

90-400.09. SOCIAL SECURITY BENEFITS

- A. General** This section provides information regarding the requirements of the GR Program as they apply to Social Security benefits.
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- B. Policy** All applicants who may potentially be eligible for any type of Social Security benefit shall be required to apply for such benefits.
- Refusal or failure to cooperate shall result in denial or discontinuance of GR until application for Social Security benefits is made. When determining the GR grant amount, the monthly gross amount will count towards the GR budget. This includes situations in which an overpayment is being deducted from the Social Security check.
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- C. Benefits** Benefits are payable due to age (62 years or older), disability (including blindness), or death. Potential recipients of Social Security benefits are disabled or aged persons who have paid into the Social Security System, their spouse and children, and surviving spouse and children of a deceased person who was covered under the Social Security Act.
- Permanent disability is not a prerequisite of Social Security Disability Insurance. Disability need only be expected to last at least 12 months or to result in death. Social Security payment may be made to a person even if he/she is expected to recover from the disability.
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- D. SSI/SSP** Applicants who are disabled or who have a condition that may result in death may also qualify for SSI/SSP even if they did not pay into Social Security. All applicants who have been determined Incapacitated for 12 months or longer or who have been disabled for 12 months or longer must apply for SSI if potential eligibility exists.
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- E. Procedure** When an applicant/recipient appears eligible for Social Security benefits, the applicant/recipient will be referred either to the local Social Security Office (see [Appendix D](#) for a listing of offices and their service areas) or to the SSI Advocate as detailed in [GRPG 90-800](#).
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**F.
Verification/
Information**

The amount of benefits may be verified by viewing the applicant's/ recipient's award letter, the monthly Social Security check, or IEVS abstract.

Information/verification requests from or to SSA are by Form MC 194. The form is to be completed in duplicate. The original is sent to the appropriate Social Security office, and the copy is filed in the case until the original is returned by SSA. All appropriate sections of the form are to be completed thoroughly.

The MC 194 may be taken to the Social Security office by the applicant/recipient, or mailed, with a self-addressed stamped envelope, by the worker.
