**SOCIAL SECURITY DISABILITY INSURANCE (SSDI)**

**What is SSDI?**
SSDI stands for Social Security Disability Insurance. SSDI is an insurance program for disabled people who have worked “on the books” and paid FICA taxes for a certain number of calendar quarters. SSDI pays a variable monthly benefit amount, which depends on your work history. Payments begin after a five-month waiting period from the time of disability. SSDI is administered by the Social Security Administration (SSA).

**How long does it take to start?**
It is to your advantage to file for benefits as soon as you become disabled. However, you must be disabled for **five full months** before you become entitled to SSDI. You will receive your first benefit payment for the sixth month of your disability. You do not receive SSDI benefits for the waiting period.

These are terms you need to know:

**Date of Onset**
Your “date of onset” is considered the first day you are unable to work because of your disability. The date of onset may or may not be the same as the date you were diagnosed. Applicants usually use the day they last worked as the date of onset.

**Month of Entitlement**
Your “month of entitlement” to SSDI will be that month which is **five full months** following your last day of work (your sixth month of disability). For example: If you last worked on January 5, 2005, your month of entitlement to SSDI will be July 2005.

**Back Payment**
If your disability began (and you were unable to work) more than six months before you applied for SSDI, you may be eligible for “back benefits.” Applications for SSDI can be retroactive only up to 12 months.

**What happens if I don't apply right away?**
Sometimes people apply for benefits many months after they stop working. This does not change the eligibility date, but it may effect when your first benefit payment will arrive. For example, if you become disabled and unable to work on January 1, your date of onset is January 1. If you apply for SSDI benefits in January, your month of entitlement to SSDI and your first benefit payment will be for June. The check for June will arrive in July.

A person who is disabled on January 1, but waits to apply until June or July (or even later) is already eligible to receive SSDI benefits (because he/she has been disabled for 5 full months). However, since the application has to be evaluated, processed and approved (which normally takes at least 90 days), the first check may not be received until September or later. This person, though, will be able to receive a separate check covering the time from the month of entitlement (June) to the date of the first check (September). That is called “back payment.”

Remember: The month of entitlement is the month following 5 full months after your date of onset (last day you worked).

**How are SSDI benefits calculated?**
SSDI benefits amounts are determined by a formula which takes into account your age and earnings record. This formula allows for yearly increases in the level of individual benefits in order to reflect adjustments in the cost of living. As of January 2007 SSDI payments will be increased by 3.3% because of cost of living adjustments. The amount of your benefits will be based upon your average earnings for all of the years you’ve been working, not just your most recent salary.

There is no minimum SSDI benefit amount. Your monthly benefit will be based on your earnings record, not on how much money you need for food, rent and living expenses. If you
receive only a small SSDI benefit, however, and you don’t have a large amount of savings or other assets/resources, you may be eligible for some Supplemental Security Income (SSI) benefits in addition to your SSDI benefit. (Please see the SSI Fact Sheet).

SSDI beneficiaries may receive additional unearned income and have unlimited assets/resources. Unearned income you may receive includes private disability payments from an insurance policy or short-term and long-term disability coverage from your employer.

**How do I file applications?**

Social Security has a telephone number, 1-800-772-1213 (also known as TELECLAIM) for people with AIDS and HIV symptoms who wish to apply for SSDI and SSI benefits.

Tell the TELECLAIM representative that you have an AIDS diagnosis or HIV symptoms and you would like to file for both SSI and SSDI.

The TELECLAIM representative will ask you some basic questions (name, address, date of birth) as well as some questions about your disability. Your approval will be based on a complex set of factors. For more specific information call your local Social Security office.

**I know I didn’t work on the books long enough, so why file for SSDI?**

Applications for both SSI and SSDI should always be filed because people don’t necessarily recall their work histories completely or accurately. Or, if you were ever married, you may qualify for benefits under your spouse’s Social Security number.

**What happens after I call Teleclaim?**

TELECLAIM will refer your claim for SSDI benefits to your local Social Security District Office. A Claims Representative will call you back at a later date (usually within two weeks) to complete the applications over the telephone. Be certain to record in a log or diary the name and telephone number of the Claims Representative with whom you speak and the date and time of any calls. You should also ask for the address of your local Social Security District Office for your records.

**What will I be asked?**

In addition to basic demographic information, the Social Security Claims Representative will ask you questions about your disability. The most important question is about the date you last worked because of your disability. It is best to use the earliest date possible. SSA can often establish an earlier date of disability onset if you were in and out of work because of illness.

The Claims Representative will also tell you about the documentation you will need to provide, such as a birth certificate and a letter of diagnosis from your physician.

**What happens next?**

Social Security will mail the completed application to you for review, corrections and signing. Be sure you check the forms for accuracy before signing. You should initial next to any changes you may make on the applications they send you.

Included with the applications is a Disability Report (Form SSA-3368). This is an 8-page report, tinted green. You complete the first 6 pages (pages 7 and 8 are for the use of SSA).

The application will ask for the names, addresses and telephone numbers of all doctors, hospitals and clinics that have medical information on your disability.

**Required application documents.**

Social Security will tell you which documents you will need to send to them. You should write your Social Security number on all documents. **You must send the original documents. Photocopies are not acceptable.**

- birth certificate, passport, baptismal certificate or school records, etc.
- social security card
- diagnosis letter form physician which should also indicate that you are unable to continue working
- W-2 for last year or income tax return (1040) or Schedule SE if you are self-employed
- your last pay stub for all jobs for the current year.

**Where do I send my applications?**

Once you have gathered the requested documentation and you have completed and reviewed your applications, **make photocopies of everything to keep for your records.**

A return envelope with the address of our local Social Security District Office will be included with the applications sent to you. Enclose the original application and the original documenting proof that
is requested. It is best for you to return the completed application materials by Certified/Return Receipt or Registered mail.

When Social Security receives the application, they will photocopy the original documents and mail them back to you. If more information is needed, they will write you. You should call the Claims Representative at your local office to confirm that all the necessary paperwork has been received.

If you are unsure of your local Social Security District Office, call 1-800-772-1213, or the GMHC Advocacy Helpline: 212/367-1125.

What is the medical determination?
SSDI claims are reviewed for a medical determination of disability by the New York State office of Disability Determination Services (DDS). The determination is based on medical information from your doctors, hospitals or clinics which you have been to for treatment.

The office of Disability Determination Services (DDS) will request the medical records from your doctors, hospitals or clinics.

How long does the processing of my claim take?
It may take three to six months for a decision to be made on your SSDI claim. Once the medical determination of your disability has been made, Social Security will notify you in writing as to whether or not your claim has been approved. SSDI will also inform you of your month of entitlement to SSDI benefits, the amount of your monthly benefit, and when you will receive your first benefit payment.

Remember: Given the time it takes to process a claim, it is best to apply for SSDI as soon as you have stopped working because of a disability.

How will I be paid?
SSDI benefit payments for a particular month are made on the third day of the following month. For example, benefits for the month of January are due on February 3, benefits for February are due on March 3, etc.

For safety and convenience, you can have your bank arrange with Social Security to have your monthly SSDI benefit deposited directly into your checking or savings account. Most banks provide direct deposit service and will be able to supply you with Form SF-1199 to fill out.

What happens if my check doesn’t arrive?
SSDI benefit checks are mailed by the Treasury Department so that you receive them on the 3rd day of the month following the month for which the benefit is due. If you do not receive your check in the mail by the 6th of the month and if you believe that it is lost or stolen, notify your local Social Security District Office or call the SSA at 1-800-772-1213. You will need to give SSA your name as it would appear on the check, your Social Security number, your address with ZIP code, and the month for which the check was issued. SSA will take the necessary information to investigate its whereabouts and start the process of getting you a replacement.

Can I move?
You can receive SSDI benefits in all 50 States. Your benefit amount does not change if you move from one state to another. You must inform the SSA as soon as you know your new address so that benefit payments can be properly delivered. You can notify the SSA by phone at 1-800-772-1213.

What other benefits does SSDI provide?
SSDI does not provide Medicaid. An SSDI beneficiary is automatically eligible for Medicare after collecting SSDI benefits for 24 months. Medicare coverage starts in the 25th month of your SSDI entitlement. SSA will automatically send you information about 3 months before you eligibility for Medicare.

SSDI recipients may be eligible for Food Stamps but must file a separate Food Stamp Program application. (Please see the Food Stamp Program Fact Sheet).

SSDI recipients may be eligible for Medicaid but must submit a separate Medicaid application. (Please see the Medicaid Fact Sheet).

Can I return to work?
Yes. The SSA has the Trial Work Program (TWP) which permits SSDI beneficiaries to return to work for a period of about 9 months in a 60-month period. The 9 months do not need to be consecutive. The purpose of the TWP is to give SSDI beneficiaries the opportunity to see if they are able to perform sustained work. Those months in which you do not earn $640 or more and/or spend more than 80 hours in self-employment, do not count as trial work months. During the Trial Work
Period, you may earn both a salary and receive your full SSDI benefit payment.

Your eligibility for SSDI is partly based on the expectation that your disability will last for at least 12 months, during which time you are unable to perform substantial gainful work.

If you return to work during the initial five-month waiting period or during the remaining 7 months of the first year of your disability, your entitlement to SSDI may be denied or terminated. Any benefits you may have received may be considered an overpayment which will have to be returned to SSA.

It is advised that you inform your local Social District Office before returning to work to avoid any confusion as to when your TWP can begin. Ask for written confirmation that you reported this information to them.

What happens when the 36-month extended period of eligibility is up?

You will need to choose between working and collecting SSDI benefits. You will have the choice of either returning to work permanently and giving up the SSDI benefits, or reducing the amount of work and giving up earnings in excess of $900 or more per month. If you continue to earn $900 or more per month, you will receive three more SSDI checks. After that your checks will stop. (See Transitioning to Work Fact Sheet)

In other words, you can continue working as long as you do not earn $900 or more per month and still collect your full SSDI benefit once you have satisfied the 9-month TWP. If you earn $900 or more per month, you are not eligible to receive an SSDI benefit. If you do receive an SSDI benefit for any month in which you have earned $900 or more, it is considered an overpayment and should be returned to Social Security.

A Note of Caution

Returning to work and earning wages may jeopardize other benefits (such as Medicaid and Public Assistance). It is crucial that you obtain informed advice before returning to work.

Questions?

There is a Social Security Hotline to call about pending applications, lost checks, questions and applications. The number is 1-800-772-1213.

The Client Advocacy Unit at GMHC is available to assist you. For more information, please call our Helpline: 212/367-1125, Wednesdays, 2:00 to 5:30 P.M. Walk-in services are available Tuesdays and Thursdays, 10:00 A.M. to 1:00 P.M.

Revised 5/07