

HELPING LOW-INCOME, DISABLED ADULTS BECOME SUPPLEMENTAL SECURITY INCOME (SSI) BENEFICIARIES THROUGH AN ADVOCACY PROGRAM

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EXECUTIVE SUMMARY

INTRODUCTION

In an effort to bolster its capacity to provide proactive Supplemental Security Income (SSI) advocacy services to eligible participants, the San Francisco County Adult Assistance Program (CAAP) launched an SSI advocacy initiative in late 2004. The objectives of the initiative was to shift SSI eligible participants off the county-funded CAAP cash benefits program and link them to the more appropriate federally-funded cash benefits programs, SSI/DI.

Until recently, CAAP relied on its Disability Evaluation and Consultation Unit (DECU) and Social Security Income Pending (SSIP) program as the principle mechanisms to link disabled and/or eligible individuals with SSI benefits. The SSIP program, one of four CAAP programs that serve the San Francisco County's indigent adult population, provides cash assistance while the SSI application is being evaluated. Unfortunately, due to programmatic limitations, many SSIP participants remain on city-funded cash assistance for prolonged periods.

According to two separate reports released in Fall 2004 that evaluated SSI advocacy programs in San Francisco, it is estimated that there are over 5,000 disabled San Francisco residents who are eligible for SSI but are not enrolled. One of the reports estimated that the County could potentially save \$7M

annually if all the SSIP participants were moved on to SSI.

FINDINGS

The challenge of successfully moving a large percentage of disabled CAAP participants on to SSI, while daunting, is not impossible.

Two Bay Area counties, San Mateo and Santa Clara, implemented SSI advocacy programs over 20 years ago to help clients to overcome the barriers that they face in obtaining SSI benefits. Both counties continuously face challenges in getting eligible clients to apply for and/or complete the SSI application process; much less get SSI benefits granted, even with case management assistance. Despite the challenges, both counties report an 80% SSI award approval rate.

LESSONS LEARNED

- SSI advocacy is an essential support service for many disabled individuals. To be effective, agencies need to better target those individuals who most need advocacy services and those who are most likely to get SSI benefits.
- Many disabilities are hidden; front-line staff must be trained to know how to identify and evaluate for SSI eligibility. Specialized advocacy units combined with enhanced screening

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tools can help to improve the identification of individuals who fit the targeted profile.

- Proactive intervention strategies, including up-front assessment and case management throughout the SSI application process can have a significant and positive outcome for participants and the agency.
- Advocates need the right mixture of training, skills, experience, and knowledge of SSI/SSA regulations. A degree in Social Work is preferred plus background in medical/legal issues or rehabilitation.
- Advocates and the agency itself must develop and maintain on-going relationships with the staff at the local SSA office and/or agency partners.

RECOMMENDATIONS

- Although unavoidable circumstances limited the scope and depth of the case study, and, despite the differences between the counties, I offer the following recommendations to strengthen the CAAP SSI advocacy initiative:
- Develop a handbook and/or an on-line policies and procedures manual

- Develop and maintain on-going relationships with key staff at the local SSA office
- Develop a formal screening tool to better identify individuals who might be eligible for SSI benefits.
- Develop a reference guide or “cheat sheet” of acceptable SSA eligible disabilities by category, (i.e., physical, mental, developmental) for use by front line staff
- Develop performance measures and outcome objectives with effort focused on SSI award rates and client engagement
- Have SSA or other contracted vendor provide annual in-service training to keep staff current
- Lead/participate in systems changes to foster coordination across programs and in other city departments to decrease redundancy and duplicated services
- Implement proactive strategies, incentives, to facilitate completion of the SSI application process – use the “WIFM” approach – What’s In It For Me?

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INTRODUCTION

In an effort to bolster its capacity to provide proactive SSI advocacy services to eligible individuals, the San Francisco County Adult Assistance Program (CAAP) launched a Supplemental Security Income (SSI) advocacy initiative in late 2004. With a focused effort to shift SSI eligible individuals off the county-funded CAAP cash benefits program and link them to the more appropriate federally-funded cash benefits programs, (SSI/DI), CAAP is looking for new ways to provide advocacy services.

The programmatic goals for the CAAP SSI advocacy initiative are:

1. To identify SSI eligible individuals;
2. To **proactively** provide advocacy services and help individuals obtain SSI benefits, and;
3. To reduce general fund expenditures by moving SSI eligible individuals off the CAAP case load.

Until recently, CAAP relied on its Disability Evaluation and Consultation Unit (DECU) and Social Security Income Pending (SSIP) program as the principal mechanisms to link disabled and/or eligible individuals with SSI benefits. The SSIP program, one of four CAAP programs that serve the San Francisco County's indigent adult population provides cash assistance while the SSI application is being evaluated. Unfortunately, many SSIP clients, currently estimated at 1,400, remain on city-funded cash assistance for prolonged periods,

draining much needed capital and administrative resources.

According to the October 2004 report by the Citywide SSI Advocacy Workgroup of San Francisco, it is estimated that there are over 5,000 disabled San Francisco residents who are eligible for SSI but not enrolled. This same report estimated that the county could potentially save \$7M annually if all the SSIP participants were moved on to SSI.

The challenge of moving CAAP participants on to SSI is complicated by two primary issues: the complexity of the SSI application process itself and individual participant characteristics, (i.e., homelessness and severe behavioral health issues). Consequently, many or most eligible participants will not succeed in getting SSI benefits without case management services.

BACKGROUND

The purpose of this study was to review an SSI advocacy program currently in operation in a county with a large General Assistance (GA) population and to identify best practices for possible replication in the CAAP program. The decision was made to review Santa Clara County because its GA population is relatively large.

Unfortunately, shortly after onset, Santa Clara County was unable to host the internship, and a decision was made to move the internship to San Mateo County. Despite their best efforts, the intern-

ship experience in San Mateo County was interrupted at the mid-point and the full internship experience was not completed.

Due to the complications that arose during the internship, the scope and depth of the case study was changed to compensate for the challenges in data collection. For example, there was a reduction of planned on-site visits, an absence of key host site agency staff, and a paucity of written materials, (i.e., manuals).

Although limited, the internship did provide an opportunity to make a cursory review of program design and some strategies used by the two counties to link participants to SSI benefits.

SAN MATEO COUNTY MODEL

Historical Background

San Mateo County has a very small GA population, estimated at less than 500 cases. Despite the small caseload, the county implemented their SSI advocacy program some 23 years ago to reduce county general fund expenditures and to assist clients in pursuit of SSI cash benefits.

Program Design

In San Mateo County, the Disability Services Advocacy Unit (DSA), housed within the county's Income Maintenance Division provides SSI advocacy services for disabled GA recipients. The mission of DSA is essentially two-fold: to assist disabled individuals with much needed assistance with the SSI application and to increase the rate of MediCal reimbursement to the county.

Prior to September 1996, two social workers were assigned to the task of SSI advocacy. However, in July 1996, one social worker position was deleted from the budget and the other social worker retired.

Current Structure

Beginning September 1996, two existing line supervisors assumed the SSI advocacy caseload and re-designed the SSI advocacy program. A key part of the re-design was the decision to staff the unit with Benefit Analysts instead of Social Workers. The Benefit Analyst is essentially an Eligibility Worker and typically does not have training or a degree in Social Work. Currently, the Disability Services Advocacy Unit has two full-time Benefits Analysts, each carrying an average of 200 cases.

Implementation

The DSA Benefit Analyst initiates the SSI applications for eligible clients and assumes case management responsibilities, but refers any case at the hearing level to a private attorney. The Benefits Analyst may accompany clients to appear before the Administrative Law Judge but will not represent clients.

To facilitate client access to legal representation, the agency provides a list of attorneys available for the clients to select. If an SSI application is approved, the county will receive 75% of the retroactive SSI payment and the consulting attorney receives 25%.

Referral Process

The Benefit Analyst/Eligibility Worker from the county General Assistance program initiates a referral to DSA when the client states the following:

- S/he is disabled and provides a medical statement either from her/his private physician or a statement from Department of Rehabilitation verifying disability for over six months.
- S/he applied in the past and has been denied or is currently applying for SSI.

Interview Process

Eligibility for referral to DSA is established during the initial cash benefit application. Once eligibility has been established, the Screening and Assessment Specialist will schedule an initial intake interview for the client with the DSA Benefit Analyst.

SANTA CLARA COUNTY MODEL

Historical Background

Santa Clara County implemented their SSI advocacy program over 20 years ago. The advocacy unit was once staffed by nine social workers. Each worked a caseload of between 60 to 80 cases. Due to budget cuts and a reduction in staff allocation, Santa Clara County currently focuses its SSI advocacy assistance efforts on GA clients. Presently, there are five Social Workers assigned to the advocacy unit. Each carries a caseload of approximately 45 cases.

Roles of an Advocate

In Santa Clara, the SSI advocacy unit provides the following services: assistance to complete the initial application, assistance in gathering needed documentation, (i.e., medical records requests), assistance at reconsideration, and may represent clients at the second denial stage, which goes before the

Administrative Law Judge. The social worker may refer the client to an attorney at the third denial.

Intake Interview

On the first day of my internship, I observed the Officer of the Day (OD), Katrina Williams, conduct an interview with a drop-in client. The drop-in protocol currently in place provides each client with a fifteen to thirty minute screening interview with the OD.

As is their procedure, Ms. Williams was notified of the clients' request for service via the referral forms available at the front desk.

During my one and one-half hour site visit, Ms. Williams interviewed five drop-in clients. Several other clients were waiting to be seen. Of the five interviews I observed, Ms. Williams made recommendation for two clients to be accepted into SSI case management.

Referral for SSI Case Management

Following the interview, the OD can make a recommendation for case management. Once accepted for case management, a social worker is assigned to the case.

Per SSI Advocacy Program Supervisor, Jackie Montoya-Garcia, there are approximately seven hundred cases pending case management assignment. Currently, the waiting period for case management assignment is over six months!

LESSONS LEARNED

- SSI Advocacy is an essential support service for many disabled individuals. To be effective,

agencies need to better target those individuals who most need advocacy services and those who are most likely to get SSI benefits.

- Many disabilities are hidden and front-line staff may not know how to evaluate for SSI eligibility. Specialized advocacy units and/or enhanced screening tools can help to improve the identification of individuals who fit the targeted profile.
- Proactive intervention, i.e., up-front assessment and continuous case management throughout the SSI application process can have a significant and positive outcome for both the client and the county.
- Advocates need the right mixture of training, skills, experience, and knowledge of SSI/SSA regulations. Ideally, a degree in social work is preferred and/or a background in rehabilitation. Above average organizational and time management skills are required.
- Due to the nature of the job itself, SSI advocacy demands certain personal characteristics from intake and case management staff such as: ability to exercise good judgment, effective oral and written communication skills, the ability to establish working relationships with multiple agencies, and the willingness and self-motivation to do what it takes to get the job done.
- Advocates and the agency itself must develop and maintain on-going relationships with the staff at the local SSA office. A phone call or e-mail to a personal contact to troubleshoot an issue can potentially save weeks of work and/or waiting.
- An operations/program manual and a policies and procedures handbook need to be developed and made available for convenient access, (i.e., on the PC desktop).

RECOMMENDATIONS

Based on my limited case study experience, I offer the following recommendation to strengthen the CAAP SSI advocacy program:

- Develop handbook and/or on-line policies and procedures manual
- Develop and maintain on-going relationships with key staff at the local SSA office.
- Develop a formal screening tool to better identify individuals who might be eligible for SSI benefits.
- Develop a reference guide, or “cheat sheet”, of acceptable SSA eligible disabilities by category, (i.e., physical, mental, developmental), for use by front line staff.
- Develop performance measures and outcome objectives with effort focused on SSI award rates and client engagement.
- Have SSA or other contracted vendor provide annual in-service training to keep staff current.
- Lead/participate in systems changes to foster coordination across programs and within other city departments to reduce redundancy and duplicate services.
- Implement proactive strategies and/or incentives, to facilitate completion of the SSI application process – use the “WIFM” approach – What’s In It for Me?

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REFERENCES

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