

Module V. Related Programs & Services

SSI and SSDI

The Social Security Administration (SSA) has two programs that pay benefits to people with disabilities. For most people, the medical requirements for disability payments are the same under both programs and a person's disability is determined by the same process. While eligibility for Social Security Disability Insurance (SSDI) is based on prior work under Social Security, Supplemental Security Income (SSI) disability payments are made on the basis of financial need.

Supplemental Security Income (SSI) pays benefits to individuals with disabilities based on financial need. Whether a person qualifies to receive SSI depends on what they own and how much income they have. They must also be either age 65 or older, blind, or have a disability and who don't own much or have a lot of income may be eligible for SSI. Children as well as adults can get benefits because of disability. When deciding if a child is disabled, Social Security looks at how his or her disability affects everyday life. People who get SSI usually get food stamps (i.e., in Kansas a "Vision Card") and Medicaid, too.

Social Security Disability Insurance (SSDI) pays benefits to an individual or can also pay benefits to certain members of their family. This type of health care assistance is available to individuals who have worked long enough and recently enough under Social Security. The number of work "credits" you need for disability benefits depends on your age when you became disabled. The amount of earnings required for a credit increases each year as general wage levels rise. Generally you need 20 credits earned in the last 10 years ending with the year you became disabled. However, younger workers may qualify with fewer credits.

Disability under Social Security is based on an individual's inability to work. A person is considered disabled if they cannot do the same kind of work they did before they acquired their disability, and Social Security decides that they cannot adjust to other work because of their medical condition(s). A disability also must last or be expected to last for at least a year or to result in death.

See the SSA web site at http://www.ssa.gov/SSA_Home.html for further information.

Vocational Rehabilitation

A division of SRS, Kansas Rehabilitation Services (KRS) operates the statewide Vocational Rehabilitation (VR) program. VR Counselors work in partnership with people with disabilities to help them assess their skills and interests, to develop individualized plans for employment, and to purchase or arrange for the services they need to become employed. Services are individualized according to each person's disability, strengths, interests, skills, goals and informed choice. Services may include counseling and guidance; training; rehabilitation technology; and job placement.

To receive VR services, you must:

- Have a physical or mental impairment which results in a substantial impediment to employment;
- Be able to benefit, in terms of an employment outcome, from VR services; and
- Require VR services to prepare for, secure, retain or regain employment.
- Individuals who receive Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI) are presumed to be eligible unless there is evidence that they will not be able to benefit from services.

KRS also have a division for people who are Blind and Visually Impaired which offers vocational assistance.

The Food Stamp Program (Vision Card)

The Food Stamp Program is a nutrition assistance program which provides a “Vision” card (a plastic debit card) to eligible persons for use in purchasing food from local grocery stores. The amount an individual has available to spend each month is determined by the EES Specialist. All income and resources must be reported when you apply. Although certain types of income may be excluded, most is counted in determining eligibility and the amount of food stamp benefits for the household. Food stamp income limits go up as household size increases.

Medicare

The Centers for Medicare & Medicaid Services (CMS) administers Medicare, the nation's largest health insurance program, which covers nearly 40 million Americans. Medicare is a health insurance program for people 65 years of age and older, some people with disabilities under 65 years of age, and people with End-Stage Renal Disease (permanent kidney failure treated with dialysis or a transplant).

Medicare has two parts; 1) Part A (Hospital Insurance) which provides coverage when individuals are in hospitals as an inpatient, critical access hospitals (small facilities that give limited outpatient and inpatient services to people in rural areas), skilled nursing facilities, hospice care, and some home health care and; 2) Part B (Medical Insurance) which provides coverage for such things as doctors' services, outpatient hospital care, and some other medical services that Part A does not cover, such as the services of physical and occupational therapists, and some home health care. Part B helps pay for these covered services and supplies when they are medically necessary.

Most people do not have to pay for Part A. Enrolling in part B is optional. Most people pay monthly for Part B, and the current premium in 2002 is \$54.00. It is deducted from an individual's Social Security check. If you get Medicare and have low income and few resources, your state may pay your Medicare premiums and, in some cases, other Medicare expenses such as deductibles and coinsurance.

Medicare beneficiaries who have low income and limited resources may receive help paying for their out-of-pocket medical expenses from their State Medicaid program. There are various benefits

available to "dual eligibles" who are entitled to Medicare and are eligible for some type of Medicaid benefit.

See the Medicare web site at <http://www.medicare.gov> for further information.

Guardianship/Conservatorship

When a person becomes unable to manage his affairs and they have no substitute decision-maker, a guardianship will generally be imposed upon them by the court. Guardianship is the courts' process of determining the competency of a person and providing a substitute decision-maker to care for, personally and/or financially, the incompetent person. These proceedings start when someone files a petition for guardianship for the allegedly "incompetent" person. The Kansas statute which defines the rights and responsibilities of a guardian and/or conservator is K.S.A. 59-3001.

Generally, the guardian of an individual is also their conservator. The distinction between conservatorship and guardianship is that a guardian cares for the personal safety and physical well being of the person receiving such care, or the "ward." Guardians typically deal with issues of room, board, grooming, physical and mental exercise, or medical problems of the ward. A conservator manages the financial resources of the person receiving such financial management, or the "conservatee." Conservators generally handle an individual's finances, taxes, income, debts, real property (land), and personal property (belongings or objects or everything that is not land) of the conservatee. Guardians and/or conservators are not allowed to benefit financially from their interactions with the ward and/or conservatee they represent.

In Kansas, the district court has the jurisdiction to appoint a guardian/conservator. The individuals for whom a guardian or conservator may be appointed are as follow:

A guardian for -

- (1) a disabled person who lacks the capacity to meet essential requirements for such person's physical health or safety, or both;
- (2) a minor.

A conservator for -

- (1) an adult who has filed a petition pursuant to K.S.A. 59-3007 and amendments thereto;
- (2) a disabled person who lacks the capacity to manage such person's financial resources;
- (3) a minor.

Kansas guardianship law defines a "disabled person" as any adult person whose ability to receive and evaluate information effectively or to communicate decisions, or both, is impaired to such an extent that the person lacks the capacity to manage such person's financial resources or, except for reason of indigency, to meet essential requirements for such person's physical health or safety, or both. A person shall not be considered to be disabled or to lack capacity to meet the essential requirements for physical health or safety for the sole reason such person relies upon or is being furnished treatment by spiritual means through prayer, in lieu of medical treatment, in accordance with the

tenets and practices of a recognized church or religious denomination of which such person is a member or adherent.

The Kansas Guardianship Program finds volunteers to act as guardians and/or conservators for individuals in the state that have been adjudicated and found “incompetent.”

Qualifications for KGP services are as follow:

1. Must be an adult (age 18 or older);
2. No appropriate, willing or able family or other individual available to assist the person;
3. Medicaid eligible; or
4. Income no more than 150% of poverty guidelines;
5. Resources do not exceed \$30,000.00.

Social Security Representative Payee

A Social Security representative payee is a person or organization selected to receive cash benefit payments on behalf of a beneficiary. The decision can be made regardless of the legal competency or incompetency of the beneficiary; however, if a beneficiary is legally incompetent, they must have a payee. Convincing evidence of an adult beneficiary's incapability of managing his or her funds must be provided before the SSA will find them to be incapable and in their best interest to designate a representative payee. For a beneficiary age 18 or older, convincing evidence must be provided of his or her inability to manage or direct the management of benefit payments before a representative payee can be selected. The evidence may be medical or legal findings, or “lay” evidence, such as statements of relatives, friends, and other people in a position to know and observe the beneficiary.

The usual order of preference in selecting a payee for a beneficiary 18 or over is as follows:

- A legal guardian, spouse, or other relative who has custody of the beneficiary, or who shows a strong concern for the personal welfare of the beneficiary;
- A friend who has custody of the beneficiary, or who shows strong concern for the beneficiary's personal welfare;
- Any one of the following:
 1. A public or nonprofit agency or institution having custody of the beneficiary;
 2. Federal institution without custody; or
 3. A statutory guardian or voluntary conservator;
- A private institution operated for profit and licensed under State law that has custody of the beneficiary;
- People other than the above who can carry out the responsibilities of a payee and who are able and willing to serve, without reimbursement for services, as a payee for a beneficiary; e.g., members of community groups or organizations who volunteer to serve as a payee for a beneficiary; and
- A friend without custody but who demonstrates a strong concern for the personal welfare of the beneficiary.

Power of Attorney

When you give someone the legal authority to act on your behalf, you are granting power of attorney. A power of attorney is a legal instrument that is used to delegate legal authority to another. The person who signs (executes) a power of attorney is called the “principal.” The power of attorney gives legal authority to another person (called an “agent” or “attorney-in-fact”) to make property, financial and other legal decisions for the principal. A principal can give an agent broad legal authority, or very limited authority. The power of attorney is frequently used to help in the event of a principal's illness or disability, or in legal transactions where the principal cannot be present to sign necessary legal documents. Durable powers of attorney usually grant the broadest powers of all. A durable power of attorney remains effective if you become incapacitated.

A durable power of attorney (DPOA) for health care decisions is a written document in which a person may authorize another person (or agent) to make health care decisions for them in the event that they are unable to speak for themselves. Health care decisions include the power to consent, refuse consent or withdraw consent to any type of medical care, treatment, service or procedure. Unless powers are limited in the durable power of attorney for a health care document, the agent may hire physicians and other health care providers. However, the document may include specific instructions regarding the person’s health care decisions which must be made in accordance with their direction.