

III.B. SOCIAL SECURITY

SOCIAL SECURITY ADMINISTRATION

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Hours: Monday - Friday / 8:30 am - 3:30 pm

Fees: No fees charged

Intake Procedure: Contact by phone

There are two programs for the disabled that are administered by the Social Security Administration.

- (1) Supplemental Security Income (SSI); and
- (2) Social Security Disability (SSD).

Every patient with a diagnosis of HIV/AIDS may be eligible for one program or the other or both. These programs have two main criteria that are assessed to determine your eligibility. For

SSI, they assess your medical condition and your current financial situation (monthly income, assets, etc.). For SSD, they assess your medical condition and review your employment history to see how much and how long you have paid into Social Security (FICA on wage stub) through your employment.

Both SSI and SSD use the same medical criteria to determine whether or not you are disabled. "Disability" is defined as any medical condition (physical or mental) which prevents or is expected to prevent you from working for a minimum of 12 months. People who have a Centers for Disease Control (CDC) diagnosis of AIDS (KS, PCP, etc.) may be eligible for "Presumptive Disability" for a period of up to six months while awaiting a final medical decision, thereby meeting the medical criteria for both SSI and SSD. People who have an AIDS-related diagnosis are evaluated on a case-by-case basis but are not automatically presumed disabled. Following is a more complete outline of both of these programs to help you determine your eligibility and prepare you for applying to these programs.

SOCIAL SECURITY DISABILITY (SSA)

WHO IS ELIGIBLE?

In order to qualify for SSD benefits, you must be determined disabled and you must have paid into the Social Security system through your employers five (5) of the last ten (10) years. This means you must have worked in a job or jobs where Social Security taxes (FICA) were withheld from your paycheck.

WHEN SHOULD I APPLY?

An individual should apply for benefits as soon as they become disabled. SSD benefits become payable on the sixth month after onset of disability. What this actually means is that

if you are determined disabled during the five (5) months after you stop working due to the onset of your disability, you will not receive any payments (you may be eligible for SSI).

Exceptions: If you have been disabled for five (5) months or longer, before applying for benefits, payments begin soon after a disability determination.

HOW MUCH ARE THE BENEFITS?

There is no fixed amount that is paid. The amount of your benefits depends entirely on your earnings; how much and how long you have paid into the Social Security system.

HOW DO I APPLY?

You may apply in person, by phone (800) 772-1213 or online (www.ssa.gov). Let them know that you have a diagnosis of HIV/AIDS or related-complex so they will expedite your application.

WHAT DO I BRING WITH ME?

The following is a list of the documentation you will need to bring in when you apply or have on hand to provide information. Bring as much as you can to the initial appointment, and you will have some time to gather the other information you need.

1. A letter signed by your doctor stating your diagnosis and when you were diagnosed.
2. Your social security number (SSN) and card, and any other SSN's on which you have received social security benefits (parents, etc.).
3. A certified copy of your birth certificate.
4. A thorough list of all aspects of your condition which prevent you from working.
5. A list of all treating sources (complete names, addresses, telephone numbers for all doctors, hospitals, clinics), dates and types of treatment received. List of all medications you are taking for your condition. List of restrictions placed on you by your physician.
6. W-2 forms for the past two years. If W-2s are not available, bring names and addresses of employers for the past two years.
7. Be prepared to describe your employment history.
8. If previously or currently married, name of spouse and dates of marriage(s), spouse's social security number.

SUPPLEMENTAL SOCIAL SECURITY INCOME (SSI)

HOW DO I APPLY?

See section on Social Security Disability.

WHO IS ELIGIBLE?

In order to qualify for SSI, you must be disabled and have a financial need. Basic eligibility criteria are:

1. Your assets cannot exceed \$2,000 for an individual or \$3,000 for a couple. Assets include: money in the bank, saleable real property other than your home, and co-owned bank accounts, stocks and bonds. Excluded assets include: your home, household goods and personal effects, one car or truck valued up to \$4,500, one wedding and engagement ring, a limited burial fund, or property essential for self-support.
2. Your monthly income must be below SSD guidelines. Income includes: AFDC, veteran's benefits, retirement pensions, worker's and unemployment compensation, wages, in-kind support such as food, clothing and shelter, and unearned income such as money received from rental property, stock dividends and interest from savings accounts.
3. If you own a house, you must live in it.

WHEN SHOULD I APPLY?

As soon as disability prevents you from working at a full time job, you have little or no income, and your assets do not exceed the guidelines.

HOW DO I APPLY?

You may apply in person or by phone (800) 772-1213. You cannot apply for SSI online as of the date of printing. Let them know that you have a diagnosis of HIV/AIDS or related-complex to facilitate your application.

HOW MUCH ARE THE BENEFITS?

The maximum monthly benefit rate for a single individual is \$552 and the maximum

monthly benefit rate for a couple is \$629 (for 2003). Each January, as authorized by Congress, a cost-of-living raise usually increases the monthly benefit rate.

WHAT DO I BRING WITH ME?

The following is a list of the documentation you will need to apply for SSI.

1. A letter signed by your doctor stating your diagnosis and when you were diagnosed.
2. Your social security number (SSN), social security card and any other SSN's on which you have received social security benefits (parents, etc.).
3. A certified copy of your birth certificate.
4. A list of all aspects of your condition which prevent you from working.
5. A list of all treating sources (complete names, addresses and telephone numbers for all doctors, hospitals, clinics), dates and types of treatment received. List of all medications you are taking. List of any restrictions placed on you by your physician.
6. Be prepared to describe the types of jobs you have held for the past 15 years.
7. Proof of any income you have, or expect to receive (including claim number under which you receive benefits; i.e., V.A. number, welfare number, etc.).
8. Bank statements for the last two months (passbooks, checking account statements, check registers).
9. Car registration, life insurance policies, stocks/bonds certificates.
10. If you rent, bring proof of your rental payment. If you share, the names of other members of your household, who pays, how much, and proof of household expenses (utilities, food, etc.) for the past twelve months.

MEDICARE

Medicare is a program of health insurance available for disabled persons under age 65 who have been receiving Social Security Disability (SSD) benefits for 24 months. Personal income is not a factor in eligibility determination. No application is necessary; Social Security will notify you shortly before the 24th month of your eligibility.

Medicare is comprised of two parts. Part A (hospital insurance) provides hospital benefits, post-hospital skilled nursing facility care, part-time home health services and hospice care. Medicare eligible people pay for Part A services through deductibles and co-payments which are paid directly by the patient to the provider. Part A deductible is \$840.

Medicare Part B (supplemental medical insurance) is a voluntary health insurance program. Part B covers physician's services, certain outpatient services, home health care, diagnostic tests and medical appliances. Part B has a \$100 deductible per year and pays 80% of covered charges. The premium payment is \$58.70 monthly.

Part A covered services are paid directly to the provider by Medicare. Part B services may be paid to the provider or the beneficiary.

MEDICAID

If you are SSI eligible, you are automatically eligible for Medicaid. Medicaid is a program of medical assistance for eligible needy persons and is administered and funded jointly by the federal government and the state.

Application for all Medicaid programs should be made at the local Department of Children & Families. Eligibility is retroactive to the third month prior to the month of application.

To receive Medicaid benefits you must be eligible for SSI and/or Temporary Assistance to Needy Families(TANF) or be financially needy. There are 27 categories of eligibility that have different income/resource guidelines. Some of these resources include: bank accounts, stocks/bonds, life insurance and real property.

Medicaid eligibility also includes three (3) exemptions to resource guidelines:

1. Homestead property if: you, your spouse or dependent relative is living in the home or you state that you intend to return to the home.
2. Burial funds under certain conditions, up to \$2,500 of an individual's assets.
3. One automobile.

ADDITIONAL PROGRAMS

MEDICALLY NEEDED PROGRAM

This program provides payment of medical bills that you cannot afford to pay even though your income and resources are slightly higher than permitted under Medicaid. You must be disabled and have medical bills that exceed your share of cost of the bills.

The share of cost is calculated by subtracting the Medically Needy Income Limit (\$180 for an individual, \$241 for a couple who both are in the program) from your net gross income. Assets are limited to \$5,000 for an individual and \$6,000 for a couple.

INSTITUTIONAL CARE PROGRAM (ICP)

The ICP is a medical assistance program administered by the PBC Health Department to help pay for the cost of nursing home or hospice care. You must be disabled to be eligible for the ICP program. Assets must not exceed \$2,000 for an individual and \$3,000 for a couple; monthly income must not exceed \$1,656 for an individual and \$3,312 for a couple. Eligible individuals receive a \$35 monthly allowance for personal needs.

QUALIFIED MEDICARE BENEFICIARIES (QMB)

This program entitles certain individuals who are currently or conditionally enrolled in Medicare Part A to receive Medicare cost-sharing benefits; i.e., payment of premiums, deductibles and co-insurance. Benefits are paid directly to the Medicare provider. Individuals who do not have full Medicaid benefits should apply for this program.

Eligibility requirements limit assets to \$5,000 per individual and \$6,000 per couple; a monthly income of no more than \$749 per individual and \$1,010 per couple and have filed for all other benefits for which you meet eligibility.

SPECIAL LOW-INCOME MEDICARE BENEFICIARY (SLMB)

This program provides payment of Medicare Part B premiums for individuals who are either enrolled or conditionally enrolled in Medicare Part A. Medicaid pays Medicare directly for the Part B premium. Eligibility requires enrollment or conditional enrollment in Medicare Part A; assets totaling no more than \$5,000 per individual and \$6,000 per

couple; a monthly income of no more than \$ 898 per individual and \$1,212 per couple and file for all other benefits for which you are eligible.