May 20, 2021

The Honorable Charles Schumer  The Honorable Nancy Pelosi
Majority Leader  Speaker
United States Senate  United States House of Representatives
Washington, DC 20510  Washington, DC 20515

The Honorable Mitch McConnell  The Honorable Kevin McCarthy
Minority Leader  Minority Leader
United States Senate  United States House of Representatives
Washington, DC 20510  Washington, DC 20515

Dear Leader Schumer, Speaker Pelosi, Leader McConnell, and Leader McCarthy:

The undersigned members of the Consortium for Citizens with Disabilities (CCD) and allies write to express our strong support for including long-overdue improvements to the Supplemental Security Income (SSI) program in the pandemic recovery legislation now being considered. CCD is the largest coalition of national organizations working together to advocate for federal public policy that ensures the self-determination, independence, empowerment, integration and inclusion of children and adults with disabilities in all aspects of society.

Supplemental Security Income (SSI) provides critical income assistance to 8 million very low-income people with disabilities and older adults. The maximum SSI benefit for 2021 is just $794 per month, well below the federal poverty line, but even this extremely modest benefit helps people with disabilities and seniors to maintain housing, purchase food, and meet other basic needs. SSI is a majority-minority program and provides vitally important income support to Black and other people of color with disabilities, including those who are dually eligible for Social Security Disability Insurance (SSDI) and SSI.

Unfortunately, as President Biden recognized in his campaign platform, SSI has been left to wither on the vine for more than 30 years, and an array of outdated program rules mean that SSI no longer provides the basic economic security that it once did. We strongly support inclusion of President

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Biden’s campaign commitments on SSI, as well as other important updates, in the upcoming relief legislation, to bring this critically important but long-forgotten component of the safety net into the 21st century:

1. Increase the minimum benefit to at least the federal poverty level.

Currently, SSI benefits are a maximum of $794 per month, and the average benefit in March 2021 was only $586 per month. By comparison, the federal poverty level for an individual is $1,073 per month. No one can live on $794 per month, and increasing the SSI benefit to the federal poverty level would dramatically reduce poverty and hardship for the 8 million people currently relying on SSI benefits, ensuring that people with disabilities and older adults are better able to meet their basic needs.

2. Increase and index resource limits.

The resource or asset limits for SSI are not indexed to inflation and have not been updated since 1989. Currently, single individuals can only have $2,000 in assets and married couples are only allowed $3,000. These woefully outdated levels penalize savings and prevent recipients from having even a modest rainy day fund for emergencies--much less saving for the future--further entrenching poverty among people with disabilities and older adults. At a minimum, these outdated limits must be increased to reflect modern costs and indexed for inflation moving forward--if not outright eliminated.

3. Eliminate marriage penalties.

SSI benefits for married couples are cut by a quarter. People on SSI also risk losing their benefits if they marry someone not on SSI, trapping people with disabilities in poverty, and putting marriage equality out of reach. And as mentioned above, married couples face an even lower asset limit than twice that of single individuals. These marriage penalties should be eliminated so that beneficiaries are not forced to choose between maintaining survival benefits and marrying the person they love.

4. Eliminate archaic rules about “in-kind support” from friends and family.

An archaic, stringent rule called “In-Kind Support and Maintenance,” or ISM, penalizes SSI beneficiaries if they receive help from loved ones for basics like groceries or a place to stay so they have a roof over their heads. Receipt of such in-kind supports triggers up to a one-third reduction in already meager benefits, driving beneficiaries even deeper into poverty. These rules are extraordinarily complicated for SSA to administer and the agency has proposed under leadership by Democratic- and Republican-appointed Commissioners to eliminate these archaic rules to simplify the SSI program’s administration. The current statutory requirements should be eliminated.

5. Update outdated income disregards

The income rules for SSI beneficiaries have never been updated since the SSI program was established in 1974. Program rules distinguish between earned and unearned income, but because the disregards have been stuck at $20 (unearned) and $65 (earned) for nearly 50 years, they have lost virtually all of their value due to inflation, pushing people with disabilities and the lowest income seniors even deeper into poverty. It is long past time to update SSI’s income disregards for inflation. This is especially important
for the millions of very low-income Social Security beneficiaries who also receive SSI, as Social Security benefits are considered unearned income.

As President Biden committed during the campaign, disabled people and seniors should not live in poverty in America. These important and long-overdue reforms are urgently needed to ensure that the 8 million people who currently rely on SSI benefits—as well as COVID long-haulers who will turn to SSI for critical income support in the months and years ahead—are able to live in dignity. We stand ready to help you make these long-overdue improvements a reality as we all work together to “build back better.”

For more information or to arrange a meeting on this important issue, please contact Bethany Lilly (lilly@TheArc.org).

Sincerely,

2-1-1 HUMBOLDT INFORMATION AND RESOURCE CENTER
Alliance for Retired Americans
American Academy of Pediatrics
American Association for Psychoanalysis in Clinical Social Work
American Association on Health and Disability
American Foundation for Suicide Prevention
American Therapeutic Recreation Association
Anxiety and Depression Association of America
Association of People Supporting Employment First (APSE)
Autism Society of America
Autistic Self Advocacy Network
Bay Area Community Services
CA Council of the Blind
California Alliance for Retired Americans
California Association of Food Banks
California Council of the Blind
CAP OC/ Orange County Food Bank
Caring Across Generations
Center for American Progress
Center for Elder Law & Justice
Center for Law and Social Policy (CLASP)
Charlotte Center for Legal Advocacy
Christopher & Dana Reeve Foundation
Coalition on Human Needs
Communities Actively Living Independent & Free
Community Legal Aid Society, Inc. (Delaware)
Community Legal Services of Philadelphia
Cure SMA
Disability Law Center of Alaska
Disability Rights New Jersey
Easterseals
Epilepsy Foundation
Family Voices
Global Alliance for Behavioral Health & Social Justice
Greater Hartford Legal Aid
International OCD Foundation
Justice in Aging
Lakeshore Foundation
Law Foundation of Silicon Valley
Legal Aid Society of the District of Columbia
Legal Council for Health Justice
Medicare Rights Center
National Alliance on Mental Illness
National Alliance to End Homelessness
National Association for Rural Mental Health
National Association of Councils on Developmental Disabilities
National Association of County Behavioral Health & Developmental Disabilities Directors
National Association of Disability Representatives
National Association of Social Workers (NASW)
National Center for Law and Economic Justice
National Committee to Preserve Social Security and Medicare
National Council on Aging
National Council on Independent Living
National Disability Institute
National Disability Rights Network (NDRN)
National Down Syndrome Congress
National Federation of Families
National Health Law Program
National Multiple Sclerosis Society
National Organization of Social Security Claimants’ Representatives (NOSSCR)
National Women’s Law Center
Network of Jewish Human Service Agencies
New Hampshire Legal Assistance
New Haven Legal Assistance Association
Northwest Health Law Advocates
Paralyzed Veterans of America
Project AIR
Psychotherapy Action Network Advocacy
Public Justice Center
Resources for Independence, Central Valley
RI International, Inc.
San Francisco Senior & Disability Action
SMART Recovery
Social Security Works
Southwest Women's Law Center
Special Needs Alliance
Spina Bifida Association
TASH
Tenderloin People's Congress
The Arc of the United States
The National Alliance to Advance Adolescent Health
United Spinal Association
United States International Council on Disabilities
VetsFirst, a program of United Spinal Association
Virginia Poverty Law Center
Women's Institute for a Secure Retirement
World Institute on Disability