



**CONSORTIUM FOR CITIZENS  
WITH DISABILITIES**

**PRESERVE SUPPLEMENTAL SECURITY INCOME:  
A VITAL PART OF OUR SOCIAL SECURITY SYSTEM**

As part of our nation's Social Security system, Supplemental Security Income (SSI) was enacted in 1972 to reduce poverty by providing a basic living standard for extremely low-income seniors and people with disabilities. Today, SSI provides essential income to about 8.2 million people across the U.S., including 2.2 million seniors and 6 million children and adults with some of the most severe impairments and illnesses. One in 3 SSI recipients also receives Social Security old-age, disability, or survivor's benefits.

***The CCD Social Security Task Force urges Congress to reject any proposals to cut SSI, including proposals to cut benefits or eligibility or to alter SSI's basic structure.***

**SSI Provides Modest but Essential Benefits**

SSI benefits are modest, averaging only about \$540 per month, or just **\$18 per day**. SSI is the only personal income for approximately 3 in 5 recipients.

**SSI Reduces Poverty**

SSI plays a vital role in reducing poverty, particularly deep poverty. Nearly 2 in 3 SSI recipients live in families with incomes at or below 150 percent of the federal poverty level – but without SSI, **over 9 in 10** would. Research has found that when a child becomes eligible for SSI, household poverty falls by 11 percent, on average. SSI lifted over 4.2 million people out of deep poverty in 2012.

**SSI Improves Health**

Most states find SSI recipients categorically eligible for Medicaid, helping recipients to access medical care to maintain or improve health, and prevent worsening of medical conditions. SSI benefits also help recipients secure nutritious food, travel to medical appointments, and pay for out-of-pocket medical expenses.

**SSI Reduces Homelessness and Institutionalization**

SSI provides a reliable stream of monthly income that helps people with disabilities live in the community, using SSI to pay for rent, utilities, and other basic household costs. Most landlords reject applicants who lack a regular monthly income, making SSI a key for recipients who are homeless to secure a lease. Without SSI, many recipients would face homelessness or be forced into institutions – a harmful, costly, and unthinkable return to segregation that would undo decades of progress in inclusion for people with disabilities.

**SSI Helps Families Raise Children with Disabilities and Improves Outcomes**

SSI's modest financial support helps low-income families offset some of the often-extraordinary costs of raising a child with a disability, such as meeting the child's basic needs

for food, clothing, and shelter; paying for special therapies, specially trained child-care workers, medically prescribed diets, diapers for older children, adaptive equipment, and transportation to doctors and specialists – many of which are not covered or are inadequately covered by insurance or have high copays; and losing income when a parent must take time off to take the child to medical appointments or reduce work hours to care for the child.

Families raising children with disabilities are more than twice as likely as other families with children to face material hardships such as homelessness, food insecurity, and utility shutoff. SSI is cost-effective, allowing families to care for children with disabilities in their own homes instead of in harmful, costly institutions. SSI benefits also help families maximize a child's opportunity to achieve an independent, rewarding, productive life including work in adulthood.

### **SSI Provides Important Opportunities for Work**

SSI offers many important work incentives to provide recipients with opportunities to work without fear of loss of SSI or Medicaid. The CCD Social Security Task Force believes every effort should be made to increase employment opportunities and outcomes for SSI recipients, and has numerous recommendations for strengthening SSI work incentives.

### **SSI Eligibility is Highly Targeted**

Across the U.S., approximately 37 million children and non-elderly adults have a disability, but only 6 million receive SSI on the basis of a disability. To qualify for SSI on the basis of a disability, applicants must meet the Social Security Act's strict disability standard – which the Organisation for Economic Co-operation and Development (OECD) describes as one of "...the most stringent eligibility criteria..." among OECD member nations.

Eligible individuals must have extremely low incomes; in 2018, the SSI maximum federal payment is \$750 per month for an individual or \$1,125 for a couple. Furthermore, eligible individuals remain subject to asset limits set in the 1980s, which cap their savings at no more than \$2,000 for an individual or \$3,000 for a couple, total.

Most SSI applicants are denied: only about one-third are awarded benefits, even after all stages of appeal. SSI recipients have severe impairments and conditions such as cancers, kidney failure, congestive heart failure, intellectual disability, and multiple sclerosis. Many are terminally ill, and approximately 250,000 have died each year, in recent years.

### **The Social Security Administration (SSA) Must be Fully Funded to Operate SSI**

Since 2010, SSA's operating budget has shrunk by 11 percent while workloads have risen. As a result, customer service has been eroded across the agency, including in key areas for SSI. Today, over 1 million people are waiting an average of over 590 days for a hearing before an SSA Administrative Law Judge, including many awaiting a hearing on an SSI application. These historic waits lead to extreme hardship: while awaiting a hearing, many struggle to pay rent or meet basic needs. Some lose their homes or go into bankruptcy, and in 2017 approximately 10,000 people died while waiting for a hearing. Congress must fully fund SSA's operating budget to ensure timely, accurate disability determinations and humane, high-quality customer service, including for SSI applicants and recipients.

*Prepared by the CCD Social Security Task Force, January, 2018. For more information, contact T.J. Sutcliffe, The Arc, [sutcliffe@thearc.org](mailto:sutcliffe@thearc.org) and Tracey Gronniger, Justice in Aging, [tgronniger@justiceinaging.org](mailto:tgronniger@justiceinaging.org).*