

SSI/SSD APPLICATIONS

Eligibility Requirements

Both SSD and SSI benefits are for people who are disabled and unable to work. You must have a medical condition that keeps you from being able to work in order to possibly receive benefits. To qualify for either benefit, you must either be a U.S. citizen or Legal Permanent Resident (with additional requirements for SSI).

SSI is based on your income and resources. You can only have \$2000 in resources for an individual or \$3000 for a couple. When you apply, SSA will require proof of household income, bank statements, savings, assets, assistance from friends and family members, rent or mortgage information, citizenship paperwork, and life insurance policies (check and see if your life insurance has a cash surrender value – this money will be counted as a resource by SSA). If you became a Legal Permanent Resident **after 1996**, you must also have approximately 10 years of documented work history in the U.S or meet certain other requirements.

SSD requires that you have worked on the books a certain number of years (based on your age) in order to be eligible. For SSD benefits, there is no resource limit.

Request Your Records Right Away

Request medical and psychiatric records from the records department of your hospital/clinic

If hospital tries to charge a fee for records, inform them that you are requesting the records for a disability application or appeal. **NYS law was updated to say no charge can be made for records in this case.**

Go to: www.nysenate.gov/legislation/bills/2017/s6078 for a copy of the bill making this change.

Request physical therapy and pain management records from the records department

Request inpatient and emergency room records

Request a Physical or Psychiatric Assessment Form directly from the doctor or psychiatrist

If you see a therapist and a psychiatrist, the therapist can complete the form as long as it is reviewed and co-signed by the psychiatrist

Request school records and IEPs for children and young adults

Request letters from prior employers or co-workers regarding your symptoms and any work accommodations

Request letters from family members regarding symptoms, lifestyle changes, and assistance provided

It is very useful to request these records prior to the application. However, do not submit your records to the Social Security (SSA) office. Instead, hold on to the records to submit to the disability analyst later.

Filing an Application

Social Security Disability (SSD): Disability Benefit Application, Adult Disability Report, Authorization to Disclose Information to SSA (must be handed in or mailed in). Can apply online or schedule in person or telephone appointment by calling 1-800-772-1213 (TTY 1-800-325-0778), Mon-Fri, 7am-7pm.

If you have computer access, you can apply for SSD online at: <https://secure.ssa.gov/iClaim/dib>

Supplemental Security Income (SSI): Complete the Adult Disability Report or Child Disability Report, then schedule an appointment with the SSA office to complete the rest of the application in person or by phone appointment. You cannot complete the SSI application online.

When you speak to the Social Security representative, specify the medical conditions that seriously affect you and provide full contact information for the places where you receive or received medical treatment.

Make sure that you provide the contact information for the records department of the hospital/clinic where you are seen, not your doctor's contact information.

Make sure you respond to all requests for follow-up documents and information.

OTDA DDS Disability Analyst: Social Security takes your initial application paperwork but the actual case review is done by a different agency called the Office of Temporary and Disability Assistance (OTDA). Your case will travel from SSA to OTDA DDS where your case will be assigned to a disability analyst for evaluation.

A few weeks after applying, you will receive a letter from the OTDA DDS disability analyst along with a form asking questions about your daily activities and about your past work. The disability analyst's name, phone number, fax number and address will be on the front page of the packet. This is very important information.

**ALL OF YOUR MEDICAL RECORDS SHOULD BE SUBMITTED TO THE ANALYST.
THIS IS THE MOST IMPORTANT THING YOU CAN DO FOR YOUR CASE.**

Submitting Evidence: If you have medical reports or doctors letters, make sure to send copies of them to your disability analyst by fax or mail. Always call to confirm receipt. You should also check-in with the analyst at least once a month to confirm that they have all of the information they need. If the analyst tells you that one of your doctors did not get back to them, you should call your doctor and see if you can get the required information for the analyst. Strong cases can be denied if the analyst does not get all the medical records.

Activities of Daily Living and Work History Report: On the forms you receive from the analyst, point out the ways in which your medical condition(s) affect your ability to complete work and/or daily tasks and to function normally. Be as detailed as possible. Return the forms to your analyst by fax or mail and call to confirm receipt.

Consultative Exam: If a medical exam is scheduled by Social Security, do your best to attend. Rescheduling can be problematic and lead to delays or an incomplete decision. If you cannot attend, you should call the medical exam office, and also the analyst, to try to reschedule the appointment. When you go to the consultative exam, make sure to tell the doctor as much as possible about your condition(s) and problems with daily activities.

Be detailed. You can take your medical records with you but the doctors will generally not look at them. However, if you have an important lab result (an x-ray that shows a fractured hip or a biopsy showing liver cirrhosis) you can take it with you and try to get the exam doctor to look at it.

Timing: You should call SSA directly at 1-800-772-1213 if you have not received an initial disability decision in the mail by about 5-6 months after application. Sometimes denial letters are not received. You do not want to miss your opportunity to appeal a denial if necessary.

Appeal: If your application is denied and you wish to appeal, make sure to follow the instructions on the decision and request **reconsideration (the first level of appeal)** within 60 days of the application denial. Your case will be reviewed a second time by a different analyst at OTDA. If you are aware that OTDA was missing evidence when they made the initial determination, you should submit the missing evidence with your reconsideration request.

If your reconsideration request is denied, you should file a **request for hearing (the second level of appeal)** within 60 days of the reconsideration denial.

Reconsideration and hearing requests may be filed online at: <https://secure.ssa.gov/iApplsRe/start> .

If you do not have computer access, you can appeal by taking your denial notice to the local SSA office and completing the appeal forms they provide you.

Legal Assistance: If your reconsideration request is denied, you can contact New York Legal Assistance Group at **212-613-5024** for possible representation at the hearing level if you are currently a public assistance or Medicaid recipient or if your household income is below 200% of the Federal Poverty Level.