwards. *Evaluation of the Ticket to Work Program: Initial Evaluation Report*. Report prepared under contract to the Office of Disability and Income Security Programs, Social Security Administration, February 2004.

Thornton, Craig, Gina Livermore, Thomas Fraker, David Stapleton, Bonnie O'Day, David Wittenburg, Robert Weathers, Nanette Goodman, Tim Silva, Emily Sama Martin, Jesse Gregory, Debra Wright, and Arif Mamun. *Evaluation of the Ticket to Work: Program Assessment of Post-Rollout Implementation and Early Impacts*. Report prepared under contract to the Office of Disability and Income Security Programs, Social Security Administration, May 2007.

Thornton, Craig, Thomas Fraker, Gina Livermore, David Stapleton, Bonnie O'Day, Tim Silva, Emily Sama Martin, John Kregel, and Debra Wright. *Evaluation of the Ticket to Work Program: Implementation Experience During the Second Two Years of Operation (2003-2004)*. Report prepared under contract to the Office of Disability and Income Security Programs, Social Security Administration, January 2006.

U.S. General Accounting Office. *Supplemental Security Income: Sustained Management Attention Needed to Address Residency Violations*. Testimony Before the Subcommittee on Human Resources, Committee on Ways and Means. U.S. House of Representatives. GAO-04-789T, 2004.

_____. *Supplemental Security Income: SSA Could Enhance Its Ability to Detect Residency Violations*. Report to the Chairman, Subcommittee on Human Resources, Committee on Ways and Means, U.S. House of Representatives. GAO-03-724, 2003.

_____. *Supplemental Security Income: Progress Made in Detecting and Recovering Overpayments, but Management Attention Should Continue*. Report to the Commissioner of Social Security. GAO-02-849, 2002.

_____. *Social Security Administration: Agency Must Position Itself Now to Meet Profound Challenges*. Testimony Before the Subcommittee on Social Security, Committee on Ways and Means, U.S. House of Representatives. GAO-02-289T, 2002.

_____. *Major Management Challenges and Program Risks: Social Security Administration*. GAO-01-261, 2001.

_____. *SSI Disability: Other Programs May Provide Lessons for Improving Return-to-Work Efforts*. Report to Congressional Requesters. GAO-01-153, 2001.

U.S. General Accounting Office. *Social Security Reform: Potential Effects on SSA's Disability Programs and Beneficiaries*. Report to the Ranking Member, Subcommittee on Labor, Health and Human Services, Education, and Related Agencies, Committee on Appropriations. GAO-01-35, 2001.

_____. *Supplemental Security Income: Incentive Payments Have Reduced Benefit Overpayments to Prisoners*. GAO/HEHS-00-2, 1999.

_____. *Supplemental Security Income: Additional Actions Needed to Reduce Program Vulnerability to Fraud and Abuse*. Report to the Honorable Henry Waxman, Ranking Minority Member, Committee on Government Reform, U.S. House of Representatives. GAO/HEHS-99-151, 1999.

_____. *Supplemental Security Income: Progress Made in Implementing Welfare Reform Changes—More Action Needed*. Report to the Committee on Finance, U.S. Senate, and the Committee on Ways and Means, U.S. House of Representatives. GAO/HEHS-99-103, 1999.

_____. *SSI Children: Multiple Factors Affect Families' Costs for Disability-Related Services*. Report to Congressional Committees. GAO/HEHS-99-99, 1999.

_____. *Supplemental Security Income: Long-Standing Issues Require More Active Management and Program Oversight*. Statement of Cynthia M. Fagnoni, Director, Income Security Issues, Health, Education, and Human Services Division, Before the Subcommittee on Human Resources, Committee on Ways and Means, U.S. House of Representatives. GAO/T-HEHS-99-51, 1999.

_____. *Supplemental Security Income: Increased Receipt and Reporting of Child Support Could Reduce Payments*. Report to the Committees on Finance, U.S. Senate, and Ways and Means, U.S. House of Representatives. GAO/HEHS-99-11, 1999.

U.S. Government Accountability Office. *SSA Disability Representatives: Fee Payment Changes Show Promise, but Eligibility Criteria and Representative Overpayments Require Further Monitoring*. Report to Congressional Committees. GAO-08-5, 2007.

_____. *TANF and SSI: Opportunities Exist to Help People with Impairments Become More Self-Sufficient*. Report to the Chairman, Subcommittee on Human Resources, Committee on Ways and Means, U.S. House of Representatives. GAO-04-878, 2004.

U.S. Social Security Administration. *Trends in the Social Security and Supplemental Security Income Disability Programs*. SSA Publication No. 13-11831, Office of Policy, Office of Research, Evaluation, and Statistics, August 2006.

_____. *Simplifying the Supplemental Security Income Program: Challenges and Opportunities*. SSA Pub. No. 13-005, Office of Policy, December 2000.

_____. *The SSI Program at the Millennium*. SSA Pub. No. 62-003, Office of Policy, November 2000.

_____. *Social Security Administration's Report on Supplemental Security Income: Income and Resource Exclusions and Disability Insurance Earnings-Related Provisions*. Report to the Speaker of the U.S. House of Representatives and to the President of the U.S. Senate, March 2000.

_____. *Annual Statistical Supplement to the Social Security Bulletin*. SSA Pub. No. 13-11700, Annual Publication of the Office of Research, Evaluation, and Statistics.

U.S. Social Security Administration. *SSI Annual Statistical Report*. SSA Pub. No. 13-11827, Annual Publication of the Office of Research, Evaluation, and Statistics.

_____. *SSI Recipients by State and County*. SSA Pub. No. 13-11976, Annual Publication of the Office of Research, Evaluation, and Statistics.

_____. *State Assistance Programs for SSI Recipients*. SSA Pub. No. 13-11975, Annual Publication of the Office of Research, Evaluation, and Statistics.

Van Hook, Jennifer V. "SSI Eligibility and Participation Among Elderly Naturalized Citizens and Noncitizens." *Social Science Research* 29, 1 (March 2000): 51-69.

Van Hook, Jennifer V. and Frank D. Bean. "The Growth in Noncitizen SSI Caseloads 1979-1996: Aging Versus New Immigrant Effects." *Journals of Gerontology Series B – Psychological Sciences and Social Sciences* 54, 1 (January 1999): S16-S23.

Wamhoff, Steve and Michael Wiseman. "The TANF/SSI Connection." *Social Security Bulletin* 66, 4 (2005/2006): 21-36.

Watkins, Katherine E., Deborah Podus, and Emilia Lombardi. "The Health and Mental Health of Disabled Substance Abusers." *Journal of Behavioral Health Services & Research* 28, 2 (May 2001): 205-211.

Watkins, Katherine E., Deborah Podus, Emilia Lombardi, and Audrey Burnam. "Changes in Mental Health and Service Use After Termination of SSI Benefits." *Psychiatric Services: A Journal of the American Psychiatric Association* 52, 9 (September 2001): 1210-1215.

Weathers, Robert R. II., Gerard Walter, Sara Schley, John Hennessey, Jeffrey Hemmeter, and Richard V. Burkhauser. "How Postsecondary Education Improves Adult Outcomes for Supplemental Security Income Children with Severe Hearing Impairments." *Social Security Bulletin* 67, 2 (2007): 101-131.

Weiner, Barbara. "Protecting SSI Benefits for Elderly and Disabled Refugees." *Human Rights: Journal of the Section of Individual Rights & Responsibilities* 31, 2 (Spring 2004): 11-12.

Wentworth, Seyda G. and David Pattison. "Income Growth and Future Poverty Rates of the Aged." *Social Security Bulletin* 64, 3 (2001-2002): 23-37.

Wheeler, Peter M., John R. Kearney, and Carolyn A. Harrison. "The U.S. Study of Work Incapacity and Reintegration." *Social Security Bulletin* 64, 1 (2001/2002): 32-44.

Wilschke, Susan. *How many SSI Recipients Live with other Recipients?* Policy Brief No. 2004-03. Washington, DC: Office of Disability and Income Assistance Policy, Office of Policy, Social Security Administration, June 2004.

_____. "Improving Child Support Enforcement for Children Receiving SSI." *Social Security Bulletin* 64, 1 (2001/2002): 16-26.

Wilschke, Susan and Richard Balkus. *Child Support Payments and the SSI Program*. Policy Brief No. 2004-02. Washington, DC: Office of Disability and Income Assistance Policy, Office of Policy, Social Security Administration, February 2004.

Wittenburg, David. *A Health-Conscious Safety Net? Health Problems and Program Use among Low-Income Adults with Disabilities*. New Federalism: National Survey of America's Families No. B-62. Washington, DC: Urban Institute, September 2004. Available at www.urban.org/url.cfm?ID=311065.

Wittenburg, David and Melissa Favreault. *Safety Net or Tangled Web? An Overview of Programs and Services for Adults with Disabilities*. Assessing the New Federalism, Occasional Paper Number 68. Washington, DC: Urban Institute. November 2003.

Wittenburg, David and Pamela J. Loprest. "Early Transition Experiences of Transition-Age Child SSI Recipients: New Evidence from the National Survey of Children and Families." *Journal of Disability Policy Studies* 18, 3 (2007): 176-187.

_____. "Policy Options for Assisting Child SSI Recipients in Transition." Prepared for the Ticket to Work and Work Incentives Advisory Panel. Washington, DC: Urban Institute. October 2003. Available at www.urban.org/url.cfm?ID=410872.

Wittenberg, David and Sandi Nelson. *A Guide to Disability Statistics from the Survey of Income and Program Participation*. Washington, DC: Urban Institute. February 2006.

Wittenburg, David, David Stapleton, Adam Tucker, and Rick Harwood. "An Assessment of the Representativeness of the SSI DA&A Study Panels." *Contemporary Drug Problems* 30, 1-2 (Spring/Summer 2003): 123-136.

H. GLOSSARY

Administrative Expenses (or Costs). Expenses incurred by the Social Security Administration (SSA) in administering the Supplemental Security Income (SSI) program. Such administrative expenses are initially paid from the OASI and DI Trust Funds as provided for in section 201(g)(1) of the Social Security Act. The trust funds are subsequently reimbursed for such expenditures, including any interest lost, from the General Fund of the Treasury.

Affidavit of Support. A contract under which a United States citizen or legal resident agrees to provide support to maintain (i.e., to sponsor) an immigrant as a condition of the immigrant's admission into the United States.

Aged. Individuals aged 65 or older.

Aid—Old-Age Assistance (OAA), Aid to the Blind (AB), and Aid to the Permanently and Totally Disabled (APTD). The former Federal-State programs of adult cash assistance under titles I, X, and XVI respectively, that were replaced in the 50 States and the District of Columbia by the SSI program in 1974. These programs still operate in Guam, the Virgin Islands, and Puerto Rico and are administered at the Federal level by the Secretary of Health and Human Services.

Alien Lawfully Admitted for Permanent Residence. A noncitizen lawfully accorded the privilege of residing permanently in the United States. Such individuals may be issued immigrant visas overseas by the Department of State, or adjusted to permanent resident status while living in the United States by the U.S. Citizenship and Immigration Services (USCIS).

Appeal Rights Process. The administrative review process followed by SSA in determining an individual's rights under the Social Security Act. The administrative review process consists of several steps, which must be requested after the unfavorable initial determination within certain time periods.

Assistance Based on Need. Assistance that is provided by certain programs which use income as a factor of eligibility. The assistance must be funded wholly by a State, a political subdivision of a State, or a combination of such jurisdictions.

Assumptions. Values relating to future trends in certain key factors which affect the eligibility for SSI benefits and the level of such SSI payments. Demographic assumptions include fertility, mortality, net immigration, marriage, and divorce. Economic assumptions include unemployment rates, average earnings, inflation, interest rates, and productivity. Program-specific assumptions include rates of application for and new receipt of various SSI benefits and rates of termination of SSI benefits. The assumptions underlying the projections presented in this report are consistent with the intermediate assumptions of the 2008 OASDI Trustees Report.

Asylee. A noncitizen already in the United States or at a port-of-entry who is granted asylum in the United States. Asylum may be granted to an individual who is unable or unwilling to return to his/her country of nationality, or to seek the protection of that country, because of persecution (or a well-founded fear of persecution) based on the noncitizen's race, religion, nationality, membership in a particular social group or political opinion.

Attendant Care Services. Services (including personal care assistance) that are paid for from Federal, State or local funds and which are provided by a paid attendant required to assist with work related and/or personal functions.

Automatic Cost-of-Living Increase. The annual increase in SSI Federal benefit rates, effective for January of the current year, reflecting the change in the cost of living. The increase equals the percentage increase in the Consumer Price Index for Urban Wage Earners and Clerical Workers measured from the average over July, August, and September of the second preceding year to the average for the same

3 months in the preceding year. If the increase is less than one-tenth of 1 percent, when rounded, there is no automatic increase for the current year; the increase for the next year would reflect the increase in the cost of living over a 2-year period.

Award. An administrative determination that an individual is eligible for an SSI benefit.

Blind. For purposes of the SSI program, an individual is considered to be blind if he/she has 20/200 or less vision in the better eye with the use of a correcting lens, has tunnel vision of 20 degrees or less, or met the October 1972 State definition of blindness and received benefits under the State's former program of Aid to the Blind in December 1973.

Blind Work Expenses (BWE). Any expenses incurred by a blind individual that are reasonably attributable to earning income. The BWE provision permits the exclusion of these expenses from the earned income of a blind individual. (See "Impairment-Related Work Expenses (IRWE)" for the related exclusions for disabled individuals.)

Burial Funds. A comprehensive term that for SSI purposes includes revocable burial contracts, trusts and other burial arrangements (including amounts paid on installment sales contracts for burial spaces), cash, accounts, or other financial instruments with a definite cash value clearly designated for the individual's burial expenses.

Child. A blind or disabled individual who is neither married nor the head of household and who is (1) under age 18 or (2) under the age of 22 and a student regularly attending a school, college or university, or a course of vocational or technical training designed to prepare him/her for gainful employment. A child 18 or older is subject to the adult definition of disability and is not subject to parental deeming.

Comparable Severity. The phrase in the Social Security Act that defined disability for children prior to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (Public Law 104-193). Under prior law, an individual under age 18 would have been considered disabled if he/she had an impairment of comparable severity to that required for individuals 18 or older.

Constant Dollars. Dollar amounts adjusted by the CPI to the value of the dollar in a particular year.

Consumer Price Index (CPI). An official measure of inflation in consumer prices. In this report, all references to the CPI relate to the Consumer Price Index for Urban Wage Earners and Clerical Workers (CPI-W). Historical values for the CPI-W are published by the Bureau of Labor Statistics, Department of Labor.

Continuing Disability Review (CDR). An evaluation of an individual's impairment(s) to determine whether the person is still disabled within the meaning of the law for purposes of eligibility for SSI and OASDI benefits.

Cost-of-Living Adjustment (COLA). See "Automatic Cost-of-Living Increase."

Countable Income. An individual's income less all-applicable exclusions. This amount is used to determine SSI eligibility and benefit amount.

Countable Resources. The amount of resources after all exclusions. This amount is used in determining an individual's or couple's SSI eligibility. A resource may be cash or other liquid assets or any real or personal property that an individual (or his/her spouse) owns and could convert to cash to be used for support and maintenance. SSI law stipulates what items are to be excluded from resources.

Current Dollars. Amounts expressed in nominal dollars with no adjustment for inflationary changes in the value of the dollar over time.

Current-Payment Status. Status of an SSI recipient to whom a benefit is being paid for a given month. SSI benefits for a month are usually payable on the first day of that month.

Dedicated Account. An account in a financial institution established for a disabled or blind child to contain retroactive SSI payments that exceed six times the Federal benefit rate (FBR) plus State supplementation (certain smaller retroactive payments may be placed in the account once it is established). Representative payees may only use dedicated account funds for the following allowable expenses:

- Education or job skills training;
- Personal needs assistance;
- Special equipment or housing modifications;
- Medical treatment;
- Therapy or rehabilitation; or
- Other items or services that the Commissioner deems appropriate—

provided that the expense benefits the child and, in the case of the last five items, is related to the child's impairment. Money from a dedicated account which is knowingly misapplied must be repaid. These accounts are excluded from resources and the interest earned is excluded from income.

Deeming. The process by which the income and resources of an ineligible individual are considered to be available to a recipient when determining eligibility or payment amount. Deeming applies only between:

- The living-with ineligible spouse and the eligible spouse;
- The living-with ineligible parent(s) and eligible child(ren) under age 18; and
- The immigration sponsors of some noncitizens and the noncitizen(s).

Demographic Assumptions. See "Assumptions."

Disability. For individuals aged 18 or older, the inability to engage in any substantial gainful activity (SGA) by reason of any medically determinable physical or mental impairment that can be expected to result in death or that has lasted or can be expected to last for a continuous period of at least 12 months. An individual under age 18 must have a medically determinable physical or mental impairment, which results in marked and severe functional limitations and that can be expected to result in death or that has lasted or can be expected to last for a continuous period of at least 12 months.

Disability Determination Services (DDS). Federally funded State agencies that make disability determinations for SSA.

Disaster Assistance. Assistance from Federal programs and agencies, joint Federal and State programs, State or local government programs, and private organizations (e.g., the Red Cross) provided to victims of a Presidentially declared disaster.

Disposal of Resources for Less Than Fair Market Value. Transferring resources, either liquid, real, or personal property, for less than the resources are worth.

Earned Income. For SSI purposes, wages, net earnings from self-employment, remuneration for work in a sheltered workshop, royalties on published work, and honoraria for services rendered are considered earned income. The distinction between earned and unearned income is significant because more liberal exclusions are applied to earned income.

Earned Income Exclusion. The first \$65 of a recipient's monthly earnings and one-half of the earnings in excess of \$65 are excluded in computing the SSI benefit payable.

Earned Income Tax Credit (EITC). A special tax credit that reduces the Federal tax liability of certain low-income working taxpayers. This tax credit may or may not result in a payment to the taxpayer.

Economic Assumptions. See "Assumptions."

Effective Date of Application. An application for SSI benefits is effective on the first day of the month following the date on which the application is filed, or on which the individual first becomes eligible, whichever is later.

Eligible Couple. Two persons married and living together in the same household or living together as married, both being aged, blind, or disabled and eligible for SSI.

Eligible Individual. An aged, blind or disabled person who meets all the requirements for eligibility under the SSI program, including filing an application.

Emergency Advance Payments (EAP). Special SSI payments that are available only at the time of initial application for eligible individuals who face financial emergencies and need assistance before their first benefits would otherwise be received. The amount of the EAP an individual receives is recovered from subsequent benefit payments.

Essential Person. An individual whose presence in the home of an SSI recipient who was transferred from a State assistance program to SSI in January 1974 results in an increase in the FBR of the SSI recipient. The essential person must have been (1) living in the household of the SSI recipient in December 1973 and continuously thereafter; (2) never eligible for SSI; (3) not eligible for State assistance in December 1973; and (4) taken into account when the SSI recipient's need for State assistance was determined in December 1973.

Federal Benefit Rate (FBR). The basic standard used in computing the amount of Federal SSI benefits for individuals and couples. The FBRs are increased annually to reflect increases in the cost of living. (See table IV.A2.)

Fiscal Year (FY). The accounting year of the United States Government. Since 1976, a fiscal year is the 12-month period ending September 30. For example, fiscal year 2008 began October 1, 2007 and will end September 30, 2008.

Food Stamps. The U.S. Department of Agriculture (USDA), under cooperative Federal-State agreements, issues Food Stamp Program benefits in the form of paper food coupons (commonly known as food stamps) and through electronic benefit transfer, to provide nutrition for low-income families. Food stamps can be used only to buy food at stores authorized by USDA to accept them.

General Fund of the Treasury. Funds held by the Treasury of the United States, other than receipts collected for a specific purpose (such as Social Security) and maintained in a separate account for that purpose.

Gross Domestic Product (GDP). The total dollar value of all goods and services produced by labor and property located in the United States, regardless of who supplies the labor or property.

Holding-Out Marriage. A situation in which a man and woman who are not legally married to each other are living together in the same household and holding out to the community that they are husband and wife and, as such, are treated as a couple for purposes of determining eligibility and payment amount under SSI.

Home Energy Assistance. A Federal Government block grant program that provides funds to States for energy assistance (including weatherization) to low-income households. This assistance may be provided by a variety of agencies (e.g., State or local welfare offices, community action agencies, special energy

offices, etc.) and may be known by a variety of names (e.g., Low Income Home Energy Assistance Program (LIHEAP), Project Safe, etc.).

Household. A group of two or more individuals who use a single dwelling unit as primary quarters for living and eating separate from other individuals' living units.

Household of Another. An individual is considered to be living in the household of another when the individual lives with others, does not own or rent the shelter, and does not pay a pro rata share of the household's food and shelter expenses. An individual who provides all of his/her own food, or lives in a public assistance household or in noninstitutional care, is not considered to be living in the household of another. An individual who is determined to be living in the household of another is considered to be receiving in-kind support and maintenance from that household, and his/her SSI benefit is reduced by one-third of the FBR.

Impairment-Related Work Expenses (IRWE). The provision that permits the exclusion from earnings of the costs of items and services which are needed in order for a disabled individual to work, which are paid for by the individual, and which are necessarily incurred by that individual because of a physical or mental impairment. These IRWEs are excluded from earnings when determining substantial gainful activity (SGA) or computing eligibility and ongoing SSI monthly payments. (See "Blind Work Expenses (BWE)" for the related exclusions for blind individuals.)

Income. See—"Earned Income," "In-Kind Income" and "Unearned Income."

Individual Development Account (IDA). A savings account which low-income individuals, including SSI recipients, may establish in order to save for purchasing a first home, meeting the costs of post-secondary education, or capitalizing a business. An individual's deposits into an IDA are matched by a sponsoring nonprofit organization, or State or local government participating in the program.

Ineligible Spouse. The husband or wife of an eligible individual who is not eligible for SSI benefits.

Inflation. An increase in the volume of money and credit relative to available goods, resulting in an increase in the general price level.

Infrequent or Irregular Income. Income that is received either infrequently or irregularly that can be excluded from the determination of an individual's income. "Infrequent" means that it is not received more than once in a calendar quarter from a single source and is not also received in the month immediately preceding or the month immediately following the month of receipt, regardless of whether or not these payments occur in different calendar quarters.¹ "Irregular" means that an individual could not reasonably expect to receive the income. In any given quarter up to \$30 of earned and \$60 of unearned infrequent or irregular income is excluded.

Initial Determination. A determination SSA makes about an individual's eligibility for benefits or about any other matter that gives that person a right to further administrative and/or judicial review.

In-Kind Income. Income that is not cash, but is food or shelter or something an individual can use to obtain food or shelter.

In-Kind Support and Maintenance (ISM). Unearned income in the form of food or shelter.

Interim Assistance Reimbursement (IAR). The process used for reimbursing for basic assistance provided by a State to an individual either while the individual's application for SSI was pending or during the period in which an individual's SSI benefits were suspended. SSA may reimburse a State that has provided this assistance. The individual's retroactive SSI payment is sent to the State as reimbursement if: (1)

¹ The definition of infrequent income was modified in final rules published on August 9, 2006 (71 FR 45375). Previously, infrequent income was defined as income not received more than once a quarter from a single source.

the State has an agreement with SSA to participate in IAR, (2) the individual has given SSA written authorization to have his/her retroactive payment sent to the State as reimbursement, and (3) the individual is found eligible for SSI benefits or has had his/her benefits reinstated for the same period of suspense.

Under IAR, after States reimburse themselves from an individual's retroactive benefit, they must forward any remainder to the individual within 10 days.

Living With. A required condition for parent-to-child and spouse-to-spouse deeming. Deeming of income and resources occurs if an eligible child lives with his/her ineligible parent(s) or an eligible individual lives with his/her ineligible spouse.

Maintenance-of-Effort. See "Passalong."

Mandatory State Supplementation. See "State Supplementation."

Means-Testing. The measuring of income and resources against specified amounts as eligibility factors for certain assistance benefits. SSI is a means-tested benefit program.

Medicaid. The program authorized under title XIX of the Social Security Act, which provides medical assistance to certain low-income individuals and families and certain disabled and medically needy individuals. Medicaid is administered by the States with support from the Federal Government in the form of matching grants. The Federal Government provides guidelines to the States for formulating their programs. Because these guidelines afford great leeway, Medicaid programs vary widely among the States.

Medicaid Facility. A medical treatment facility such as a hospital, extended care facility, nursing home, or intermediate care facility, where Medicaid pays more than 50 percent of the cost of a person's care.

Medical Facility. An establishment that makes available some treatment or services in addition to food and shelter to four or more persons who are not related to the proprietor.

New Recipient. An SSI recipient in the first month of SSI payment receipt.

Noncitizen. An individual who is not a United States citizen. Also referred to in welfare and immigration law as an alien. (See "Alien Lawfully Admitted for Permanent Residence," "Asylee," "Parolee" and "Refugee.")

Nonqualified Alien. A noncitizen who is not in a qualified alien category for SSI eligibility purposes.

OASDI. The Old-Age, Survivors, and Disability Insurance programs established under title II of the Social Security Act.

One-Third Reduction. The reduction of an individual's SSI payment that occurs when an individual is living in the household of another. Instead of determining the actual dollar value of in-kind support and maintenance, one-third of the Federal benefit rate is counted as additional income to an individual living in another person's household for a full calendar month and receiving both food and shelter from the household.

Optional State Supplementation. See "State Supplementation."

Overpayment. The payment of more than the amount due for any period, including any amounts of Federally-administered State supplementary payments.

Parent. For SSI purposes, the natural mother or father of the child, or the person who legally adopted the child, or the stepparent who lives in the same household as the child.

Parolee. A noncitizen who appears to be inadmissible to the inspecting USCIS officer but is allowed to enter the United States under emergency humanitarian conditions or when the noncitizen's entry is determined to be in the public interest. Parole does not constitute a formal admission to the United States and

confers temporary admission status only, requiring parolees to leave when the conditions supporting their parole cease to exist.

Passalong. A requirement that States must meet in order to be eligible for Medicaid reimbursement. Any State making supplementary payments (see “State Supplementation”) after June 30, 1977, must continue making such payments and must pass along any cost-of-living increase to the Federal benefit rate. Two methods are available to ensure that cost-of-living increases are passed on to the recipients.

- *Total Expenditures Method*—State expenditures for supplementary payments in the current calendar year must at least equal expenditures in the preceding calendar year. If expenditures are less in the current year (shortfall), the State must increase expenditures in the next calendar year by an amount at least equal to the shortfall.
- *Payment Levels Method*—States may not lower their supplementary payment for any of the living arrangement categories below their adjusted March 1983 levels. The adjusted level is the State’s March 1983 payment level minus that portion of the July 1983 increase in the Federal benefit rate that was not attributable to the increase in the cost of living (i.e., \$10.30 per individual and \$15.40 per couple).

Personal Needs Allowance. The amount allowed for an institutionalized recipient’s personal needs (currently \$30). If an SSI recipient is in a Medicaid facility, the law requires that the SSI benefit be used only for the recipient’s personal needs (i.e., that the institution cannot retain the benefit in repayment of the cost of the individual’s care).

Plan to Achieve Self-Support (PASS). A plan that permits a disabled or blind SSI recipient to set aside income (earned and/or unearned) and/or resources for a work goal. The income and resources set aside under a PASS are used to pay for goods or services needed to reach that goal, such as education, vocational training, starting a business, or purchasing work-related equipment. Income and resources set aside under a PASS are excluded from SSI income and resources. SSA must approve an individual’s PASS.

Presumptive Disability or Blindness. A finding that SSI payments may be made before SSA makes a formal determination as to whether or not the individual is disabled or blind. The individual’s impairment must be apparent and meet specified criteria. In addition, the individual must meet all other requirements for eligibility. These payments may be made for no more than 6 months. The presumptive payments will not be considered overpayments if SSA later finds that the individual is not blind or disabled.

Property Essential to Self-Support (PESS). The real and personal property used in a trade or business, nonbusiness income-producing property and property used to produce goods or services essential to the individual’s daily activities. PESS may be excluded from resources under certain conditions.

Proration of Benefits. The method of computing benefit amounts in months in which the individual reacquires eligibility after a month or more of ineligibility. In such months, an individual’s SSI benefit will be paid according to the number of days in the month that he/she is eligible, beginning with the first day in the month on which all eligibility requirements are met. In order to determine the benefit payable in a prorated month SSA counts the number of days an individual is eligible in the month. The amount of the individual’s regular monthly payment is multiplied by the number of days for which he/she is eligible for benefits. That figure is divided by the number of days in the month for which the benefit is being determined. The resulting amount is the amount due for the prorated month. Effective with claims filed August 22, 1996, proration for months of initial eligibility was eliminated.

Public Educational Institution. An institution that is operated by or controlled by the Federal Government, a State, or a political subdivision of a State such as a city or county for the primary purpose of providing educational or vocational training.

Public Emergency Shelter for the Homeless. A shelter for individuals whose homelessness poses a threat to their life or health.

Public Institution. An institution that is operated by or controlled by the Federal Government, a State, or a political subdivision of a State such as a city or county.

Publicly Operated Community Residence. A facility that provides food and shelter and some other service such as social services, help with personal living activities, training in socialization and life skills, or occasional or incidental medical or remedial care. In order to be publicly operated it must be operated or controlled by the Federal Government, a State, or a political subdivision of a State such as a city or county. The facility must serve no more than 16 residents and must be located in a community setting.

Qualified Alien. An individual who is:

- Lawfully admitted for permanent residence under the Immigration and Nationality Act (INA);
- A refugee under section 207 of the INA;
- An asylee under section 208 of the INA;
- A person whose deportation is withheld under section 243(h) of the INA as in effect prior to April 1, 1997, or whose removal has been withheld under section 241(b)(3) of the INA;
- A parolee under section 212(d)(5) of the INA for at least 1 year;
- A person granted conditional entry under section 203(a)(7) of the INA as in effect prior to April 1, 1980;
- A Cuban or Haitian entrant as defined by Federal statute, including Section 501(e) of the Refugee Education Assistance Act of 1980;
 - Former parolees and other aliens who became residents under the Cuban Adjustment Act of 1966;
 - Aliens who became permanent residents under the Nicaraguan and Central American Relief Act; or
 - Aliens who became permanent residents under the Haitian Refugee Immigration Fairness Act.
- A certain alien, or an alien parent of a child, or an alien child of a parent who:
 - Has been battered or subjected to extreme cruelty in the United States by a spouse, parent, or certain other family members the alien, parent and/or child lived with;
 - Is not living in the same household with the abusive individual;
 - Has been determined to need SSI because of this abuse; and
 - Has a determination from the USCIS for a certain change in status.

Qualifying Quarter of Earnings. Credit for a requisite amount of earnings assigned to a calendar quarter for the purpose of determining the SSI eligibility of a lawfully admitted permanent resident.

Quarter of Coverage. The crediting of coverage needed for insured status under the Social Security program. In 2008, a worker receives one quarter of coverage (up to four a year) for each \$1,050 of annual

earnings reported from employment or self-employment. The amount of earnings required for a quarter of coverage is subject to annual automatic increases in proportion to increases in average wages.

Recipient. A person who is receiving awarded SSI payments based on an evaluation of his/her own countable income and resources, age, and disability status.

Reconsideration. The first step in the administrative review process if an individual is dissatisfied with SSA's initial determination.

Redetermination. A periodic review of eligibility for SSI recipients to assure that requirements for eligibility continue to be met and that payment levels are in the proper amount. Income, resources, living arrangements and other factors are reviewed. The redetermination process does not review the determination of disability.

Refugee. A noncitizen outside of his/her country of nationality who is unable or unwilling to return to his/her country of nationality or to seek the protection of that country because of persecution (or a well-founded fear of persecution) based on the noncitizen's race, religion, nationality, membership in a particular social group or political opinion. Unlike asylees, refugees apply for and receive this status prior to entry into the United States.

Relocation Assistance. A type of assistance provided to persons displaced by projects that acquire real property. Examples of types of reimbursement, allowances, and help provided are:

- Moving expenses;
- Reimbursement for losses of tangible property;
- Displacement allowances;
- Amounts required to replace a dwelling which exceed the agency's acquisition cost for the prior dwelling;
- Rental expenses for displaced tenants;
- Amounts for down payments on replacement housing for tenants who decide to buy;
- Mortgage insurance through Federal programs with waiver of requirements that borrowers must usually meet; and
- Replacement housing.

Representative Payee. A person who receives SSI payments on behalf of an SSI recipient. SSA will pay benefits to a representative payee on behalf of an individual 18 years old or older when it appears that such method of payment will be in the interest of the individual. A representative payee will be appointed if the individual is legally incompetent or mentally or physically incapable of managing or directing the management of his/her benefits. Also, in general, if the individual is under the age of 18, a representative payee will be appointed. The law and regulations require that every beneficiary under age 15 must have a representative payee.

Resident of a Public Institution. An individual who can receive substantially all of his/her food and shelter while living in a public institution is considered a resident of the public institution. Generally, an individual who is a resident of a public institution throughout a month is ineligible for SSI.

Resident of the United States. A person who has established an actual dwelling place within the geographical limits of the United States with the intent to continue to live in the United States. (See "United States.")

Resource. The cash or other liquid assets or any real or personal property of an individual (or his/her spouse, if any) that he/she could use or could convert to cash to be used for his/her support and maintenance.

Retroactive Payments. The SSI payments made in a month later than the month or months in which they were due. Also referred to as “past-due” benefits.

Retrospective Monthly Accounting (RMA). The calculation method used in the SSI program to determine an individual’s eligibility for each month. RMA has two parts: an eligibility determination and a payment computation. If the individual is ineligible based on the current month’s factors (including the current month’s countable income), no payment is due and none is paid. If the individual is eligible based on the current month’s factors, payment is computed. The benefit for a month is generally based on the countable income from the second month before the current month. The basic formula is to subtract the countable income from 2 months previous from the current month’s Federal benefit rate.

Section 1619(a) Status. The special SSI cash benefits provided to disabled individuals who lose eligibility for SSI benefits under the regular rules because they have earnings at the level that is ordinarily considered to represent substantial gainful activity.

Section 1619(b) Status. The special SSI recipient status for Medicaid purposes provided to working disabled or blind individuals when their earnings make them ineligible for regular or special cash payments.

Social Security Area Population. The population comprised of (i) residents of the 50 States and the District of Columbia (adjusted for net census undercount); (ii) civilian residents of Puerto Rico, the Virgin Islands, Guam, American Samoa and the Northern Mariana Islands; (iii) Federal civilian employees and persons in the Armed Forces abroad and their dependents; (iv) crew members of merchant vessels; and (v) all other U.S. citizens abroad.

Sponsor. An individual who has signed an affidavit of support for a noncitizen entering the country.

State Supplementation. The payments made by a State or one of its political subdivisions to aged, blind, or disabled individuals.

- *Administration*—The governmental unit responsible for administering State supplementary payments may be either a State or local agency or SSA. Under State administration, the State must absorb both program benefits and administrative costs. Under Federal administration, the State is responsible for the program benefits and, as of January 1, 2008, pays a \$9.95 administrative fee for each benefit paid.
- *Mandatory Supplementation*—The supplementary payments that are made only to beneficiaries who were converted to the SSI program from former State assistance programs at the inception of the SSI program. Mandatory minimum State supplementary payments are required to maintain the December 1972 payment levels that these beneficiaries received under the former State assistance programs. States are required to provide the supplementation to maintain their Federal matching funds for Medicaid.
- *Optional Supplementation*—The payments made by States to help persons meet needs not fully covered by Federal SSI benefits. The State determines whether it will make a payment, to whom, and in what amount. These supplements, paid on a regular basis, are intended to cover such items as food, shelter, clothing, utilities, and other daily necessities. Some States provide optional supplementary payments to all persons eligible for SSI benefits, while others may limit them to certain SSI recipients such as the blind or residents of domiciliary-care facilities, or they may extend payments to persons ineligible for SSI because of SSI income.

Statutory Blindness. See “Blind.”

Student. An individual who is regularly attending a school, college or university, or a course of vocational or technical training designed to prepare him/her for gainful employment.

Student Earned Income Exclusion (SEIE). An earned income exclusion for a student under age 22 with certain limitations established by regulations. For 2008, up to \$1,550 earned income in a month, but no more than \$6,240 per year, may be excluded.

Substantial Gainful Activity (SGA). The level of work activity used to establish disability. A finding of disability requires that a person be unable to engage in SGA. For 2008, a person who is not statutorily blind and is earning more than \$940 a month (net of impairment-related work expenses) is ordinarily considered to be engaging in substantial gainful activity.

Supplemental Security Record (SSR). The computerized database maintained by SSA and containing identifying information, income, resources and other eligibility factors, for all SSI recipients. The SSR includes the history of SSI payments made to an individual.

Suspension. An ineligibility status which causes the nonpayment of benefits for a period of anywhere from 1 to 12 months for any of a number of reasons such as income or resources over allowable levels, absence from the United States, residence in a public institution, etc. Benefits can resume without reapplication, when all requirements for entitlement are again met. Suspense that lasts more than 12 months (24 months for individuals who were made ineligible because of their spouses or parent being called to active military duty) results in a termination of the SSI record. (Once a record is terminated, reapplication is necessary.)

TANF. See “Temporary Assistance for Needy Families (TANF).”

Temporary Absence. An individual’s physical move from his/her permanent place of residence that does not constitute a change in living arrangement. In general, a temporary absence is an absence from a permanent residence which is not intended to, and does not, exceed a full calendar month.

Temporary Assistance for Needy Families (TANF). The State grant program of assistance for needy families established by the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (Public Law 104-193). TANF replaced the Aid to Families with Dependent Children program.

Termination. For an individual, cessation of benefits, which can occur for a number of reasons, including death, medical improvement, or a period of suspension lasting longer than 12 months.

Terminations. As used in section IV, the net reduction (after accounting for new entrants) in the number of SSI recipients in current-payment status during a period.

Ticket to Work Program. The Ticket to Work and Work Incentives Improvement Act of 1999 established a voluntary Ticket to Work and Self-Sufficiency program (Ticket to Work program) under which a blind or disabled beneficiary may obtain vocational rehabilitation (VR), employment and other support services from a qualified private or public provider referred to as an “employment network,” or from a State VR agency.

Trusts. A legal arrangement involving property and ownership interests. Generally, property held in a trust will be considered a resource for SSI purposes if the assets of the trust could be used for the benefit of the individual or spouse.

Unearned Income. The income that is not earned income. Unearned income may be in cash or in-kind. Some examples of unearned income are:

- Annuities, pensions, and other periodic payments;
- Retirement and disability benefits;
- Veterans’, workers’ and unemployment compensation;

- Alimony and support payments;
- Dividends, interest and certain royalties; and
- Rents.

United States. For purposes of the SSI program, the United States consists of the 50 States, District of Columbia and the Northern Mariana Islands.

Vocational Rehabilitation (VR). The process of restoring individuals with disabilities to full capabilities. VR services are designed to provide an individual with the training or other services that are needed to return to work, begin working or to enter a new line of work.

Windfall Offset. A provision to prevent a person from receiving monthly SSI and OASDI benefits in excess of the total amount which would have been paid if the OASDI benefits had been paid when they were due rather than retroactively.

Work Incentives. Provisions in the SSI program that are intended to act as incentives for disabled or blind individuals to work. Examples of work incentives under the SSI program are:

- Earned income exclusions;
- Impairment related work expenses;
- Blind work expenses;
- PASS;
- Section 1619 benefits; and
- Ticket to Work program.

SOCIAL SECURITY ADVISORY BOARD

STATEMENT ON THE SUPPLEMENTAL SECURITY INCOME PROGRAM

Public Law 104-193 requires that members of the Social Security Advisory Board be given an opportunity, either individually or jointly, to include their views in the Social Security Administration's annual report to the President and the Congress on the Supplemental Security Income (SSI) program.

We appreciate the opportunity to present our views on this important program, and we have asked the Social Security Administration (SSA) to include in this year's annual report the following statement of views, which focuses on the need for a review of benefit levels, asset limits, and income exclusions.

The need to re-examine the SSI program

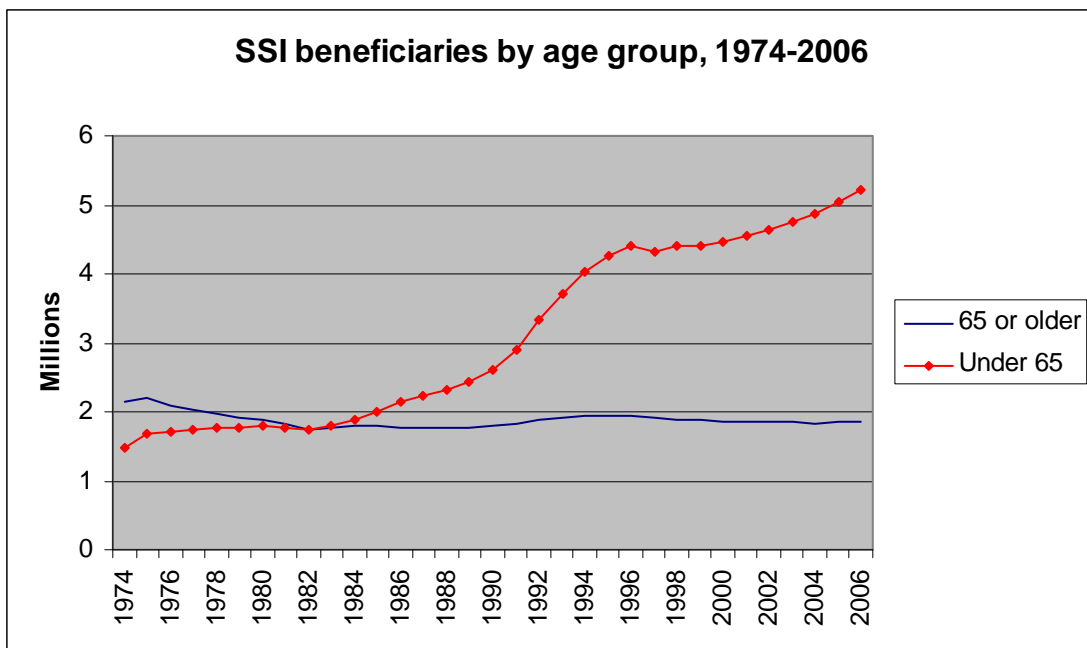
The Supplemental Security Income (SSI) program was enacted in 1972 and began paying benefits in 1974. It replaced federal-state programs of Old-Age Assistance, Aid to the Blind, and Aid to the Permanently and Totally Disabled. Since that time, the program has changed in ways that were not anticipated by Congress in 1972. Other programs have been enacted or amended that impact the same population. At the same time, some aspects of the SSI program have not changed over the years. After more than 35 years, it is time for the Congress to consider re-examining the SSI program. Congress should consider what it wants to accomplish with the SSI program, looking specifically at what an SSI check buys now and what Congress intends that it should buy. We recommend this review of the SSI program with due regard for budgetary concerns and the administrative complexity of the program. At a minimum, any changes to the program should avoid adding to that complexity; if possible, they should reduce it.

The Social Security Advisory Board has begun a review of several aspects of the SSI program. In this statement, we discuss three specific aspects of the program that we think should receive a fresh look as part of a comprehensive legislative review:

- benefit levels in households with more than one SSI beneficiary;
- benefit levels for disabled beneficiaries; and
- asset limits and excluded amounts of income.

When the Congress established the SSI program, it saw it as primarily a program for the aged, as they were the largest part of the federal-state programs it replaced. Estimates provided by the Administration indicated that, while the number of disabled SSI beneficiaries would grow, the number of aged beneficiaries would grow even more

rapidly.¹ At that time, the attention of the Congress was focused on President Nixon’s proposal for a Family Assistance Program, a federally guaranteed minimum income for all families with dependent children. The proposed SSI program was overshadowed by this proposal and received relatively little attention. The report of the Ways and Means Committee stated that the federal-state assistance programs that SSI replaced, “characterized as they are by smaller numbers of people, smaller budgets and more nearly static beneficiary rolls” were easier to deal with.² As this chart shows, those estimates and expectations were not accurate. The number of disabled beneficiaries has grown rapidly, while the number of aged beneficiaries has been fairly stable. By 1982 the number of beneficiaries under age 65 equaled the number of those 65 and older. Now there are nearly three times as many beneficiaries under 65 than 65 or older.



The 1972 legislation set initial benefit levels for the new program at \$130 per month for an individual. At the end of 1971, \$130 was approximately the average monthly benefit for a retired worker under the Social Security retirement benefits program.³ The SSI benefit amount for a couple was set at \$195, one-and-a-half times the individual amount. Setting the couple rate at one-and-a-half times the individual rate carried over into the

¹ “The Supplemental Security Income Program: Report of the Staff to the Committee on Finance, United States Senate,” Committee Print, April, 1977, p. 117.

² Report of the Committee on Ways and Means, May 26, 1971, p. 146.

³ *Social Security Bulletin, Annual Statistical Supplement, 1976*, Table 82. In 1972, Congress also raised Social Security retirement benefits by 20 percent and indexed them to the cost of living. In July 1973, Congress raised the SSI benefit amount to \$140 for an individual, \$210 for a couple. In December 1973, it raised the SSI benefit amount to \$146 for an individual, \$219 for a couple, effective July 1974. In August 1974 it established legislation to automatically increase SSI benefits by the same percentage and at the same time as Social Security retirement, survivors, and disability benefits.

new SSI program the practice of the programs it replaced. Payment levels varied widely from state to state in the federal-state programs that SSI replaced, but only a few states paid couples at twice the rate of an individual. The typical state payment for a couple was one-and-a-half times the individual payment.⁴

Setting benefit rates for households with more than one beneficiary

We agree with the principle stated by the Ways and Means Committee when it considered the SSI legislation: “The benefit payable to a couple is smaller than the combined benefits payable to two individuals in order to take account of the fact that two people living together can live more economically than if each lived alone.”⁵ The question is, how much more economically. In 1972, the Congress exercised its judgment in carrying over the practice of paying a couple at one-and-a-half times the individual rate. There are tools available now that were not available to the Congress then that would enable it to set benefit rates based on actual data rather than past practice.

Since the early days of the SSI program, much research has been done on the needs of low-income individuals and families. In 1995 the National Research Council (NRC) issued a report by its Panel on Poverty and Family Assistance, *Measuring Poverty: A New Approach*. The panel looked first at what the appropriate measure of poverty should be for an individual. Once the individual threshold was established, the next challenge was to develop measures for households. It would not be appropriate simply to multiply the individual measure by the number of individuals in a household. A two-member family, for example, needs less than twice as much income as a single individual because of economies of scale, such as shared housing expenses and utilities. The needs of a household grow with each additional member, but not in direct proportion to the number of people in the household.

What the panel did was develop what is known as an equivalence scale. An equivalence scale indicates how much more money a household of a given size needs, compared to a single individual, in order to have the same standard of living as a single individual. The panel recommended an equivalence scale to adjust family poverty thresholds to represent equivalent amounts of money for different family types. A similar approach could be used in setting SSI benefits.

The concept of equivalence scales applies to households of all sizes and compositions, and the Congress should consider applying equivalence scales to all households. Currently, the reduced SSI couple benefit applies only to households with two SSI beneficiaries who are legally married or consider themselves married and hold themselves out to the community as married. Thus, two single adult SSI beneficiaries

⁴ “Social Security and Welfare Reform: Summary of the Principal Provisions of H.R. 1 as Determined by the Committee on Finance,” June 13, 1972, pp. 58-59.

⁵ Report of the Committee on Ways and Means, May 26, 1971, p. 150.

who live together are each eligible for a full individual benefit, while each member of a married couple is eligible for three-fourths of the full benefit amount.

The way the SSI program currently treats married couples gives beneficiaries an incentive not to marry and gives married couples an incentive to dissolve their marriages. The extent to which this incentive is a factor in marriage or dissolution rates is an empirical question not addressed in this statement. We note that marriage is, in fact, less common among SSI beneficiaries than among the general population. Among SSI beneficiaries age 18 to 64, 21 percent are married, compared to 58 percent of the total U.S. population in that age group. Among SSI beneficiaries age 65 or older, 32 percent are married, compared to 55 percent of the total U.S. population in that age group.⁶

Married couples make up only about 30 percent of households that include more than one SSI recipient.⁷ Thus, most multi-recipient households are not subject to the same benefit reductions as married couples. As a witness told a Ways and Means subcommittee in 2001, “Economies of scale...apply to almost all sharing arrangements—dormitories, retirement homes, cohabitation, and so on. Yet marital vows of allegiance are the only type of arrangement that is taxed.”⁸ The Congress should consider applying equivalence scales to households without respect to marital status.

Setting benefit amounts for households with a disabled beneficiary

Another issue of special importance to the SSI program is the additional household costs caused by the disability of a beneficiary. In 2004, the Office of Management and Budget requested the NRC’s Committee on National Statistics to convene a workshop to obtain feedback on alternative measures of poverty.⁹ One of the papers presented at that workshop raised just that issue of particular importance to the SSI program. David M. Betson asked if other factors besides the numbers of adults and children should be taken into consideration. He suggested that whether a member of the family has a disability might be a relevant consideration.¹⁰

Additional research on the question of the extra costs of disability has been conducted in the United Kingdom, and some has been conducted in other countries.¹¹ A recent article

⁶ Office of Policy, SSA, “Treatment of Married Couples in the SSI Program,” Issue Paper, December 2003, p. 3.

⁷ *Ibid.*, p. 4.

⁸ Eugene Steuerle, Testimony before the Subcommittee on Human Resources of the House Committee on Ways and Means, Hearing on Welfare and Marriage Issues, May 22, 2001.

⁹ National Research Council, *Experimental Poverty Measures: Summary of a Workshop*, 2005.

¹⁰ “Poverty Equivalence Scales: Adjustment for Demographic Differences Across Families,” www7.nationalacademies.org/cnstat/Poverty_Equivalence_Scales_Betson_Paper_PDF.pdf

¹¹ Research in the United Kingdom is summarized in Mike Tibble, “Review of Existing Research on the Extra Costs of Disability,” Department for Work and Pensions Working Paper number 21, <http://www.dwp.gov.uk/asd/asd5/WP21.pdf>. Other research is summarized in Sophie Mitra, “Disability and Social Safety Nets in Developing Countries,” The World Bank Social Protection Discussion Paper

reports on research in the United States on the relationship of disability to material hardship, defined in terms of ability to meet expenses, ability to pay rent or mortgage and utility bills, ability to obtain needed medical or dental care, and food security. The research found that working-age people with disabilities have greater basic needs than people without disabilities.¹² It found that:

- People with work limitations experience material hardships at a higher rate than those without limitations.
- Disability is an important determinant of material hardship, even after controlling for income and other sociodemographic characteristics and receipt of public assistance.¹³

Other recent research in the United States focuses specifically on the additional health costs associated with living with a disability.¹⁴ It shows that in the period 1996-2004, persons with disabilities had substantially higher total health expenditures and out-of-pocket health expenditures than the non-disabled. The authors go on to state that further research is needed to estimate the extent to which those expenditures lead to poverty and to assess the adequacy of SSI and other benefits. They mention that in some countries, such as the United Kingdom and Sweden, separate programs provide additional allowances for disability related costs.

Further research on this important issue is needed to enable Congress to set appropriate benefit rates that would reflect additional household needs. This issue has complex policy implications. The original concept of SSI was to ensure a specified minimum income, regardless of individual expenditures or needs. Implementing rates that vary based on disability would make the program more complicated and more difficult to administer, and this may best be done outside the SSI program. However, it is important to take the first step of doing the research on household needs and then examine potential options to meet those needs.

Frozen income and resource limits

The purpose of the SSI program was to ensure a minimum income for eligible beneficiaries. The program established a federal benefit rate, and states may add supplemental payments. The federal payments are calculated by subtracting from the federal benefit rate any countable income.¹⁵ There are two basic exclusions of income

Series, number 0509, <http://siteresources.worldbank.org/DISABILITY/Resources/280658-1172608763375/DisabilitySSNMitra.pdf>.

¹² Peiyun She and Gina A. Livermore, "Material Hardship, Poverty, and Disability among Working-Age Adults," *Social Science Quarterly*, December 2007, p. 971.

¹³ *Ibid.*, p. 986.

¹⁴ Sophie Mitra and Usha Sambamoorthi, "The Extra Health Costs of Living with a Disability: Evidence from the Medical Expenditure Panel Survey, 1996-2004," June 2007.

¹⁵ To allow time to adjust benefits, they are calculated using income from two months prior to the month for which the benefit is paid. Benefits were originally calculated on a quarterly basis; the change to monthly computation was enacted in 1981. In addition to the exclusions mentioned in this paragraph, there

that make income not countable for purposes of calculating the benefit. Under the general income exclusion, the first \$20 per month of any income does not count against the monthly benefit. Under the earned income exclusion, the first \$65 of earnings in a month and half of the amount above \$65 does not count against the monthly benefit. These amounts were in the original legislation 35 years ago and have never been increased. If they had been indexed to inflation since the program began, the general exclusion would now be approximately \$87 and the earned income exclusion would be approximately \$284. If they had been indexed to reflect the increase in wages, using the Average Wage Index that Social Security uses in calculating initial retirement and disability insurance benefits, the general exclusion would now be about \$105, and the earned income exclusion would now be about \$342.¹⁶

There is also an asset limit for SSI beneficiaries. When the program began, beneficiaries had to have \$1,500 or less in countable resources (\$2,250 for a couple). That amount was increased gradually between 1985 and 1989 to \$2,000 for an individual and \$3,000 for a couple. The asset limit has not changed since that time. The conference report on the legislation for that increase stated that a major purpose of allowing SSI beneficiaries to have a certain amount of assets was to help them cover major costs of an urgent nature that could not be met from their monthly benefit payments, such as to replace a furnace or another essential appliance. The costs of such items have increased considerably since 1989, and Congress should consider what an appropriate amount would be now. If the 1989 amounts had been adjusted for inflation, they would now be about \$3,500 for an individual and \$5,250 for a couple. If they had been adjusted by the Average Wage Index, they would now be about \$4,200 for an individual and \$6,300 for a couple. We recognize the need to be aware of the costs and impacts of updating the resource limits. If Congress decides that an increase in the asset limits is appropriate, it could be done gradually, as was done in the 1980s.

Conclusion

It is time for Congress to consider reviewing some aspects of the SSI program. More than 35 years after its enactment, the program is operating in a world that has changed, and with a beneficiary population that is much different. New analytical tools and data are available that were not available 35 years ago and could be useful to a review of the program.

are other special exclusions for items such as tax rebates based on real property or food purchase taxes and scholarships used to pay tuition at an educational institution. A complete list can be found in Appendix A of the *2008 SSI Annual Report*.

¹⁶ Wage indexed amounts were calculated from historical data at <http://www.ssa.gov/OACT/COLA/awiseries.html> and from projections using the intermediate assumption in the 2008 Annual Report of the Board of Trustees of the Federal Old-Age and Survivors Insurance and Federal Disability Insurance Trust Funds, available at <http://www.ssa.gov/OACT/TR/TR08/index.html>, Table VI.F6.

Our specific recommendations are, as part of a comprehensive legislative review of the SSI program:

- The Congress should consider how equivalence scales could be applied to the SSI benefit structure. Those scales should be applied to households regardless of the marital status of the members of the households.
- Research should be conducted to develop equivalence scales that would reflect the additional needs of beneficiaries with disabilities.
- Income exclusions and asset limits should be re-examined to ensure that they still serve the purposes for which they were developed.

Sylvester J. Schieber
Chairman

Dana K. Bilyeu Jeffrey R. Brown Dorcas R. Hardy
Marsha Rose Katz Barbara B. Kennelly Mark J. Warshawsky