

# HOME Choice: Social Security Benefits Q&A

At the Fall 2015 TC, PTCM, HCCM provider training, we have the privilege of having a local Social Security Administration (SSA) Public Relations Specialist come and speak about Social Security Disability Income (SSDI) and Supplemental Security Income (SSI). They provided in-depth information on how to help HOME Choice participants obtain their income promptly when leaving a nursing home. During these presentations, the SSA specialist was able to answer questions that continue to be an issue for Transition Coordinators as they seek to help an individual receive their income as quickly as possible. Below is a list of those questions and the responses that were given.

## **Q: WHAT IS THE PROCESS FOR CHANGING SOCIAL SECURITY PAYEE FROM THE NURSING FACILITY TO THE INDIVIDUAL? OR TO A PAYEE IN THE COMMUNITY? FORMS? TIMELINES?**

Changing Social Security payee from the nursing facility to:

- *An Individual* – Either a letter from the physician on letterhead stating the claimant can handle his/her own affairs or a form from SSA sent to the physician requesting this information. In both situations, a face to face interview with the SSA representative is necessary with valid ID.
- *A payee in the community* – If the payee is going to be an individual, the participant would come into the office with community payee and the application. If the payee is going to be an organization, the organization usually meets with the participant initially and then completes the required documentation and sends it to the SSA office.

## **Q: PAYEE ISSUES: WHAT PAPERWORK NEEDS TO BE COMPLETED BY A FACILITY TO CHANGE WHO GETS MY SOCIAL SECURITY CHECK?**

To change who gets your social security check, a Representative Payee Application ([SSA-11](#)) must be completed. This form can be found on the Social Security website, [www.socialsecurity.gov](http://www.socialsecurity.gov). The [SSA-4164](#) (Advance Notification of Representative Payment) **cannot be accepted via mail or fax**. *This form is only acceptable when signed in front of a SSA representative during an in office interview.*

## **Q: HOW DO WE ENSURE THAT AN INDIVIDUAL'S SOCIAL SECURITY CHECK IS SENT TO THEM/BANK/PAYEE PRIOR TO HAVING MONTHS GO BY IN THE COMMUNITY?**

If the person has a payee, the social security representative will need new payee paperwork. The facility can contact the social security representative if they are payee in advance (before the 15<sup>th</sup> of the month and request SSA to suspend payments). If the transition coordinator believes the participant is capable of managing their own funds, the individual needs to go to the local SSA office and apply. The individual's physician will be mailed a form by the SSA office to confirm the individual's ability to manage their own funds.

Submit the information listed above prior to the 15<sup>th</sup> of the month in order to ensure social security benefits are transferred as quickly as possible. If this information is received timely, it will take affect the following month. If the check was sent to the nursing facility, this will cause a delay and a lump sum to be sent once the correct information is in effect with the SSA office.

## **Q: WHAT PAPERWORK MUST BE COMPLETED IF THE FACILITY WAS MY PAYEE AND I WISH TO CHANGE?**

If the participant doesn't want a payee, they will need to come in to the local social security office and be assessed if they need a payee or not. They can also obtain a written note from a physician indicating the individual is not in need of a payee. If the person just wants to change the payee, the social security representative will contact the current payee (usually by phone) and take a new payee application. Assuming the new person is a good choice, the social security representative can change.

Statement on letterhead expressing the change that needs to take place including the claimant's SSN. There is not an actual form that needs to be completed for this process.

## **Q: WHERE DO WE SUBMIT THE PAPERWORK?**

Submit paperwork to your local Social Security Administration office by mail, fax or drop box. You can find your local SSA office here: <http://www.ssofficelocation.com/ohio-social-security-offices-sos35>

**Q: IF THE NURSING FACILITY GETS MY NEXT SOCIAL SECURITY CHECK AFTER I DISCHARGE, CAN THEY GET THE MONEY TO ME?**

If the person is their own payee, yes the nursing home could give them their check, if not it should be returned to SSA. If the person is not capable of managing their own funds the person should not be given the check. If the facility is more comfortable the transition coordinator can encourage the facility to forward pay the client's bills with the check.

**Q: WHO IS RESPONSIBLE FOR CONTACTING THE SOCIAL SECURITY OFFICE TO MAKE THE CHANGE?**

The individual or the representative payee at the time is responsible for contacting the office to make this change. The transition coordinator can assist the individual with initiating the change.

**Q: HOW MANY MONTHS WILL IT TAKE FOR ME TO GET MY CHECK ONCE THE PAYEE IS NO LONGER THE FACILITY?**

As long as the changes are made by the monthly cutoff date, the check should come timely for the following month. For a direct deposit it will be 3-5 business days after the date of processing, and will be 7-10 business days after the date of processing for paper checks.

**Q: WHO DO WE CONTACT AT THE SOCIAL SECURITY OFFICE TO OBTAIN INFORMATION ON THE STATUS OF MY CHECK?**

Each office assigns different staff to handle the Representative Payee workload. The status of a check can be easily obtained by calling 1-800-772-1213 between 7 AM and 7 PM. If needed, an appointment with the local office can be made. The SSA also takes walk-in appointments. A client can walk into the local office 9-4 Monday, Tuesday, Thursday, Friday and 9-12 Wednesday. The offices are busier on Mondays and Fridays and the beginning of every month. If possible, try to avoid those days for prompter service.

**Q: WHAT DOES "MONTHLY CUTOFF" MEAN?**

There is a specific day each month in which changes need to be made in order for them to take effect timely for the following month. Normally it's the 3<sup>rd</sup> Friday of each month, but this date is derived by the Central Office. *A good estimate of the monthly cutoff date is the 15<sup>th</sup> of each month.*

**Q: WHAT DOES IT MEAN WHEN I HAVE TO BE REEVALUATED FOR MY SOCIAL SECURITY BENEFITS?**

- **Redeterminations** are non-medical reviews of the record for the prior two years to update any information. These are done randomly by a list that is processed monthly by the Social Security.
- **Medical Continuing Determination Reviews** (CDRs) are the medical reviews of the record that are conducted every 1, 3, 5 or 7 years. These are scheduled at the time of the award of benefits. Status for this information is available from the local social security administration office. These are sometimes not completed on time.

**Q: WHAT CAN BE DONE ON LINE?**

The following inquiry and updates can be made to Social security benefits online through the creation of a MySocialSecurity account: Check information, benefits and earnings record, Benefit Verification Letter, change of address, change of phone number, start or change direct deposit, replacement Medicare card, replacement 1099, history of payments

The following SSI benefit information can be reviewed with a mySSA account: Benefit Verification Letter, check information, benefits and earnings record.

To create or open a mySSA account, go to <https://secure.ssa.gov/RIL/SiView.do>