

Judge David L.

BAZELON CENTER

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Supplemental Security Income (SSI) Benefits for Children with Mental Disorders

Supplemental Security Income (SSI) disability benefits are available for children up to age 18 who have physical and mental disorders that result in "marked and severe functional limitations" of substantial duration. The rules regarding the definition of disability for children are different from the rules for adults. For qualified children, SSI pays a monthly stipend designed to help low-income families meet some of the added costs of caring for a child with a disability. In most states, children on SSI are also automatically eligible for Medicaid, which provides access to the comprehensive health care benefits these children need.

The majority of children receiving SSI benefits for mental disabilities are between the ages of 6 and 17.¹ In the 2009 SSI Annual Statistical report, the Social Security Administration (SSA) reports that of nearly 1.2 million children receiving SSI, 639,325 (53.3%) have a mental impairment other than mental retardation.²

The SSA has two general categories for mental impairments: "mental retardation" and "other mental impairments." The latter is a wide-ranging category that includes organic mental disorders, autism and other pervasive developmental disorders (PDD), as well as schizophrenia, anxiety disorders, mood disorders, attention deficit hyperactivity disorder (ADHD) and personality disorders.

Rules Regarding Disability

To be eligible for SSI, a child must have a physical or mental condition that severely limits the ability to function. This condition must also be expected to last longer than 12 months or to result in death.

For the purposes of evaluating disability, the Social Security Administration (SSA) has created a Listing of Mental Impairments with the following diagnostic categories: 1) organic mental disorders; 2) schizophrenic, delusional (paranoid), schizoaffective and other psychotic disorders; 3) mood disorders; 4) mental retardation; 5) anxiety disorders; 6) somatoform, eating and tic disorders; 7) personality disorders; 7) psychoactive substance dependence disorders; 8) autistic disorders and other pervasive developmental disorders; 9) attention deficit hyperactivity disorder; and 10) developmental and emotional disorders of newborn and younger infants.

For children 3 to 18 years old, each listing starts by describing the disorders that fall within that diagnostic category, followed by medical findings that substantiate the diagnosis (called paragraph A criteria) and impairment-related functional limitations (known as paragraph B criteria). Children can qualify if they have one of the conditions listed and it meets these criteria. They can also qualify if there is evidence that functioning is impaired to the level of severity that is equivalent to the standards set by the Listings. Children with multiple disorders often fall into this latter category.

For children under age 3, SSA assesses developmental and emotional disorders using a different structure. The listing for developmental and emotional disorders of newborn and younger infants (0-3) has five criteria, one of which must be met in order to qualify. The evaluation of mental disorders in infants and very young children are based on measures of motor, cognitive/communicative and social functioning. Some disorders may be apparent early in life, but other disorders—like attention-deficit/hyperactivity disorder, tic disorders and learning disorders—may not be first diagnosed until later in childhood or in adolescence.

Financial Eligibility Rules

SSI benefits are only available to low-income children. The [financial rules](#) are the same as for adults.

Application Process

SSA collects detailed information before it awards benefits. Evidence regarding family income and the child's medical history, education and work history (if applicable) must be submitted to SSA before an application is considered.

In addition to medical information from treating providers regarding the child's condition, evidence regarding the child's ability to function is often provided from the following sources:

- Teachers
- Doctors
- Other professionals who have interacted with the child

To ensure the integrity of the application, the SSA contacts medical professionals directly for information pertaining to the child. If the disability examiner considers it necessary, the child will be sent for an independent, consultative medical exam.

Who Makes the Final Decision?

The state in which the child lives is responsible for determining if the child is eligible for SSI benefits. Once all application materials are compiled by SSA, the information is sent to a state agency where doctors and other trained staff determine eligibility.

SSI Disability Review

By law, disability reviews are routinely conducted every three years for children who have conditions that may improve to determine if they still meet criteria for disability. Newborns who qualify because of low birth weight are reviewed by their first birthday if their condition is expected to improve. Disability reviews are less frequent when a child's condition is not expected to improve.

For more information on childhood mental disorders and SSI eligibility visit:

[http://www.ssa.gov/disability/professionals/bluebook/112.00-MentalDisorders-Childhood.htm#112.03%20Schizophrenic,%20Delusional%20\(Paranoid\),%20Schizoaffective,%20and%20Other%20Psychotic%20Disorders](http://www.ssa.gov/disability/professionals/bluebook/112.00-MentalDisorders-Childhood.htm#112.03%20Schizophrenic,%20Delusional%20(Paranoid),%20Schizoaffective,%20and%20Other%20Psychotic%20Disorders).

¹ "A Profile of Children with Disabilities Receiving SSI: Highlights from the National Survey of SSI Children and Families." *The United States Social Security Administration*. Web. 23 Jan. 2011.
<http://www.ssa.gov/policy/docs/ssb/v66n2/v66n2p21.html>.

² "SSI Annual Statistic Report, 2009." Social Security Administration, Sept. 2010. Web. 23 Jan. 2011.
http://www.ssa.gov/policy/docs/statcomps/ssi_asr/2009/ssi_asr09.pdf.