March 12, 2012

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Office of Regulations
Social Security Administration
107 Altmeyer Building
6401 Security Boulevard
Baltimore, MD  21235-6401


Dear Office of Regulations,

The undersigned members of the Consortium for Citizens with Disabilities (CCD) Social Security Task Force and Housing Task Force, joined by the National Low Income Housing Coalition, submit the following comments in response to the Social Security Administration (SSA) Request for Comments on Supplemental Security Income and Homeless Individuals (Docket No. SSA-2011-0087).

CCD is a coalition of over 100 national organizations working together with and on behalf of the 54 million children and adults with disabilities and their families living in the United States. CCD is a diverse coalition representing people with the full range of physical, mental, and sensory disabilities. Our members include many organizations that work closely with individuals with disabilities who are homeless, at risk of homelessness, or formerly homeless.

Supplemental Security Income (SSI), along with associated Medicaid benefits, is an essential program for over 8 million people with severe disabilities.\(^1\) An estimated 585,000 adults with disabilities live in homeless shelters across the U.S.\(^2\) SSI benefits play a central role in reducing homelessness among people with disabilities, by providing a steady source of income that allows people to secure and maintain housing.

Our comments focus on SSA’s questions 7 and 8, related to whether the current SSI eligibility rules present obstacles to people who are trying to access shelter and/or transition to a permanent living arrangement.

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As noted by SSA in the request for comments, current law provides that individuals who reside in a public emergency shelter for the homeless may be eligible for up to 6 months of SSI payments in any 9 month period (42 U.S.C. 138(e)(1)(D)). This provision was adopted under the Omnibus Budget Reconciliation Act of 1987 (P.L. 100-203; Section 9113), and was predated by more restrictive limitations on receipt of SSI benefits by residents of public emergency shelters. We believe that this provision is outdated, misaligned with current best practices, and inappropriate.

Over the two decades since this provision became law, as a nation our understanding of how best to support people with disabilities and people who are homeless has changed dramatically.

In 1987 the service systems available to people with disabilities still had a strong institutional focus. Many parts of the country were only beginning to develop community-based services. In contrast, today laws such as the Americans with Disabilities Act of 1990 recognize that people with disabilities have the right to live in the most inclusive setting, overwhelmingly prefer to do so, and are in fact best served in the community. Federal and state policies and programs are increasingly aligned to support this goal of community living.3

In 1987, the McKinney-Vento Homeless Assistance Act also became law. This landmark legislation launched a fundamental shift in our nation’s understanding of and approach to homelessness. Over the last two decade, best practices have increasingly reflected a growing recognition that service systems should help people leave shelters as quickly as possible for more permanent living arrangements. Today, models such as Housing First emphasize the importance of helping people who are homeless to access housing quickly, and the need to align policies and supports with this goal. See, for example, the Substance Abuse and Mental Health Services Administration (SAMHSA), Permanent Supportive Housing Toolkit at http://homeless.samhsa.gov/channel/permanent-supportive-housing-510.aspx; and the Department of Housing and Urban Development, The Applicability of Housing First Models to Homeless Persons with Serious Mental Illness, www.huduser.org/Publications/pdf/hsgfirst.pdf.

While SSI is an essential ingredient in helping people get housing, the application process is often lengthy, and even after the agency approves SSI benefits, it can take the beneficiary many months to secure housing and support services. Any interruption in a person’s income, or the risk of interruption, has the potential to disrupt a person’s ability to secure permanent housing. Additionally, about three-quarters of states link Medicaid with SSI benefits and, in these states, suspending SSI risks interruptions in or the loss of essential Medicaid coverage.

For these reasons, we urge SSA to review current law and regulations to identify the statutory and regulatory changes necessary to eliminate all time limits on SSI benefits for people living in public homeless shelters, and to initiate those changes immediately.

3 For example, in 2009 President Obama announced the “Year of Community Living,” directing Health and Human Services Secretary Kathleen Sebelius and Housing and Urban Development Secretary Shaun Donovan to work together to identify ways to improve access to housing, community supports, and independent living arrangements. http://www.whitehouse.gov/the_press_office/President-Obama-Commemorates-Anniversary-of-Olmstead-and-Announces-New-Initiatives-to-Assist-Americans-with-Disabilities/.
We also encourage SSA to continue to work to streamline the SSI application process, to reduce disability claims backlogs and processing times, and to provide targeted outreach and application assistance to people with disabilities who are homeless. Specifically, we encourage SSA to:

- Proceed with efforts to ensure that SSA field offices can accurately identify and expedite claims by people who are homeless, by including questions in the application package that reflect a claimant’s possible homeless status and issuing guidance to SSA field offices on expediting claims by people who are homeless;
- Expand the list of acceptable medical sources to include Nurse Practitioners, Psychiatric Clinical Nurse Specialists, Physician Assistants, and Licensed Clinical Social Workers;
- Strengthen and support efforts to expedite connecting people with SSI prior to release from jails, prisons, and state mental hospitals or other institutions;
- Expand the SSI/SSDI Outreach, Access and Recovery (SOAR) initiative nationally; and
- Have designated staff in each SSA field office to work on applications for people who are homeless.

Sincerely,

The undersigned members of the Consortium for Citizens with Disabilities Social Security Task Force and Housing Task Force:

ACCSES
The Arc of the United States
Community Legal Services of Philadelphia
Corporation for Supportive Housing
Mental Health America
National Alliance on Mental Illness
National Association of Councils on Developmental Disabilities
National Association of Disability Representatives
National Council for Community Behavioral Healthcare
The National Council on Independent Living
National Disability Rights Network
National Organization of Social Security Claimants’ Representatives
Technical Assistance Collaborative, Inc.
United Cerebral Palsy

Joined by:

The National Low Income Housing Coalition