
**OFFICE OF
THE INSPECTOR GENERAL**

SOCIAL SECURITY ADMINISTRATION

**SUPPLEMENTAL SECURITY INCOME
PAYMENTS TO PARENTS OR RELATIVES
NOT SUPPORTING CHILDREN**

December 2009 A-01-09-29113

AUDIT REPORT



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SOCIAL SECURITY

MEMORANDUM

Date: December 28, 2009

Refer To:

To: The Commissioner

From: Inspector General

Subject: Supplemental Security Income Payments to Parents or Relatives Not Supporting Children (A-01-09-29113)

OBJECTIVE

The objective of our review was to assess the Social Security Administration's (SSA) payment of Supplemental Security Income (SSI) to parents or relatives serving as representative payees for children they were not supporting.

BACKGROUND

The SSI program is intended to be a program of last resort. It is a nation-wide, Federal cash assistance program administered by SSA that provides a minimum level of income to financially needy individuals who are aged, blind, or disabled.¹

Generally, residents of public institutions are not eligible for SSI payments. However, in some cases, SSI recipients under age 18 remain eligible for payments while residing in institutions. For example, children participating in educational or vocational training programs may remain eligible for payments while residing in institutions. In these cases, the children are not considered residents of public institutions for purposes of determining SSI eligibility—and remain eligible for SSI while residing in the institutions. Additionally, children residing in noninstitutional care, such as foster care homes, may remain eligible for SSI payments. Furthermore, while residing in the institutions or foster care homes, the children's basic needs, such as food and shelter, may be provided by a third party—and not the children's parents.

Under the *Individuals with Disabilities Education Improvement Act of 2004*, all children with disabilities are entitled to a free, appropriate public education.² "If placement in a public or private residential program is necessary to provide special education and related services to a child with a disability, the program, including non-medical care and

¹ The *Social Security Act* § 1601 *et seq.*, 42 U.S.C. § 1381 *et seq.*

² Pub. L. No. 108-446 §§ 612(a)(1) and 612(a)(10)(B), 20 U.S.C. §§ 1412(a)(1) and 1412(a)(10)(B).

room and board, must be at no cost to the parents of the child.”³ In addition, the agencies placing children in foster care homes may provide food and shelter.

Furthermore, children residing in certain medical facilities receiving substantial Medicaid or private health insurance payments on their behalf, may also remain eligible for SSI payments.⁴ However, in these cases, the children are only eligible for a reduced Federal SSI payment of no more than \$30.⁵

To perform our review, we identified 1,512 disabled SSI recipients under age 18—as of April 2009—who were not in the custody of the parents/relatives serving as their representative payees.⁶ The ZIP Codes of the representative payees did not match the ZIP Codes of the SSI recipients' residential addresses. Therefore, they did not appear to reside at the same address. In addition, according to the coding on SSA's records, these children were not residing in institutions or facilities that would subject them to the \$30 monthly payment.

We randomly selected 100 cases from this population to determine whether the children's parents/relatives provided support by contributing to the cost of care at the institutions, residential schools, or foster care homes.⁷ (For more information on our scope, methodology, and sampling results, see Appendix B.)

RESULTS OF REVIEW

We found that some parents/relatives serving as representative payees received SSI payments for children they were not supporting. Based on our review, we estimate that approximately 320 children resided in institutions and their parents/relatives did not contribute to the cost of care at the institutions. These parents/relatives received approximately \$8.3 million in SSI payments for children they were not supporting. In addition, we estimate the Government could realize potential savings of about

³ 34 C.F.R. § 300.104.

⁴ Medicaid is a jointly funded, Federal and State health insurance program for financially needy individuals.

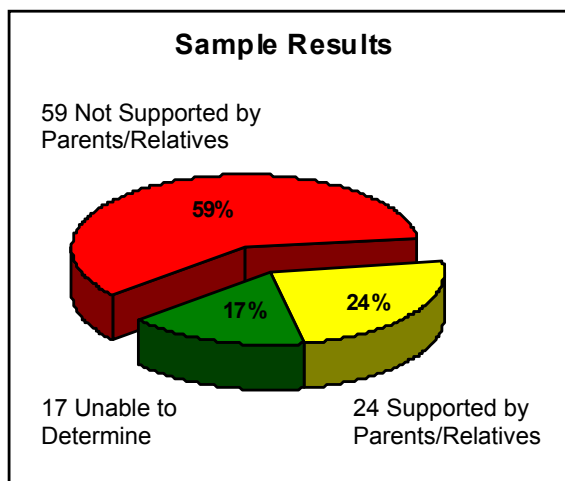
⁵ The *Social Security Act* § 1611(e)(1)(B), 42 U.S.C. § 1382(e)(1)(B). In addition, many States provide an additional cash benefit to supplement the Federal SSI payment. In some States, the supplement is administered by SSA and included in the SSI check.

⁶ Some individuals cannot manage their finances because of their age, mental, and/or physical impairments. Therefore, Congress granted SSA the authority to appoint a representative payee, which can be a person or an organization, to receive and manage benefits on an individual's behalf. Generally, children under age 18 have representative payees. The *Social Security Act* § 1631(a)(2), 42 U.S.C. § 1383(a)(2).

⁷ Throughout the report, we refer to institutions, residential schools, and foster care homes as “institutions.”

\$1.9 million per year if SSA limited these children to reduced SSI payments—similar to how children residing in certain medical facilities are limited to a \$30 Federal SSI payment.

Furthermore, we were unable to determine whether parents/relatives contributed to the cost of care for about 260 children residing in institutions. The parents/relatives of these children received approximately \$3.6 million in SSI payments and possibly did not contribute to the children's cost of care at the institutions.



Of the 100 children in our sample,

- 59 resided in institutions and did not appear to be supported by their parents/relatives;
- 17 resided in institutions, and we were unable to determine whether the parents/relatives provided support; and
- 24 were supported by their parents/relatives.⁸

Children Residing in Institutions Not Supported by Their Parents/Relatives

In total, 59 children in our sample resided in institutions and did not appear to be supported by their parents/relatives. Of the 59 children,

- 21 resided in institutions full-time, and their parents/relatives—who did not contribute to the cost of care—received about \$551,000 in SSI payments on their behalf while they resided in the institutions,⁹ and
- 38 resided in certain medical institutions before our review, and Medicaid or private health insurance contributed substantially to the cost of care. These 38 children were subjected to a reduced Federal SSI monthly payment of \$30 while residing in the medical institutions.¹⁰

⁸ This includes (a) 12 children who resided in institutions and the parents/relatives provided support by contributing to the cost of care and (b) 12 children who never resided in institutions while receiving SSI payments. In these 12 cases, the custody information on SSA's records was miscoded.

⁹ The parents/relatives did not contribute the cost of care at the institutions for an average of 41 months (or 3.4 years). The median was 41 months.

¹⁰ As of May 2009, 37 of these children had returned to live with their parents/relatives and 1 was in prison.

The SSI program is intended to be a program of last resort. It is designed to provide a minimum level of income to help individuals meet their basic needs for food, clothing, and shelter. However, in 21 of our sample cases, parents/relatives received SSI on behalf of children they were not supporting. If SSA limited these children to reduced SSI payments—similar to the way children residing in certain medical facilities are reduced to a \$30 Federal payment—the SSI program could realize savings. Specifically, if the Agency limited the children to a similar reduced \$30 Federal SSI payment, SSA could realize potential savings of about \$126,000 over the next 12 months.¹¹ See Table 1 for potential savings to the SSI program.

Table 1: Potential Savings to the SSI Program	SSI Payments
Amount SSA Will Continue to Pay over the Next 12 Months	\$133,875
Amount SSA Would Pay over the Next 12 Months If Payments Were Reduced ¹²	\$8,054
Potential Savings	\$125,821

Projecting our sample results to the population, we estimate that the Government could save approximately \$1.9 million per year if SSA limited these children to reduced SSI payments. Payments under the SSI program are financed from the general fund of the U.S. Treasury—which is financed through tax payments from the American public. Therefore, SSA should ensure resources entrusted to the Government by the American people are used in the public’s best interest. The parents/relatives in our review continued to receive payments under the SSI program—which is intended to be a program of last resort—even though the children’s basic needs—such as food and shelter—were being provided at the institutions.

¹¹ Five of the 21 children had returned to live with their parents as of May 2009. The five children received \$25,000 in SSI payments while they resided in institutions. The 12 months of savings is based on SSI payments to 16 children who were still residing in institutions as of May 2009.

¹² These savings include the \$30 Federal SSI payment plus any applicable State supplement payments. Many states provide an additional cash benefit to supplement the Federal SSI payment. In some States, the supplement is administered by SSA and included in the SSI check. Of the 16 cases, 8 resided in a State that provided a supplemental payment. For our calculation, we used the State supplement amounts that children residing in certain medical facilities would likely receive. This included (a) five cases in California in which we used the State monthly supplement of \$20 and (b) three cases in Massachusetts in which we used the State monthly supplement of \$30.40.

Table 2 shows that children in institutions who are eligible for a full SSI payment meet similar criteria to children reduced to the \$30 Federal SSI payment limit.

Table 2: Comparison of the \$30 Federal Payment Limit with SSI Payments Made in Similar Circumstances	
\$30 Federal Payment Limit	Full SSI Payments
Child resides in a Medical facility—not with parent/relative	Child resides in an educational facility or foster care home—not with parent/relative
Cost of care is paid for by Medicaid or private health insurance	Cost of care is paid for by the school district, State, or placement agency
SSI payment is limited to \$30 Federal payment	May be eligible for a full SSI payment

Unable to Determine Whether Parents/Relatives Provided Support

Of the 100 children in our review, an additional 17 resided in institutions full-time, but we were unable to determine whether their parents/relatives provided support.¹³ For these 17 cases, we researched information available on SSA’s systems, but were unable to determine whether the parents/relatives contributed to the cost of care. However, if placement in the institutions was necessary to provide special education and related services, the cost of the program—such as non-medical care and room and board—must be provided at no cost to the child’s parents. In addition, agencies placing children in foster care homes may provide food and shelter. Therefore, the parents/relatives of these 17 children received about \$237,000 in SSI payments and possibly did not contribute to the children’s cost of care in the institutions.

For example, in one case, an 11-year-old SSI recipient resided in an institution. Based on available information in SSA’s systems, we were unable to determine who contributed to the cost of care at the institution. However, we researched this institution and found that it is publicly funded. Therefore, the relative serving as this child’s representative possibly did not contribute to the child’s cost of care at the institution. This child’s relative received about \$17,000 for the period March 2007 through May 2009 while the child resided in the institution.

See Appendix B for a summary by State for children residing in institutions who did not appear to be supported by their parents/relatives.

¹³ This includes (a) 13 children who resided in institutions as of May 2009 and received a total of \$206,000 in SSI payments while residing in institutions and (b) 4 children who resided in institutions before May 2009 and received a total of \$31,000 while residing in institutions but were no longer in the institutions as of May 2009.

Consideration of Parents' Income and Resources

Generally, SSA considers a parent's income when determining a child's SSI eligibility and/or payment amount when the parent and child live in the same household. Therefore, for the children in our sample who resided in institutions, the Agency did not consider the parents' incomes for determining SSI eligibility and/or payment amounts because the children and parents did not live in the same households.

For example, in one case, a 17-year-old SSI recipient resided in an institution for children with autism in which a third party paid for his care.¹⁴ He had not lived with his father since at least July 2000. His father served as his representative payee and received about \$36,000 on behalf of his disabled son for the period July 2000 to May 2009.¹⁵ This child's father earned about \$98,000 in 2008—and this income did not have any impact on his son's SSI payments.

In another example, a 16-year-old SSI recipient had resided in an institution since October 2006, and the school district paid for his care. His mother served as his representative payee and received about \$9,000 on behalf of her disabled son from December 2006 to May 2009.¹⁶ This child's mother earned about \$59,000 in 2008—and this income did not impact her son's SSI payments.

Although SSA does not consider a parent's income when a child lives in an institution, it must consider the parent's income if the child returns to the parent's home. In five of our sample cases, it appeared the children had returned to live with their parents, but SSA's records were not properly updated. As a result, the Agency was not considering the parents' income for SSI purposes. We referred these five cases to SSA for possible correction. As of November 2009, the Agency had updated four of the five cases and assessed \$20,236 in overpayments because of our audit.

For example, in one case, the child returned to her parents' home in June 2006, but SSA did not fully update its records. According to the Agency's records, this 3-year-old child lived alone and therefore SSA was not considering her parents' income. As a result of our referral, the Agency updated its records and posted an overpayment of \$1,283.

¹⁴ The Mental Health and Mental Retardation Authority of Harris County in Houston, Texas, paid for the child's food and shelter.

¹⁵ This recipient did not receive any SSI payments from April 2002 to September 2003. We did not include these months in our calculation.

¹⁶ Although the recipient resided in the institution since October 2006, he did not start receiving SSI payments until December 2006.

CONCLUSION AND RECOMMENDATION

The SSI program—financed by tax payments from the American public—is intended to be a program of last resort to assist individuals with a minimum level of income. However, we found that some parents/relatives serving as representative payees received SSI payments for children they were not supporting. Although these payments were made in accordance with SSA policy, we estimate that about 320 children resided in institutions, and their parents/relatives did not contribute to the cost of care at the institutions. These parents/relatives received approximately \$8.3 million in SSI payments on behalf of children they were not supporting. If these children were limited to reduced SSI payments—similar to the way children residing in certain medical facilities are reduced to a \$30 Federal payment limit—we estimate that the Government could realize potential savings of approximately \$1.9 million per year.

Furthermore, we were unable to determine whether the parents/relatives provided support to about 260 children residing in institutions. The parents/relatives of these children received approximately \$3.6 million in SSI payments and possibly did not contribute to the children's cost of care at the institutions.

We recommend SSA consider whether it is equitable to reduce SSI payments to parents/relatives serving as representative payees for children they are not supporting. If SSA determines it is equitable to do so, the Agency should seek the legislative revisions needed to enact this change in policy.

AGENCY COMMENTS

SSA agreed with the recommendation. The Agency's comments are included in Appendix C.



Patrick P. O'Carroll, Jr.

Appendices

[APPENDIX A](#) – Acronyms

[APPENDIX B](#) – Scope, Methodology, and Sample Results

[APPENDIX C](#) – Agency Comments

[APPENDIX D](#) – OIG Contacts and Staff Acknowledgments

Acronyms

C.F.R.	Code of Federal Regulations
Pub. L. No.	Public Law Number
SSA	Social Security Administration
SSI	Supplemental Security Income
U.S.C.	United States Code

Scope, Methodology, and Sample Results

To accomplish our objective, we:

- Reviewed applicable sections of the *Social Security Act* and the Social Security Administration's (SSA) regulations, rules, policies, and procedures.
- Obtained a file of disabled Supplemental Security Income (SSI) recipients—under age 18 as of August 2008—who were not in the custody of their parents/relatives. We then identified cases in which the recipients
 1. were still in current pay or under age 18 as of April 2009,
 2. had parents/relatives serving as their representative payees,
 3. were not subjected to a reduced \$30 monthly payment,¹ or
 4. had ZIP Codes that did not match the ZIP Codes of their representative payees—indicating they may not reside at the same address as their representative payees.
- Identified a population of 1,512 disabled SSI recipients under age 18—as of April 2009—who did not appear to be supported by the parents/relatives serving as their representative payees.
- Selected a random sample of 100 cases from the population and analyzed each case to determine whether the parents/relatives contributed to their children's cost of care at the institutions, residential schools, or foster care homes. Specifically, we:
 - ✓ Reviewed available information on SSA's systems, including the Supplemental Security Record and Modernized SSI Claims System. In addition, we reviewed Representative Payee Reports and SSI Facility Information and Determination Forms (Form SSA-8045).
 - ✓ Calculated the amount of SSI payments the recipients received for cases in which the parents/relatives did not contribute to the child's cost of care—or possibly did not contribute to the cost of care. We did not independently verify with the institutions whether the children were, in fact, living in the institutions.

¹ Children residing in certain medical facilities receiving substantial Medicaid or private health insurance payments on their behalf may be eligible for a reduced Federal SSI payment of no more than \$30.

- Determined whether SSA considered parents' incomes for cases in which recipients returned to their parents' homes. We referred cases to SSA field offices for possible correction in which it did not appear the Agency was considering the parents' incomes.
- Calculated potential savings to the SSI program if recipients residing in institutions, residential schools, or foster care homes were limited to reduced SSI payments—similar to recipients residing in certain medical facilities who are reduced to a \$30 Federal payment.

We performed our audit between May and September 2009 in Boston, Massachusetts. We tested the data obtained for our audit and determined them to be sufficiently reliable to meet our objective. The principal entity audited was the Office of Income Security Programs under the Deputy Commissioner for Retirement and Disability Policy. We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

SAMPLE RESULTS

Table B-1: Population and Sample Size	
Population	1,512
Sample Size	100

Table B-2: Children Residing in Institutions, Residential Schools, or Foster Care Homes and Their Parents/Relatives did not Contribute to the Cost of Care	Number of Recipients	Dollars
Sample Results	21	\$551,077
Point Estimate	318	\$8,332,282
Projection Lower Limit	223	\$5,025,472
Projection Upper Limit	431	\$11,639,092

Note: All projections are at the 90-percent confidence level.

Table B-3: Potential Annual Savings to the SSI Program if SSA Limited Payments to Children Residing in Institutions, Residential Schools, or Foster Care Homes Reduced \$30 Federal SSI Payments²	Number of Recipients	Dollars
Sample Results	16	\$125,821
Point Estimate	242	\$1,902,407
Projection Lower Limit	159	\$1,154,793
Projection Upper Limit	348	\$2,650,022

Note: All projections are at the 90-percent confidence level.

Table B-4: Children Residing in Institutions, Residential Schools or Foster Care Homes and We Were Unable to Determine Who Contributed to the Cost of Care	Number of Recipients	Dollars
Sample Results	17	\$236,694
Point Estimate	257	\$3,578,813
Projection Lower Limit	171	\$1,977,418
Projection Upper Limit	365	\$5,180,209

Note: All projections are at the 90-percent confidence level.

Table B-5: Summary by State: Children Residing in Institutions, Residential Schools or Foster Care Homes Not Supported—or Possibly Not Supported—by Their Parents/Relatives				
State	Number of Children Not Supported	Number of Children Possibly Not Supported³	Total	Percent
California	5	0	5	13.2%
North Carolina	3	2	5	13.2%
Florida	1	3	4	10.5%
Massachusetts	3	1	4	10.5%
New York	1	3	4	10.5%
Georgia	0	2	2	5.3%
Mississippi	0	2	2	5.3%
South Carolina	1	1	2	5.3%
Texas	2	0	2	5.3%
Indiana	1	0	1	2.6%

² Of the 21 children who resided in institutions, 5 resided in institutions before our review and had returned to live with their parents as of May 2009. Therefore, we only calculated potential savings for the 16 children who still resided in institutions as of May 2009.

³ For these 17 children, we were unable to determine whether the parents/relatives provided support by contributing to the cost of care.

Table B-5: Summary by State: Children Residing in Institutions, Residential Schools or Foster Care Homes Not Supported—or Possibly Not Supported—by Their Parents/Relatives

State	Number of Children Not Supported	Number of Children Possibly Not Supported³	Total	Percent
Louisiana	1	0	1	2.6%
Maryland	0	1	1	2.6%
Oklahoma	0	1	1	2.6%
Pennsylvania	1	0	1	2.6%
Tennessee	0	1	1	2.6%
Wisconsin	1	0	1	2.6%
West Virginia	1	0	1	2.6%
TOTAL	21	17	38	100.0%

Agency Comments



SOCIAL SECURITY

MEMORANDUM

Date: December 16, 2009 **Refer To:** S1J-3

To: Patrick P. O'Carroll, Jr.
Inspector General

From: Margaret J. Tittel //s//
Acting Chief of Staff

Subject: Office of the Inspector General (OIG) Draft Report, "Supplemental Security Income Payments to Parents or Relatives Not Supporting Children" (A-01-09-29113)—INFORMATION

Thank you for the opportunity to review and comment on the draft report. We appreciate OIG's efforts in conducting this review. Attached is our response to the report recommendation.

Please let me know if we can be of further assistance. Please direct staff inquiries to Candace Skurnik, Director, Audit Management and Liaison Staff, at (410) 965-4636.

Attachment

**COMMENTS ON THE OFFICE OF THE INSPECTOR GENERAL'S DRAFT REPORT,
"SUPPLEMENTAL SECURITY INCOME PAYMENTS TO PARENTS OR RELATIVES
NOT SUPPORTING CHILDREN" (A-01-09-29113)**

We have reviewed the draft report and our response to the recommendation is provided below.

Recommendation

Consider whether it is equitable to reduce Supplemental Security Income payments to parents/relatives serving as representative payees for children they are not supporting. If it is determined equitable to do so, the agency should seek the legislative revisions needed to enact this change in policy.

Comment

We agree. By March 31, 2010, we will analyze this issue and determine if we should seek a legislative revision.

OIG Contacts and Staff Acknowledgments

OIG Contacts

Judith Oliveira, Director, Boston Audit Division

Acknowledgments

In addition to those named above:

Katie Greenwood, Auditor

Kevin Joyce, IT Specialist

Melinda Padeiro, Senior Auditor

For additional copies of this report, please visit our web site at www.socialsecurity.gov/oig or contact the Office of the Inspector General's Public Affairs Staff Assistant at (410) 965-4518. Refer to Common Identification Number A-01-09-29113.

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