

Benefits Information

SOCIAL SECURITY DISABILITY BENEFITS/DISABILITY INSURANCE Eligibility is based on your own work record. You must have worked (and paid taxes) at least 5 of the last 10 years.

The amount of your monthly benefit is based on your earnings. It is the same amount you would get if you received your full retirement benefits. You are not entitled to receive your first benefit until the 6th month after you are found to have become disabled. But, you may be paid past owed benefits up to one year prior to the date of your application.

SUPPLEMENT SECURITY INCOME (SSI) Eligibility is for those who don't have enough work credit to qualify for a DI claim, or as a supplement if your DI benefit amount is low.

The amount of your monthly benefit is based on you (and your spouse's) income and assets. The levels for both are very strict, and many people do not qualify unless they are at poverty level. The current maximum monthly benefit is just over \$600 per month. Your benefits start the month you filed your application. There are no past owed benefits for any month prior to your application.

WIDOW'S/ER'S DISABILITY To be eligible, you must be between 50 and 59 years old (at age 60 you are automatically eligible for regular widow/er's benefits even if not disabled), and your spouse must have passed away within the past 7 years. Your marriage must have been legal in the state where you were married (some states like Arkansas do not recognize common-law marriages). You cannot now be married to someone else.

Your monthly benefits amount is based on your spouse's work record. You are not entitled to receive your first benefit until the 6th month after you are found to have become disabled. But, you may be paid past owed benefits up to one year prior to the date of your application.

CHILDREN'S DISABILITY The child is eligible only if a parent is deceased or receiving social security as either retired or disabled. To qualify, the child's disability must have started before his/her 22nd birthday.

Your monthly benefits amount is based on your parent's benefit amount. You are not entitled to receive your first benefit until the 6th month after you are found to have become disabled. But, you may be paid past owed benefits up to one year prior to the date of your application.

CHILDREN'S SSI The claim is based on financial need for families who cannot afford the treatment necessary for the disabled child.

The amount of the monthly benefit is determined much like those for adult SSI recipients (see above).

FAMILY BENEFITS Additional benefits given to children (and in some cases to non-working spouses) of a claimant who is awarded DI benefits. The check is sent to the home where the child lives.

MEDICAID This is health insurance through the State of Arkansas which is immediately available for anyone who qualifies for any amount of SSI benefits.

MEDICARE This is health insurance through the Social Security, for DI, WIDOW/ER'S or CHILDREN'S DISABILITY benefits recipients. But it does not become available until 2 years from the month you became eligible to begin receiving benefits.

DETERMINING DISABILITY

The standard Social Security uses to determine disability is very strict. Getting SS disability benefits is usually harder than qualifying for private disability benefits.

You cannot be working. The only exceptions would be when your job is a special job made just for you, or your income is very minimal.

For most people, being unable to do your past types of work is not enough. You need to be unable to do any kind of work. There is no "partial" disability.

Your condition(s) causing disability can be either physical or mental, or a combination; but they must be documented by your doctors.

Your condition(s) must cause you to be totally disabled for at least 12 months.

Social Security is not required to consider problems that you may have getting to a job, the competitiveness of the job market, the salary level of jobs, or your personal preference for types of jobs.

Social Security will collect information from both you and your doctors. Sometimes they send you to a doctor for a one-time examination.

Most people are denied at the first and second decision making levels. Don't let this discourage you. If you cannot work, you need to stick with your claim. But, there is a 60 day time limit to file your appeal, so do not procrastinate.

Most people are required to go to a hearing before a judge. At this level, it is very important to be able to give the judge the right medical records and opinions about your severe limitations. Your testimony alone won't do it.

You are entitled to be represented during your claim, even from the beginning when the application is filed. An attorney can help with the paperwork and also make sure that the important medical documents are submitted. This is particularly important when you have a hearing before the judge. Please do not wait until the last minute to ask for help ... your attorney will need time to properly prepare your case.

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