

UNLOCKING ACCESS

Mitigating Benefits Loss to
Improve Cash Transfer Programs
for SSI Recipients

A Brief from the Aspen Institute Financial
Security Program

AUTHORS

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The Aspen Institute Financial Security Program's (Aspen FSP) mission is to illuminate and solve the most critical financial challenges facing American households and to make financial security for all a top national priority. We aim for nothing less than a more inclusive economy with reduced wealth inequality and shared prosperity. We believe that transformational change requires innovation, trust, leadership, and entrepreneurial thinking. Aspen FSP galvanizes a diverse set of leaders across the public, private, and nonprofit sectors to solve the most critical financial challenges. We do this through deep, deliberate private and public dialogues and by elevating evidence-based research and solutions that will strengthen the financial health and security of financially vulnerable Americans. To learn more, visit AspenFSP.org, join our mailing list at <http://bit.ly/fspnewsletter>, and follow [The Aspen Institute Financial Security Program](#) on LinkedIn.

Executive Summary

For millions of families in the U.S. today, wages do not provide a consistent or sufficient buffer against everyday expenses to sustain financial security, let alone wealth building and economic mobility.¹ When labor income and workplace benefits are not enough, people often utilize public benefits to build resilience, pursue opportunities, and lead economically dignified lives. Yet there are gaps in these systems.² For instance, families may not be able to access programs for which they are eligible; benefits may be insufficient to cover basic needs; or people may lose benefits despite continued eligibility.³

To fill these gaps, cities, counties, and states across the U.S. are offering cash transfer programs. Unfortunately, state and local governments are increasingly confronting pain points between existing public benefits programs and emerging cash programs and pilots. To better understand the tension between programs providing cash, the Aspen Institute Financial Security Program in partnership with the Resilient Families Hub convened a working group on Interactions between Direct Cash Interventions & Public Benefits Systems.⁴ The working group was composed of state agency and human services leaders as well as city and county administrators of direct cash transfer programs from across the country. Additionally, policy and legal experts from nonprofits, think tanks, and legal aid organizations joined individual sessions as guest speakers.

The working group found many frictions between public benefits and direct cash transfer programs, perhaps none more so than with Supplemental Security Income (SSI). SSI provides monthly cash assistance to some of the most vulnerable members of our society: children and adults who have limited or no income and assets and either have a disability or are aged 65 or older. Due to their age or health condition, recipients of SSI have limited ability to earn income and are thus one of the groups that could benefit most from nascent direct cash programs. Yet, with limited exceptions, SSI counts all resources, income, and other support applicants receive to determine eligibility. Without protections in place, SSI recipients participating in direct cash transfer programs experience a dollar-for-dollar reduction in their monthly SSI benefit amount and could risk losing SSI benefits entirely, limiting the ability of cash programs to support the needs of people experiencing the highest levels of financial insecurity in the U.S.

This report examines current challenges of including SSI participants in direct cash programs; details takeaways from a working group meeting with Social Security Administration (SSA) representatives; and explores opportunities to remove barriers to including SSI recipients in cash programs that can provide needed financial support.

Key Takeaways

- Direct cash transfer programs need clear and timely policy guidance on how program payments will be treated for the purposes of determining SSI eligibility and benefit amounts.
- State and local partners running direct cash transfer programs need greater clarity on who to reach out to within SSA for technical assistance and to determine whether their programs meet the criteria for a statutory exclusion.
- State and local partners face significant administrative burden navigating state and federal bureaucracy to determine what exemptions are possible to prevent the loss of other public benefits for participants. Complex and conflicting program rules require a program-by-program analysis.

While SSA can address some of the existing barriers identified by working group members to better support SSI participants and public administrators, additional reform will require federal policy change. Federal policymakers could further mitigate benefits reduction and loss for SSI beneficiaries who participate in direct cash transfer programs to ensure that benefits are coordinated and boost families' financial stability.

SSI beneficiaries—which include people with significant disabilities and older adults with very low incomes—are regularly unable to participate in direct cash programs that could improve their ability to make ends meet. Though this report focuses on SSI, these issues show up in different ways for recipients of other types of public benefits. If we hope to create more opportunities for financial security, we must contend with the myriad ways that existing public benefits rules are misaligned with policy goals and take steps to unlock cash and benefit programs for families who have been left behind for too long.

Introduction

Families need a sufficient combination of three factors to achieve financial security: (1) routinely positive cash flow, where income typically exceeds expenses; (2) personal resources, such as savings and other financial cushions; and (3) public and private benefits, such as health insurance, housing vouchers, and cash programs.⁵ Unfortunately, for millions of families in the U.S. today, wages and benefits are not providing a consistent or sufficient buffer against everyday expenses to sustain financial security, let alone wealth building and economic mobility.⁶

Public benefits, such as the Supplemental Nutrition Assistance Program (SNAP), Supplemental Security Income (SSI), and Medicaid, provide foundational support to millions of people with low incomes. These programs may supplement income, offset basic expenses, and/or provide health coverage. Public benefits also help address hunger, reduce poverty for people who are unable to support themselves through work, and lift millions of families above the poverty line. The U.S. Census Bureau estimates that in 2023, public benefits including SSI and SNAP raised more than 34 million people out of poverty.⁷

Public benefits do not currently reach all eligible families

Despite these positive outcomes, there are significant gaps in public benefits. According to one recent estimate, more than \$140 billion in government benefits go unclaimed annually.⁸ While some programs are open to anyone who meets the eligibility criteria, others have limited funding and instead distribute the available resources via lotteries or other systems, meaning that eligibility alone does not determine whether a person receives benefits. Instead of working in tandem, these programs are frequently misaligned, making them difficult to navigate with differing eligibility criteria and requirements. Families may also churn off programs despite ongoing eligibility, or they may decide not to apply due to arduous application or recertification processes. Families may do their best to navigate these complexities and predict the impact of life events—such as moving or job transitions—on the benefits they receive, but the current system is underperforming for families and results in an uneven support system.⁹

Direct cash transfer programs—some of which are operated as pilots—are often designed to meet needs and fill the current gaps in public benefits, providing individuals and families with cash to meet everyday needs, reduce poverty, and increase financial stability. While programs differ in frequency (one-time or recurring), duration, and amount and may have certain eligibility requirements—such as living in a particular place or being a parent—most direct cash programs offer unrestricted and unconditional income support, meaning that families can use the cash in whatever way is best for them without other requirements or contingencies.

These direct cash interventions should layer on top of public benefits and other household income, resulting in a cumulative and coordinated effort to boost routinely positive cash flow and family financial stability. Whether a person is earning more through increased wages, scraping together savings, or receiving other time-limited, means-tested financial assistance, the value of a household's combined financial resources should help set a family up for a financially secure future.

However, all too often, the eligibility and program rules governing public benefits create “benefits cliffs,” which may cause people to pass up a promotion or raise that could result in a net loss of household income due to a decrease or complete loss of benefits. The additional income provided by direct cash transfers can result in a similar loss or reduction of benefits, sometimes outweighing the size of the cash transfer itself. Likewise, some public benefit programs have stringent resource limits, also known as asset limits, that may not allow even modest savings—savings that we know families need to achieve and maintain economic stability amid life’s expected and unexpected expenses.

As direct cash transfer programs have become a more robust presence in the U.S., state and local governments are increasingly confronting pain points with public benefits, such as families being kicked off or seeing reductions in benefits, people deciding not to participate in direct cash programs, and cash program administrators having trouble serving the people that would benefit most from participation.

Cumbersome program rules undermine financial security for participants and add complexity for program administrators

The complexity of eligibility rules and regulations across programs makes it difficult for families to understand and navigate benefits interactions. Initial income eligibility guidelines, redetermination timelines, definitions of countable income and assets, and the effect of income increases on benefits are treated differently across programs. Moreover, state administration also drives public benefit program variation, meaning the same program can have different rules depending on the state, adding additional complexity for cash programs to navigate. As a result, efforts intended to support families and improve well-being and household financial stability risk running afoul of existing public benefit rules and negatively impacting benefits depending on program design and location. Public benefit programs are unaligned and complicated to begin with, and participation in direct cash programs often adds to that complexity for people and families receiving benefits.

As a result, benefits administrators must do a program-by-program assessment to determine how direct cash transfers might impact other benefit programs and whether state options or other federal flexibilities may be used to minimize benefits interactions. The funding source of the program, the frequency and duration of the payments, and state law and regulation may all be factors in determining how state administrators treat direct cash payments for the purposes of determining benefits eligibility and which state options are available to prevent benefits loss. In a state with a significant number of direct cash transfer pilots and programs, that translates to more staff time and resources devoted to reviewing program design, assessing benefits impact, seeking federal approval, guidance or waivers, and issuing policy guidance or providing other notices to participants and caseworkers.

The Direct Cash Interventions & Public Benefits Systems Working Group

To better understand the tensions between programs providing cash and public benefits—and identify options and opportunities for resolving programmatic conflicts—the Aspen Institute Financial Security Program (Aspen FSP) in partnership with the Resilient Families Hub, a federal initiative within the U.S. Department of Health and Human Services' Administration for Children and Families, convened a working group on Interactions between Direct Cash Interventions & Public Benefits Systems. The working group was composed of state agency and human services leaders, as well as city and county administrators of direct cash transfer programs from across the country.

The working group found many frictions between public benefits and direct cash transfer programs, perhaps none more so than with SSI. Many public administrators have requested clarification from the Social Security Administration (SSA) to ensure that people with disabilities receiving SSI do not risk losing their benefits when enrolled in direct cash transfer programs. Yet working group members identified ongoing challenges to mitigating negative benefits interactions between direct cash programs and SSI. While some pilots have successfully secured exemptions, pilot administrators continue to express concerns about the lack of clarity around how direct cash payments in various forms are treated in income and resource determinations for SSI and which mechanisms under current law can mitigate benefits reduction and/or loss. This report describes Supplemental Security Income, the challenges of including SSI recipients in direct cash transfer programs, and the opportunities to expand the reach of and access to direct cash programs for SSI recipients.

► How the working group operated

The working group convened 55 members representing 21 states and the District of Columbia over six sessions from July to December 2024. They discussed ongoing challenges to cash interventions, such as implementing strategies to mitigate the loss of key public benefits including SNAP, SSI, and Medicaid, and the IRS treatment of direct cash transfer program payments. Additionally, policy and legal experts from nonprofits, think tanks, and legal aid organizations joined individual sessions as guest speakers.

Public administrators are often best positioned to address negative interaction through policy and programmatic responses that minimize and prevent the loss of public benefits for participants. These strategies can vary considerably due to the distinct rules of benefits programs, funding structure of cash interventions, and specific policy choices of local governments. As such, the working group provided a unique opportunity to advance peer learning, surface common challenges and transferable solutions, and identify implications of these strategies for the broader systems change necessary to support household financial security and resilience.

What is Supplemental Security Income?

SSI, a program created in 1972 and administered by SSA, provides monthly cash assistance to some of the people most at risk of living in deep poverty: children and adults who have limited or no income and assets and either have a serious disability or are aged 65 or older. The program served more than 7.4 million people in November 2024, approximately 1 million of whom were children.¹⁰ SSI provides critical assistance to people who cannot work or face significant barriers to supporting themselves through work. The majority of beneficiaries do not have income from any other sources, and 84 percent of SSI participants have a serious disability.¹¹ People with disabilities are more than twice as likely to live in poverty than people without disabilities.¹²

Additionally, in most states, Medicaid eligibility is linked to SSI eligibility,¹³ meaning that SSI confers both the income and health care recipients rely on to meet basic needs and live independently. For many, in addition to basic health care, Medicaid also covers other essential supports and services that can be critical for disabled and older adults, such as wheelchairs and other mobility aids, personal care attendants and supportive housing services, and transportation services to get to medical appointments. Few have alternative routes to accessing these types of supports and services.

The process to qualify for SSI is lengthy, complex, and burdensome

The eligibility criteria for SSI are difficult to meet, and as a result, most SSI applicants are denied.¹⁴ Individuals must meet rigid financial qualifications for income and assets, as well as strict medical criteria, to qualify. In addition to SSI's income and asset restrictions, adult applicants also have to prove that they are unable to support themselves through work.¹⁵ Applicants must provide extensive medical evidence to establish that their disability meets SSA's disability definition, proving they have a disability that will either significantly limit their ability to work for a year or more or will result in death.¹⁶ These strict and complicated criteria, together with a 23-page application—which cannot be fully completed online—can be challenging even for attorneys to navigate, making for a burdensome application process requiring extensive paperwork.

For those able to make it through the application process, the wait time to receive a determination for the program is often lengthy, and more people are denied than approved each year.¹⁷ SSA's Office of the Chief Actuary found that most applicants have to wait on average eight months for a disability decision, backlogs that have only increased after years of insufficient administrative funding for SSA.¹⁸ Many applicants are initially denied for SSI and then have to navigate a lengthy appeals process—which takes nearly another eight months—before ultimately being found eligible for benefits.¹⁹ Throughout this process, many people give up or are forced to file for bankruptcy, and others die waiting.²⁰ In 2023 alone, an estimated 30,000 people died waiting for the agency to determine whether they were eligible for Social Security Disability Insurance or SSI disability benefits.²¹

SSI is essential for those who receive it, but on its own, the support is insufficient

Despite the arduous process individuals must navigate to qualify for SSI, these benefits still keep recipients well below the federal poverty line. The average monthly payment was just \$700 in 2024, and in 2025, the maximum

monthly payment possible for a single person is \$967 and \$1,450 for a couple, roughly three quarters of the federal poverty level.²² Families do not typically receive the maximum amount as nearly all other sources of income reduce the SSI monthly benefit.²³ Because SSI benefits are so modest, most recipients rely on other benefits such as SNAP and Medicaid to make ends meet.²⁴

Even after being found eligible, SSI recipients must go to significant lengths to maintain eligibility for benefits. For instance, they must report any changes to their income, resources, marital status, and living situation, and these can then impact the benefit amount that they may receive.²⁵ Many beneficiaries must also navigate re-assessments of their medical eligibility, even those living with degenerative diseases or disabilities that will not improve.²⁶ If individuals mistakenly miss paperwork deadlines—and in many cases, even if they do everything right and faithfully report all changes—they may have benefits suspended or stopped altogether, or they may end up with overpayments that can further complicate eligibility and result in additional paperwork and administrative burden.²⁷ As a result, many SSI recipients are discouraged from seeking out available options that could help them meet basic needs for fear of jeopardizing the SSI benefits they rely on to survive.

Receiving cash transfers is risky for SSI participants

The monthly benefits from SSI, and the link to health insurance for many recipients, make the program a vital lifeline. Without specific protections against losing part or the entirety of their SSI benefits, recipients face significant uncertainty and risks from participating in direct cash transfer programs and pilots. These risks stem from:

- **Income rules.** SSI disregards the first \$65 of monthly earnings, an amount not updated since the program's launch in 1972. Thereafter, for every \$2 earned, SSI recipients lose approximately \$1 of their monthly benefit.²⁸ This creates a significant benefits cliff for beneficiaries seeking to test their capacity to work or working sporadically or part-time. Direct cash transfers can result in a similar loss or reduction of SSI benefits. The federal law governing income eligibility for SSI uses a broad definition for unearned income, which means that most cash payments, such as those from a direct cash transfer program, will be counted for the purpose of determining SSI eligibility and benefit amounts.²⁹ SSI recipients participating in direct cash transfer programs experience a dollar-for-dollar reduction in monthly SSI benefit amount and could risk losing benefits entirely.³⁰ Exceeding SSI's outdated income limits is a leading cause of SSI payment suspensions and terminations.³¹
- **Resource limits.** SSI limits the resources, or assets, such as savings that individuals can have while receiving SSI. This limit for countable resources, with some exceptions, is only \$2,000 for an individual and just \$3,000 for a couple, creating a penalty for married couples.³² This resource limit is woefully out of date—last updated in 1989 and never adjusted for inflation in the decades since. Families need far more savings on hand to cover a typical large expense, including medical costs which people with disabilities and older adults are likely to incur. This low limit penalizes

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people for managing to save, causes people to churn off the program despite ongoing need, and is burdensome for SSA staff to monitor monthly.

- **Medicaid eligibility.** In most states, SSI eligibility confers automatic Medicaid eligibility, which means that SSI recipients enrolled in direct cash transfer programs may not only risk the loss of critical financial benefits but also needed coverage for medical care and supportive services. Interruptions in Medicaid eligibility can in many cases be even more catastrophic for people with disabilities and serious health conditions than interruptions in the financial support SSI provides due to the high costs of medical care.
- **Overpayment.** An SSI overpayment can occur for a number of reasons, including changes to a recipient's income, resources, or marital status.³³ Overpayments can take months or longer to be identified, even if changes are faithfully reported by beneficiaries. In the case of cash transfer programs, SSI participants may face risk of overpayment if it is later determined that cash transfer program payments should have reduced their SSI benefits. Overpayments can be thousands of dollars by the time they are identified by SSA, pushing families deeper into poverty, placing undue stress on people already struggling to get by, and in many cases leading to reduced benefits when SSA seeks to recoup the funds.³⁴ In fiscal year 2023, approximately 1 in every 6 SSI recipients received an overpayment notice.³⁵

Given these risks, people receiving SSI are often understandably unwilling to participate in direct cash programs—even if the additional cash could help them better support their family or improve their financial security in the short term. As a result, direct cash transfers systematically leave out the people who would most benefit from participation. However, the Aspen FSP-Resilient Families Hub working group found that, with a combination of policy reforms and process improvements, direct cash transfers could be a critical tool to further boost the financial stability and dignity of people with disabilities and older adults in a way that SSI's benefits alone cannot.

Direct cash transfer pilots struggle to serve SSI recipients

Due to the significant risk to SSI recipients, direct cash transfer pilot administrators have employed a variety of strategies to minimize harm such as: requesting clarification from SSA to determine if their programs meet the criteria for an exclusion; designing programs that exclude people receiving SSI from eligibility; and/or offering benefits counseling so that participants negatively impacted by this interaction can choose to opt out of programs prior to enrollment.

Without a systematic approach to addressing benefits interactions with direct cash, people who could greatly benefit from direct cash innovations are routinely left behind. There are two primary ways that this exclusion happens in practice. Cash program administrators make intentional decisions around program design and have in certain instances excluded people receiving SSI as part of the eligibility criteria in an attempt to minimize impact or harm. Alternatively, for pilots where SSI recipients are not excluded, potential participants have opted out on their own after talking with a benefits counselor and/or after better understanding the reduction or loss of their SSI benefits if they enrolled.

► SSI recipients have opted out of cash programs

Flint, Michigan, launched Rx Kids,³⁶ an innovative direct cash program in January 2024. The program is the nation's first citywide maternal and infant cash prescription program. Every expectant mom in Flint receives \$1,500 during pregnancy and \$6,000 for newborns (\$500 a month until their baby's first birthday).

Rx Kids is a public-private partnership with support from state, federal, and private philanthropic dollars, and to date, over \$3 million has been prescribed to over 1,000 mothers. According to Rx Kids program administrators, participating moms are showing improved mental health; families' financial security has increased; and extreme poverty among families with infants in Flint, Michigan, was eradicated.³⁷

The program has achieved a near 100 percent uptake rate for Flint newborns. The sole exception are families with maternal or infant disabilities (often premature babies) who did not enroll because they do not want to lose their SSI benefit. Rx Kids is a place-based universal program, yet it does not reach the families who need the most support due to the reduction and possible loss of critical SSI benefits and Medicaid coverage obtained through SSI eligibility.

Local and state administrators are increasingly experimenting with direct cash interventions to support people and families with low incomes and seeking dedicated funding sources to sustain these programs. Publicly funded direct cash transfers have been funded by State and Local Fiscal Recovery Funds (SLFRF) from the American Rescue Plan Act (ARPA), state general revenue funds, Temporary Assistance for Needy Families (TANF), Non-Recurrent Short-Term Benefits (NRST)³⁸ and a mix of public and private dollars. The structure of the cash transfer program and the funding source are both factors in determining whether payments will be counted for the purposes of income and resource determinations for SSI and which mechanisms are available to mitigate the reduction or loss of SSI benefits.

Lessons from a working group meeting with SSA representatives

Public administrators shared their experiences with representatives from SSA in a working group session about SSI interactions with direct cash programs. Together, they discussed past and ongoing challenges securing disaster assistance exemptions, as well as other mechanisms to exclude direct cash payments from SSI income determinations. The following themes emerged:

- Pandemic-related disaster assistance exclusions were widely used for direct cash transfer programs funded by ARPA, but they faced administrative challenges and will not be available when funding expires.

- Assistance based on need (ABON) exclusions are an underutilized tool for aligning cash programs and SSI, but administrative challenges remain.
- SNAP and SSI contain conflicting eligibility rules, making it difficult for cash programs to support beneficiaries of both programs.

Pandemic-related disaster assistance exclusions

To date, the pandemic-related disaster assistance exclusion is the primary way pilots have exempted cash transfer program payments from being considered income and resources for SSI eligibility and benefit amount determinations.³⁹ In fact, it's the only option working group members broadly understood was available to them.

There is significant concern among program administrators that with ARPA funding expiring, pilots may no longer be able to use this mechanism to mitigate the impact of direct cash transfers from their programs on SSI, which may have significant implications for participants receiving SSI.

Working group members shared their experience trying to secure confirmation from SSA that their direct cash transfer program payments would qualify for a disaster assistance exclusion. They identified these key learnings:

- The process to confirm an exemption from SSA may take up to seven months from initial request to receiving written confirmation from the agency.
- The value of such an exemption is significantly diminished if it is not confirmed before program enrollment begins. People receiving SSI will make the decision about whether to participate in the program based on the likely impact on their SSI payments. If payments are significantly decreased or program eligibility is lost, many SSI recipients will opt out of direct cash transfer programs.
- The decision points and criteria SSA uses to determine whether programs qualify for disaster assistance exclusions are unclear and inconsistent. In practice, this means that direct cash transfer programs cannot assume that using prior pilot approaches to receive the exemption will work for their programs.

Assistance based on need (ABON)

Another mechanism working group members explored was structuring programs so that cash payments meet SSA's definition of assistance based on need (ABON). ABON is considered excluded unearned income for the purpose of determining SSI eligibility and benefit amounts. Assistance is considered as ABON when income is a factor of eligibility and the program is funded entirely by a state, a political subdivision of a state such as a county or a city, or some combination of such jurisdictions. The assistance based on need exclusion does not include payments under a federal/state grant program such as TANF.⁴⁰ Notably, ABON is excluded from income but if the funds are retained into the next month, they are considered a countable resource subject to SSI's resource limit.

Despite the relatively clear definition of ABON in statute and regulation, there was no precedent for aligning guaranteed income pilot payments and overall program design with that definition to ensure that payments would be excluded from SSI income determinations.⁴¹ A number of working group members had submitted requests to SSA

to provide confirmation that payments from their direct cash transfer programs would meet the definition of ABON, but no program had received that confirmation prior to the working group session.

During the working group session, SSA representatives also confirmed that direct cash transfer programs could bifurcate their programs to meet the definition of ABON, meaning that a program may consider paying participants from two distinct funding sources. Program administrators could structure a direct cash transfer in such a way that payments to SSI recipients are entirely funded by the state (or a political subdivision of the state) while payments to other recipients, who are not subject to the same ABON restrictions, are funded by a mix of public and private funds.

Program administrators are confronted with a tradeoff between SSI and SNAP

Most administrators utilizing some public funds for guaranteed income pilots also utilize private funds donated by philanthropic organizations as the inclusion of private dollars is necessary to prevent impacts on SNAP.

The practice of direct cash programs mixing public and private funds highlights a point of misalignment in the income eligibility determinations between SNAP and SSI. While including private dollars threatens to eliminate the possibility that payments will be excluded from SSI as it would no longer meet the definition of ABON, private dollars must be included to protect SNAP receipt. Many administrators of direct cash programs have included private funds expressly for this purpose.

While SSA representatives confirmed that programs could bifurcate the funding source of their payments to reduce impact on both SSI and SNAP for more participants, the SNAP and SSI tradeoff still exists on an individual level for people receiving both SSI and SNAP. While the program may be able to take steps to prevent the loss of both SNAP and SSI, recipients of SSI will still see a reduction in their SNAP benefits under this scenario. Nearly six in 10 SSI participants also receive support from SNAP, and any reduction in benefits is risky for SSI recipients who are already likely to live below the poverty line.⁴²

Key takeaways about barriers to SSI participation in direct cash transfers

The following takeaways emerged from the listening session with working group members and representatives from SSA:

- Direct cash transfer programs need clear policy guidance on how program payments will be treated for the purposes of determining SSI eligibility and benefit amounts.
- State and local partners running direct cash transfer programs need greater clarity on who to contact within SSA for technical assistance and to determine whether their programs meet the criteria for a statutory exclusion.
- Even if direct cash transfer and guaranteed income programs do not require official approval to confirm their payments meet the definition of ABON, implementers need to know if recipients will be impacted in advance in order to appropriately inform participants.

- State and local partners face significant administrative burdens navigating state and federal bureaucracy to determine what waivers or exemptions can prevent the loss of other public benefits for participants. Complex and conflicting program rules require a program-by-program analysis.
- Timely responses from SSA are extremely important. Delayed responses create challenges for program administrators and can result in SSI recipients opting out of programs, in some instances prematurely or unnecessarily.

Following the working group session, a number of public administrators received responses from SSA confirming that payments from their direct cash transfer programs would be excluded from SSI income determinations. SSA confirmed that multiple state and local programs met the statutory exclusion or the definition of ABON. Additionally, following the working group session, SSA released an FAQ further clarifying how direct cash transfers in various forms will be treated for SSI income and resource determinations.

Other income exclusions

There are a number of other income exemptions⁴³ that may be relevant for direct cash transfer programs seeking to exempt payments from consideration from SSI income and resource determinations, including:

- Assistance received under the Disaster Relief and Emergency Assistance Act and assistance provided under any federal statute because of a catastrophe which the President of the United States declares to be a major disaster.⁴⁴
- Payments received from a fund established by a state to aid victims of crime.⁴⁵
- Certain types of housing assistance.⁴⁶
- Any portion of a grant scholarship, fellowship, or gift used or set aside for paying tuition, fees, or other necessary educational expenses.⁴⁷ (It's important to note that any portion set aside or used for food or shelter does count towards income and resource determinations.)

The working group members did not fully explore these options, nor is there necessarily consistent use or precedent for use among direct cash transfer programs, but they are worth investigating further.

To advance family financial security, we need clarity on public benefits and direct cash interactions

Working group members identified several other ways SSA could improve processes and procedures that better align SSI with cash programs. Addressing each of these barriers through regulation could further mitigate the reduction and loss of SSI benefits for participants of direct cash transfer programs and provide clarity to public administrators running cash programs:

- **Extend the definition of ABON to include programs partially funded by states and local governments.** The use of ABON is currently limited to direct cash programs that are “wholly” funded by a state or a political subdivision of the state which means that programs that are privately funded or funded with a mix of public and private funds have limited to no mechanisms available to prevent the loss and reduction of SSI.
- **Exclude ABON from both income and resource determinations.** While pandemic-related disaster assistance exclusions granted by SSA effectively excluded direct cash transfers from being considered as income or resources for SSI eligibility determinations, the same broad protections do not apply to other mechanisms. Confirming that a direct cash transfer program conforms to the ABON policy, for example, ensures that payments will not be counted as income, but any payment retained in the following month is counted as a resource, which could impact a person’s eligibility if they surpass the resource limit.
- **Clarify that all state-funded TANF Maintenance of Effort (MOE) spending meets the definition of ABON.** There is a lack of clarity on how TANF is treated for the purposes of SSI. While TANF cash assistance or family grants are likely to impact SSI payments, programs may be able to design certain TANF-funded direct cash programs (particularly those structured as non-recurrent short-term benefits) to meet the definition of ABON. Regardless, the current policy reflected in the Program Operations Manual System (POMS)^{48,49} is vague and does not provide clear guidance for state administrators.

While SSA can address some of the existing barriers identified by working group members to better support SSI participants and public administrators, additional reform will require federal policy change. Federal policy makers could further mitigate benefits reduction and loss for participants of publicly funded direct cash programs to ensure that benefits are cumulative, coordinated, and boost families’ financial stability by prioritizing legislative policy change to:

- Increase the resource limit for SSI and index the limits to the Consumer Price Index to ensure they keep pace with inflation moving forward.
- Exclude publicly funded direct cash payments from consideration for SNAP income and asset determinations.
- Assess and streamline public benefits eligibility criteria to improve the administrability of programs and beneficiaries’ customer experience.

Though this report focuses on SSI, these issues show up in different ways for other public benefits. If we hope to create more opportunities for financial security, we must contend with the ways that benefit program rules are misaligned with policy goals and unlock cash and benefit programs for individuals and families that have been left behind for too long.

Technical Appendix

The following technical appendix outlines mechanisms that exist under current rules to mitigate negative interactions between direct cash transfer program payments and SSI.

Interventional Cooperative Agreement Program

The [Interventional Cooperative Agreement Program \(ICAP\)](#) allows the Social Security Administration (SSA) to enter into cooperative agreements to collaborate with states, foundations, and other non-federal groups and organizations who have the interest and ability to identify, operate, and evaluate interventional research related to the Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI) programs.⁵⁰ SSA has the ability to implement waivers to exclude payments from direct cash transfer programs that are formal demonstrations under ICAP from income and resources for the purpose of SSI eligibility and benefit amount determinations for SSI. Resource exclusions may be limited to a certain period of time.

A notable example of a guaranteed income pilot that has entered into a cooperative agreement with SSA to prevent the loss of SSI for participants is the [Guaranteed Income Financial Treatment Trial \(GIFTT\)](#).⁵¹ GIFTT is a 12-month, randomized controlled trial to compare the effectiveness of monthly unconditional cash transfers to treatment as usual in reducing financial toxicity in people with cancer who have low income.⁵² While ICAP is an option for direct cash transfer pilots that want to focus on testing interventions for people receiving SSI and SSDI, the process can be time consuming, administratively burdensome, and costly. The pilot must also align with SSA's research priorities and be selected in a competitive application process. For these reasons, a cooperative agreement through ICAP is not a feasible option for most pilots.

Pandemic-related disaster assistance

Per [20 CFR 416.1124\(c\)\(5\)](#) assistance received under the Disaster Relief and Emergency Assistance Act and assistance provided under any federal statute because of a catastrophe which the President of the United States declares to be a major disaster is excluded as income for SSI.⁵³ Many state and local governments funded direct cash transfer programs with State and Local Fiscal Recovery Funds (SLFRF) from the American Rescue Plan Act (ARPA) to support families impacted by the COVID-19 pandemic. A number of these programs requested that SSA exempt the direct cash transfers from their programs from income and resource calculations for SSI. SSA confirmed a number of pandemic-related disaster assistance exemptions via EM-20014 REV 9. The emergency message (EM) provides guidance on the Supplemental Security Income (SSI) income and resource treatment of common types of assistance individuals may receive or have received due to the COVID-19 pandemic. Fourteen cash assistance programs from nine different states are listed in this EM. Notably, not all pilots funded with ARPA were able to confirm disaster assistance exemptions and recently SSA seemed to further limit the opportunity for states to request and receive exemptions for cash transfer programs funded with ARPA dollars.

SSA's EM-21050 REV 5: Special Processing Instructions for Applying Supplemental Security Income (SSI) Income and Resource Exclusions to Pandemic-related Disaster Assistance provided some clarity on the treatment of ARPA funded pilots but noted that exemptions for pandemic related disaster assistance made after May 11, 2023, will be "evaluated on a case-by-case basis."

Assistance based on need (ABON)

Per federal statute, SSI excludes unearned income that is “assistance, furnished to or on behalf of such individual (and spouse) which is based on need and furnished by any State or political subdivision of a State.”⁵⁴ The implementing regulation⁵⁵ further defines income exclusions for SSI including assistance based on need (ABON). Assistance based on need is considered excluded unearned income for the purpose of determining SSI eligibility and benefit amounts.

Assistance based on need (ABON) is defined as assistance:

- provided under a program which uses income as a factor of eligibility; and
- funded wholly⁵⁶ by a state, a political subdivision of a state, or a combination of such jurisdictions.⁵⁷

Notably, assistance based on need (ABON) is excluded from income but if it is retained into the next month, it is considered a countable resource. The limit for countable resources for SSI is \$2,000 for an individual and \$3,000 for a couple.⁵⁸

For technical assistance or to receive confirmation from SSA that a direct cash transfer program design conforms to the ABON policy, program administrators should contact the appropriate regional communications director.⁵⁹

Confirming that payments from a particular direct cash program meet the definition of ABON is a different process and internal procedure than granting an exemption (like the pandemic-related disaster assistance exemptions). Once SSA confirms that payments from a particular program meet the definition of ABON, the program is added to an internal precedent file which all SSA staff, including local case managers can reference. Unlike the programs that were granted pandemic-related disaster assistance exemptions, the full list of programs confirmed to meet the definition of ABON is not publicly posted in the Program Operations Manual System. The POMS is the primary source of information that SSA employees use to process claims for Social Security benefits, it includes detailed instructions on how to evaluate eligibility, determine benefit amounts, and manage different aspects of benefits administration.

TANF as assistance based on need (ABON)

The assistance based on need exclusion does not include payments under a federal/state grant program such as Temporary Assistance for Needy Families (TANF).⁶⁰ However, SSA notes that there are many different programs that fall under TANF besides the TANF family grants and because states design their own programs, some programs are funded with state-only money. The type of program and the funding source are the keys to determining how the program is treated for SSI purposes.⁶¹ So for example, if a direct cash transfer program was created by TANF non-recurrent short-term benefits⁶² that were entirely funded by state funds, the payments may meet the definition of ABON while if the program was funded by non-recurrent short term benefits funded by the TANF federal block grant or with a mix of public and private funds, the program would not meet the definition of ABON.

Refundable State and Local Tax Credits

SSA released an Emergency Message ([EM-24034](#)) with guidance on the Treatment of Refundable State and Local Tax Credits as assistance based on need (ABON). The guidance clarified that a refund or advance payment from a refundable state or local tax credit should be excluded from income as ABON if the assistance is provided under a program which uses income as a factor of eligibility and is funded wholly by a state, a political subdivision of a state, or a combination of such jurisdictions.

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