
Glossary

abbreviated application. An SSI application that is formally denied for nonmedical reasons when the applicant alleges information that clearly results in ineligibility.

adult. A person who is older than age 21, is aged 18–21 but is not a student, is under 21 and married, or is the head of a household.

aged person. A person aged 65 or older.

allowance. A determination by the Disability Determination Service, an administrative law judge, or the Appeals Council that an applicant meets the medical definition of disability under the law.

auxiliary benefit. Monthly Social Security benefit payable to a spouse or a child of a retired or disabled worker or to a survivor of a deceased worker.

award. An administrative determination that an individual is entitled to receive monthly benefits.

blind. “Blindness,” for Social Security purposes, means either central visual acuity of 20/200 or less in the better eye with the use of a correcting lens or a limitation in the fields of vision so that the widest diameter of the visual field subtends an angle of 20 degrees or less (tunnel vision).

blind work expenses (BWE). Any earned income of a blind person which is used to meet any expenses reasonably attributable to earning the income. The amount of the expenses is deducted from the earned income used in computing the SSI monthly payment amount.

child. An unmarried blind or disabled person who is not the head of a household and who is either under age 18 or aged 18–21 and a student.

concurrent application. An application for both Title II (Social Security) and Title XVI (Supplemental Security Income) benefits at the same time.

deeming. Counting part of the income and resources of certain persons who live with an SSI recipient when determining the amount of the payment. These persons include the ineligible spouses of adult recipients, the ineligible parents of child recipients under age 18, and the immigration sponsor for certain noncitizens.

diagnostic group. Classification of impairments, by body system, that identifies the medical condition(s) on which disability-related benefits are based. Before 1985, the coding of the primary and secondary diagnoses for Social Security and Supplemental Security Income applicants was in accordance with the *International Classification of Diseases: 9th revision, Clinical Modification, 4th ed.*, using 4-digit ICD-9 codes. In 1985, the Social Security Administration (SSA) implemented a revised method to determine and enter impairment codes in administrative records. This revised approach generally uses 3 digits (followed by zero), loosely based on the ICD-9 codes. For research purposes, the ICD-9 codes and SSA impairment codes are, typically, identical. However, the diagnostic groupings shown in the statistical tables closely parallel the major ICD-9 disease classifications.

disability. The inability to engage in substantial gainful activity (SGA) by reason of any medically determinable physical or mental impairment that can be expected to result in death or to last for a continuous period of not less than 12 months. (Special rules apply for workers aged 55 or older whose disability is based on blindness. The 12-month requirement does not apply to SSI recipients who are blind.)

Individuals are considered to be disabled only if their physical or mental impairment(s) is of such severity that they are not only unable to do their previous work but cannot—because of their age, education, or work experience—engage in any other kind of substantial gainful activity that exists in the national economy, regardless of whether such work exists in the immediate area in which they live, or whether a specific job vacancy exists for them, or whether they would be hired if they applied for work.

The SGA criterion does not apply to children under age 18 in the Supplemental Security Income program. The standard for them is a medically determinable physical or mental impairment that results in marked and severe functional limitations.

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

federal benefit rate (FBR). The basic benefit standard 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 household receive the full federal benefit. The federal benefit is reduced by one-third if an individual or couple is living in another person's household and receiving support and maintenance there. The federal benefit rate is increased annually to reflect increases in the cost of living.

impairment-related work expenses (IRWE). Expenses for items or services which are directly related to enabling a person with a disability to work and which are necessarily incurred by that individual because of a physical or mental impairment. The costs are paid for in cash by the individual and are not reimbursable from another source. These expenses are excluded from earned income used to compute ongoing SSI monthly payments. Since December 1990, they may also be applied in the determination of income for purposes of initial SSI eligibility. They are also deducted from the individual's gross earnings when determining if the work is considered substantial gainful activity.

Medicaid institution. Living arrangement for persons in public or private institutions when more than 50 percent of the cost of care is met by the Medicaid program. In these situations, the monthly federal SSI payment is limited to \$30.

own household. Used to determine the federal benefit rate. Applies to adults who own their living quarters, are liable for the rent, pay their pro rata shares of household expenses, are living in households composed only of recipients of public income-maintenance payments, and are placed by agencies in private households. Also applies to children living in their parent's household. See **federal benefit rate**.

plan to achieve self-support (PASS). A formal plan, requiring SSA approval, for attaining a specific work goal. With a PASS, an SSI recipient may set aside earned or unearned income and resources to pay for goods or services needed to reach the goal, such as education, vocational training, starting a business, or purchasing work-related equipment. Income and resources set aside are excluded from SSI income and resource tests, but they do not influence the determination of ability to engage in substantial gainful activity.

presumptive disability or blindness. For certain diagnoses, where there is high probability of a favorable medical determination of disability or blindness, payments may be made for up to 6 months before the formal determination, if the applicant meets the nonmedical eligibility requirements.

representative payee. A person designated by the Social Security Administration to receive monthly benefit checks on behalf of an adult recipient who is unable to manage his or her own funds. A recipient under age 18 is generally considered incapable of managing benefit payments, and a representative payee will be selected to receive benefits on the recipient's behalf.

Section 1619(a). Continuing cash benefits for disabled individuals whose gross earned income is at the amount designated as the substantial gainful activity level. The person must continue to be disabled and meet all other eligibility rules. Also known as special cash payment.

Section 1619(b). For Medicaid purposes, provides special status to working disabled or blind individuals when their earnings make them ineligible for cash payments. Also known as special recipient status.

Social Security Administration (SSA) administrative regions.

Boston: Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont

New York: New Jersey, New York, Puerto Rico, and U.S. Virgin Islands

Philadelphia: Delaware, District of Columbia, Maryland, Pennsylvania, Virginia, and West Virginia

Atlanta: Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, and Tennessee

Chicago: Illinois, Indiana, Michigan, Minnesota, Ohio, and Wisconsin

Dallas: Arkansas, Louisiana, New Mexico, Oklahoma, and Texas

Kansas City: Iowa, Kansas, Missouri, and Nebraska

Denver: Colorado, Montana, North Dakota, South Dakota, Utah, and Wyoming

San Francisco: Arizona, California, Hawaii, Nevada, American Samoa, Guam, and Northern Mariana Islands

Seattle: Alaska, Idaho, Oregon, and Washington

NOTE: The SSI program does not cover American Samoa, Guam, Puerto Rico, and U.S. Virgin Islands.

state conversions. Persons who were eligible for payments under the federal and state adult assistance programs in December 1973 were automatically eligible for SSI payments beginning January 1974.

state supplementation. Payments to eligible persons made under state provisions. These payments may vary by the recipient's living situation and by geographic area within the state. The payments may be administered by the Social Security Administration or the state.

substantial gainful activity (SGA). Describes a level of work activity that is productive and yields or usually yields remuneration or profit. The Social Security Administration's regulations establish a dollar amount to indicate whether a person's work is substantial.

Supplemental Security Income (SSI). A federal program for low-income aged, blind, and disabled individuals who meet income and resource requirements. Beginning in 1974, SSI replaced the former federal and state programs of Old-Age Assistance, Aid to the Blind, and Aid to the Permanently and Totally Disabled. SSI is funded by general tax revenues, not Social Security taxes.

suspension. When SSI payments have been temporarily stopped because the recipient is not currently eligible, or they were interrupted for other reasons. Payments can resume if the recipient reestablishes eligibility during the suspension reinstatement period, which is generally 12 months after the effective date of the suspension.

termination. When a recipient's current eligibility for SSI payments has ended. Termination events include death, no longer having a disabling impairment, and voluntary termination from the SSI program. In addition, when a recipient's SSI payments have been suspended longer than the suspension reinstatement period and certain other conditions are not met, the record is terminated.