Youth Transitioning out of Foster Care: A New Opportunity to Access SSI Benefits

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New Opportunity: Early SSI Applications for Youth Leaving Foster Care

The Social Security Administration (SSA) recently issued a new policy that could make a huge difference in the lives of youth with disabilities who are leaving foster care. As of August 1, 2016, youth of any age who are leaving foster care for any reason can apply for Supplemental Security Income (SSI) benefits up to six months prior to leaving care (SSA Program Operations Manual System, 2016). SSI benefits provide vital cash assistance to people with disabilities and limited income, so they can afford housing, medical expenses, and other basic necessities. A young person with a disability and no income is eligible for up to $750 per month as of January 2018, but historically most youth in care have not been able to apply before discharge, leading to delays in obtaining benefits. This policy change creates an exciting opportunity for child welfare agencies to support youth by setting them up for benefits they can access without delay at discharge.

Youth transitioning out of foster care are particularly vulnerable, even more so when they have disabilities, and SSI benefits offer a vital source of support. Of all youth who age out of care, approximately 40% are homeless at some point during adulthood (Dworsky & Courtney, 2010). Fewer than half of former foster youth are employed at age 26, and most of those who have a job are not earning a living wage (Courtney, et al., 2011). Families who have recently reunified with their children also face instability in income, housing and employment, and SSI income can help ensure a more stable transition home and prevent unnecessary

Zair’s Story

Zair entered foster care at age 8. He was diagnosed with major depressive disorder, spina bifida, and had significant medical issues. He cycled through numerous foster homes before he was placed with a family with whom he bonded. At age 20, discharge from foster care was imminent, and although he was considered part of the family, his foster parents lacked the resources needed to continue to care for him. He had no other viable family or resources, and without a means to contribute to the household, he was facing homelessness.

Fortunately, Zair was referred to the SSI Outreach Access & Recovery (SOAR) Project, which filed an application for SSI benefits on his behalf. The application was approved before discharge, which meant he could remain in the home. The early application for SSI benefits allowed Zair to avoid homelessness and transition smoothly from foster care to stable housing and a supportive family.
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re-entries into foster care. In Pennsylvania, 24.8% of children who reunified with their families re-entered foster care within 12 months, signaling a need for greater support to achieve lasting reunification (Kids Count, 2016). Up to 80% of children and adolescents enter foster care with a significant mental health need, and one third have a chronic medical condition (Szilagyi, Rosen, Rubin, & Zlotnik, 2015). Not surprisingly, research suggests that youth with disabilities experience even worse outcomes after leaving the system than their non-disabled peers (Anctil, McCubbina, O’Brien, Pecorac, & Anderson-Harumia, 2007; Schmidt, Cunningham, Dalton, Powers, Geenen, & Guadalupe Orozco, 2013; Deutsch et al., 2015). Public benefits, such as SSI, offer an essential source of support for youth leaving foster care to join family or live independently, but far too many youth leave care without benefits or a plan to get benefits in place.

Best Practices for SSI Applications for Youth Leaving Foster Care

SSA’s policy created an opportunity to support youth with disabilities in a new and meaningful way as they leave care. However, awareness of the SSA policy remains low, and applying for SSI benefits is a complicated process that requires interagency collaboration and support for the applicant. Anyone working with youth in care can take advantage of this new opportunity to make sure youth get the stability they need. As child welfare and disability advocates, we developed a toolkit (Community Legal Services, Homeless Advocacy Project, & Juvenile Law Center, 2016) and the following best practice recommendations to help agencies implement the policy:

1. Develop a concrete transition planning protocol for youth in care that includes a specific timeline to prepare and execute the SSI application process. Essential elements for the timeline include screening youth for disabilities and medical conditions, getting updated evaluations and treatment for all conditions, collecting medical and school records, and securing vital documents. While each jurisdiction may adopt a slightly different approach, a timeline is essential to ensure that important milestones are met prior to leaving care. For example, California law requires that youth in foster care be screened for SSI eligibility at age 16.5 and that the application be timed to allow for a determination of eligibility prior to discharge (California Welfare and Institutions Code, 2016). Timelines are most effective when integrated with other processes, such as court hearings leading up to discharge.

2. Incorporate specialists in the transition planning process. Transition planning should incorporate expertise in each substantive area implicated in the transition process. With subjects ranging from transitional housing to SSI, it is unrealistic to think that any one child welfare employee can have the expertise to connect a youth to the many complex programs they will need during their transition. Instead, child welfare agencies should partner with other agencies that have the necessary expertise, such as local legal services organizations, to keep up-to-date with changing laws and best practices. Child welfare agencies may also designate specific staff members to specialize in each substantive area to provide technical advice and expertise. For reunification cases, it is important to incorporate the parent(s) in every step of the transition planning process and ensure they have copies of evaluations and medical, mental health, and treatment records.

3. Create centralized systems to store and share information. Completing a SSI application requires interagency cooperation and information sharing. A successful SSI application includes records from all medical providers, up-to-date evaluations, school records, and information from caretakers who know the youth well. It may be useful to develop an electronic method – such as a health passport – of tracking youth with disabilities, monitoring their health needs, and sharing information between the child welfare
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and healthcare systems. The information that goes into a SSI application is also useful for applications for other programs, such as Medicaid waivers, and gathering and preserving the information in a central location will save time and resources in the future.

4. **Develop a clear distribution of labor and accountability mechanisms to carry out the transition plan.** Distributions of labor may vary greatly among jurisdictions, but clear roles are essential. A key question in applying for SSI benefits is who will complete the application. The child welfare agency may designate one specialist within the agency to complete all applications. Alternatively, the child welfare agency could decide that the caseworker is in the best position to complete the application. In some jurisdictions, the child welfare agency may be able to partner with a SOAR program for assistance in filing the application. After specific roles are assigned, some form of accountability, such as regular team meetings, must be adopted to ensure work is completed.

SSA's new policy has the potential to make a real difference in the lives of foster youth, and the opportunity must be seized. Due to the cross-disciplinary nature of the application process, all stakeholders can play a valuable role in successful implementation of the policy to set youth up for stability and success.

**About the Authors**

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