## **Supplemental Security Income: Success to Build On**

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Thank you for inviting me to be part of today's discussion on Supplemental Security Income. The impetus for today's discussion is not so much a book as an extraordinary resource that I expect will remain on my shelves for many years to come. It is an exceedingly detailed compendium of legislative history; programmatic changes and adjustments—as well as proposed changes that failed; key players, ranging from policymakers and agency officials to advocates; and media coverage, spanning nearly four decades.

The authors argue that SSI has failed. That it was intended to be one thing, and became another. That, faced with early implementation challenges, it became "one of the early missiles that got three feet off the ground and then crashed." That because it was adjusted over time, in response to a changing policy environment, it has suffered "policy erosion." That because its beneficiaries ultimately suffered stigmatization akin to "welfare" recipients, SSI has not accomplished its mission.

Looking at the rich array of facts and events laid out in their book, and using a different rubric of "success," I—and many other advocates for people with disabilities—see things a little differently. Perhaps, as the old adage (often credited to Nelson Mandela) goes, where you stand depends on where you sit.

Coming at this from the beneficiary's perspective, I would argue that SSI has been a success. Yes, one in need of improvements (as you'll hear about in a later panel)—but a success to build upon.

#### A Powerful Tool for Poverty Reduction Among Seniors and People with Disabilities

First and foremost, SSI plays a crucial role in reducing poverty and helping vulnerable seniors and people with disabilities meet their basic needs. Most benefits are spent on basic needs like rent, food and utility expenses. What is the alternative for many of these individuals? Very real hardship. Homelessness. Hunger. Not being able to bathe because the water was shut off. Frigid winter nights without heat because the gas was shut off. Inability to afford even small copays to access needed medications and services, or a subway token to get to the doctor's office. I could go on, but you get the point.

SSI benefits are incredibly modest. The maximum benefit this year is \$710 per month, plus any state supplementation. This comes to about 75 percent of the federal poverty level for a single person. The average benefit is much lower—less than \$530 per month. For the vast majority of beneficiaries, SSI provides their sole or primary source of income.

Yet according to Social Security Administration data to be presented by Jeffrey Hemmeter later this morning, SSI has a powerful effect as a tool for poverty reduction among seniors and people with disabilities. In 2010, it reduced poverty among beneficiaries by one-third. For aged

beneficiaries, it reduced poverty from 67 percent to 48 percent. For disabled adult beneficiaries, it reduced poverty from 67 to 44 percent. For disabled child beneficiaries, it reduced poverty from 58 percent to 32 percent.

SSI also has a tremendous impact in blunting *extreme* poverty. In December 2002—looking to data that I and many others look forward to seeing updated perhaps as part of Jeffrey Hemmeter's presentation later this morning—41 percent of SSI recipients lived in extreme poverty (defined as less than half the federal poverty level), without counting their SSI benefit. Nearly *three-quarters* saw their incomes increase to between 50 and 99 percent of the poverty level when their SSI benefit was counted.

One of the reasons SSI is so effective at blunting poverty and extreme poverty among beneficiaries is that the program's rules have been adjusted incrementally over time to account for changes outside the program. For instance, the rules governing what is "excluded" from counting as income or as a resource, have been updated over the years, so that programs serving or otherwise impacting the SSI population would not work at cross purposes with SSI's antipoverty mission. Adding exemptions so that funds from LIHEAP (the Low-income Energy Assistance Program), or the EITC (the Earned Income Tax Credit)—neither of which existed at the time of SSI's signing—do not reduce an SSI recipient's benefit amount, should hardly be viewed as "policy erosion", for such adjustments were implemented so as *not* to hamper SSI's effectiveness at increasing economic security.

## A Vital Support for Independent, Community-Based Living

In addition to supporting economic security among seniors and people with disabilities, SSI plays a key role—along with Medicaid—in helping to place independence and dignity within reach where it might not otherwise be possible. Young adults with disabilities, aching to live independently, but who might otherwise have no choice but to live with family; people of all ages with mental impairments who have not been able to accrue a sufficient work history to be insured for Social Security Disability Insurance; children with severe impairments whose families might otherwise need to place in costly and isolating institutions to receive needed care.

As the authors note, until the 1960s, people with disabilities typically lived in large, state-run institutions, isolated from their families and communities. In a 1962 survey, 71 percent of the public said that people with developmental disabilities should be cared for in institutions rather than at home. Our attitudes have changed since then, and in the decades following the deinstitutionalization movement, we have shifted from a system centered on costly and isolating institutions to a system that values and prioritizes community-based living wherever possible. SSI is a huge part of this history—and four decades after its inception, it continues to play a central role in that system today.

Take Will. He's 10 and lives with his parents and sister. Nearly from birth, Will's parents knew something was wrong. He was slow in learning to speak and learned to sign so he could communicate. He had frequent, violent seizures. He struggled with anxiety and has memory problems. His mother Katie was forced to shut down her small business so she could stay home with Will, whose care became a full-time job.

As Katie describes it, "I surrendered my career so that Will's needs were met. SSI allows us to focus on what Will needs ... At one time, Will was unable to do anything for himself. He could not even feed himself. Now he can read and zip his own jacket. For a parent with a child with a disability, the support that comes from SSI is a dream come true." When Katie talks about what SSI means to her son and to her family, she gets teary-eyed.

Harvin, a 54-year-old resident of Philadelphia, has severe bipolar disorder with frequent major depressive episodes and hallucinations. He decompensated after his house was destroyed by a fire, remained homeless for a number of years, and was beaten up multiple times while sleeping on the streets. The support from SSI enabled him to get off the streets into safe and stable housing, and to get back into mental health treatment. In Harvin's words, "SSI has given me the opportunity to have dignity, pride, and respect. SSI is a blessing."

# The Role of the Media: A Cautionary Tale

I'd like to turn briefly to the role of the media in shaping this program. The authors appropriately pay ample attention to the media as a major player in affecting public opinion as well as driving public policy around SSI. Some of what they showcase in particular is how sensational anecdotes can drive major policy decisions. For instance, in 1994 a series of anecdotes publicized by Bob Woodward of the *Washington Post*, CBS News, and myriad other news outlets that jumped on what had quickly become a sensational headline, drove major changes to the SSI children's program, causing over 100,000 children with disabilities to be thrown off the program. These media accounts—claiming that parents were "coaching" their children to "act disabled" in hopes of qualifying for SSI—were later shown by nearly a dozen independent and government studies to be unsubstantiated. Yet Congress hadn't waited to confirm these awful stories they heard in the media—they sprang into action before all the facts were in, and engaged in legislation by anecdote. In today's political climate, this is a cautionary tale worth noting. A related lesson is the popularity of scapegoating, otherizing, and dehumanizing marginalized populations—something that I would argue is not the fault of the SSI program, but of long-lived external animus.

### Building on SSI for the Future

The goal underlying SSI's beginnings was to provide a "positive assurance that the Nation's aged, blind, and disabled people would no longer have to subsist on below poverty-level incomes." The sentiment driving Congress's interest in moving "toward an adequate income level for the aged, blind and disabled" was that the way a nation treats its poor is "one of the measurements of a just and humane civilization."

As illustrated by the data I shared earlier, SSI plays a powerful role in reducing hardship and increasing economic security among the elderly poor and people with disabilities. However, as I also noted earlier, this is not to say that the program is perfect as-is. My hope is that this book will serve as a starting point for an important and timely discussion in which I—and many other advocates for people with disabilities—look forward to taking part, starting from the following question: *How can we build on and strengthen this vital program to make it even more effective at achieving its mission and bring it into the 21<sup>st</sup> century?* 

We can and should endeavor to achieve greater administrative efficiency. But a central part of how we tackle this question must involve SSI's financial eligibility rules. As most of you are likely well aware, SSI is a means-tested program, and benefits are restricted to individuals who meet stringent financial eligibility criteria. While SSI was never intended to enable beneficiaries to live high on the hog, adjustments to the program's financial eligibility rules are urgently needed to bring SSI up to date and into the 21<sup>st</sup> century.

As you'll hear in much greater detail in the second panel, SSI's income disregards and asset restrictions are not tied to inflation, so they have withered due to decades of neglect. SSI's income disregards haven't been touched since the program's inception. The program's asset restrictions haven't been adjusted since 1984. Bringing those provisions up to date would make SSI significantly more effective at achieving its purpose—providing economic security to vulnerable seniors and people with disabilities.

I appreciate NASI's hosting this important conversation and look forward to seeing where it may take us.

<sup>&</sup>lt;sup>1</sup> See e.g., Jerry Mashaw et al., National Academy of Social Insurance, Restructuring the SSI Disability Program for Children and Adolescents, Report of the Committee on Childhood Disability of the Disability Policy Panel (1996); U.S. Department of Health and Human Services, Office of the Inspector General, A-03-94-02602, Concerns About the Participation of Children with Disabilities in the Supplemental Security Income Program (Oct. 1994); U.S. General Accounting Office, B-271255, Letter Report to Rep. Blanche Lincoln (March 5, 1996); Social Security Administration, Findings from the Study of Title XVI Childhood Disability Claims (May 1994); see also Christopher Georges, A Media Crusade Gone Haywire, 3 Forbes Media Critic 66 (1995).

<sup>2</sup> Social Security Amendments of 1972, S. Rpt. 92-1230, Committee on Finance, U.S. Senate, September 26, 1972, p. 384, cited in the 2004 Green Book, page 3-2, Committee on Ways and Means, U.S. House of Representatives.

<sup>&</sup>lt;sup>3</sup> Testimony of Robert Finch, Secretary of the Dept. of Health Education and Welfare,

<sup>&</sup>quot;Social Security and Welfare Proposals" (October 15 and 16, 1969), as cited in Edward Berkowitz and Larry DeWitt, The Other Welfare: Supplemental Security Income and U.S. Social Policy (Cornell: 2013).