

Hearing on “Untapped Talent in America: Removing Barriers to Work and Supporting Opportunity for Individuals with Disabilities”

Subcommittees on Social Security and Worker and Family Support of the Committee on Ways and Means

Statement of Tracey Gronniger, on behalf of Justice in Aging and the Consortium for Constituents with Disabilities Social Security Task Force

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Thank you Chairman Estes, Ranking Member Larson, Chairman LaHood, Ranking Member Davis, and Members of the Subcommittees. I am Tracey Gronniger, Managing Director of Economic Security and Housing at Justice in Aging. Our organization is committed to using the power of the law to advocate for the rights of low-income older adults. I am also here as a co-chair, and on behalf of, the Consortium for Constituents with Disabilities (CCD) Social Security Task Force. CCD is the largest coalition of national organizations working together to advance federal policy that ensures the self-determination, independence, and empowerment of children and adults with disabilities in all aspects of society.

I am here today to talk about the importance of Social Security and other SSA benefits to people with disabilities, families, and older adults, and how we can better support people who want to work so they can do so without fear of losing the critical benefits they depend on. I will focus my remarks on three points. First, Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI) are vital for millions of older adults and both adults and children with disabilities. Second, complex program rules and requirements, along with a lack of dedicated and trained staff to support beneficiaries, can create barriers for those who want to attempt to return to work. Finally, Congress can act to ensure that people who want to work still have access to the benefits they rely on while protecting those who are simply too sick or impaired to work.

SSA Benefits Are Vital for People with Disabilities

First, SSDI and SSI are vital for millions of older adults and people with disabilities. Just over 7 million people receive SSDI.¹ More than three-quarters of all SSDI beneficiaries are

¹ Center on Budget and Policy Priorities, “Chart Book: Social Security Disability Insurance, 2025.” <https://www.cbpp.org/research/social-security/social-security-disability-insurance-0>

over age 50, and the average age of an SSDI beneficiary is 56.² SSDI beneficiaries have an extensive history of work, but have been found by SSA to have one or more serious medical impairments that prevent them from continuing to support themselves through work.

About 7.4 million people receive SSI, including 2.5 million seniors.³ SSI supports those with very low incomes who cannot work enough to meet their needs, including young children with disabilities and serious illnesses, seniors over age 65, and adults with life-long intellectual disabilities such as Down Syndrome. The majority of SSI beneficiaries are women, and among older adult beneficiaries two-thirds are women.

These benefits are modest but critical, averaging only about \$1,500 per month for SSDI beneficiaries and just \$700 per month for SSI recipients. The maximum SSI benefit is just \$967 per month, only 74% of the poverty rate, barely enough to pay for basic necessities.

Qualifying for SSDI and SSI also typically provides access to health insurance under Medicare and Medicaid, respectively. These health benefits can be invaluable for SSA beneficiaries with complex medical conditions who lack access to employer-sponsored health insurance. In the case of Medicaid, it can also mean access to home and community-based services which support people with disabilities to live at home while also supporting their ability to attempt to work if they choose. ***Cuts to these vital supports would not only harm the economic security and health of beneficiaries, but also their independence and freedom to work.***

Complex Program Rules and Insufficient Staffing Create Barriers

Second, complex program rules, along with a lack of dedicated and trained staff to support beneficiaries, can create barriers for those who want to attempt to return to work.

The process to obtain SSA disability benefits in the first place is extremely difficult, and the standard for qualifying is strict. More than 60% of applicants are denied benefits when they first apply. Currently it takes an average of 220 days, or over 7 months to get an *initial* decision.⁴ If a person is initially denied benefits, the appeals process is long and complicated, taking many more months, or even years, for a decision. Because SSA is so understaffed, employees juggle too many tasks at once. As a result, applications and appeals move slowly, and beneficiaries often cannot get the accurate information or

² Social Security Annual Statistical Supplement, 2025, Table 5.D4, <https://www.ssa.gov/policy/docs/statcomps/supplement/2025/5d.html#table5.d4>

³ Social Security Annual Statistical Supplement, 2025, Table 7.A1, <https://www.ssa.gov/policy/docs/statcomps/supplement/2025/7a.html#table7.a1>

⁴ Social Security Administration Performance Metrics as of July 2025. <https://www.ssa.gov/ssa-performance>

support they need. Most applicants give up and drop out of the process entirely despite their need, leaving them at risk of deep poverty, poor health outcomes, and homelessness.

The complexity of the programs and lack of adequate staffing is particularly challenging for the people SSA is meant to serve, including those who may want to attempt to return to work. People who meet SSA's stringent standards and are found eligible for disability benefits typically have poor health and significant functional limitations. In fact, two-thirds of SSA disability beneficiaries have multiple medical impairments.⁵ Only a small share ever reach a point where they feel ready to attempt to return to work, and those who do often face significant barriers to employment. A person may lack access to necessary supports and services, such as a personal care aide, or may be unable to obtain accessible transportation. In addition, job seekers with disabilities can face inflexible work arrangements, inaccessible workplaces, and employment discrimination. It is no wonder that beneficiaries often worry about accidentally triggering benefit reductions or terminations because they earned some income, often irregular or temporary, in a particular month. Provisions from the recent One Big Beautiful Bill (H.R. 1) also cut off Medicaid for people who lose their job, making it even more risky for beneficiaries who might lose their healthcare as a result of attempting to engage in uncertain employment.

For those approved for SSI, additional complicated eligibility rules mean that benefits can be reduced or terminated for seemingly arbitrary reasons, such as saving too much money. SSI program rules currently cap assets for an individual at \$2,000, and at \$3,000 for a couple. Exceeding the asset limit by even a small amount means the benefit is not payable for that month and the individual must spend down their savings to again become eligible. The current limits punish people for trying to save and burdens an already understaffed SSA with time-consuming administrative processes. In addition, because SSA is slow to detect these types of overpayments, many beneficiaries are left owing thousands of dollars.

SSI benefits are also reduced when individuals earn money, further disincentivizing work, especially because work often comes with financial costs, like transportation or additional caregiver help. The earned income disregards currently in place have never been updated since the program began in 1972, imposing harsher consequences for work than Congress likely intended when the program began.

Another issue that affects an individual's ability to attempt to return to work is the lack of support people face when they reach out to SSA for help. Customer service challenges at the agency, driven in large part by inadequate staffing, leave seniors and people with

⁵ <https://www.ssa.gov/policy/docs/ssb/v79n3/v79n3p21.html>

disabilities struggling to get help on a variety of issues, including where to turn for help understanding whether and how they can attempt to work without jeopardizing their benefit eligibility. Field offices are understaffed, phone lines are overwhelmed, and wait times can stretch for hours. Too often people are left empty-handed, confused, or discouraged. In this environment, beneficiaries cannot get the guidance and support they need to navigate complex program rules. For seniors and people with disabilities, who often need in-person assistance or more personal engagement on the phone, these issues can be especially frustrating. It is therefore unsurprising that they do not feel confident about trying to work at the risk of losing their only source of income and healthcare.

Overpayments are another huge problem. While SSDI and SSI recipients must report their income to SSA, staffing shortages and the related delays in processing and completing essential work can lead to the erroneous payment of extra benefits. During the current administration the repayment rate for SSDI beneficiaries was increased from 10% of their monthly benefit to 50%, meaning that beneficiaries could lose fully half of their benefits through no fault of their own due to overpayments. The increased hardship this would cause a beneficiary trying to afford food, clothes, medicine, and housing with half their monthly income gone is almost unimaginable.

These problems cause real harm. Take Ms. G, an older adult woman who was receiving disability benefits due to a combination of multiple serious medical conditions. She had been receiving SSDI benefits and working part-time for many years, reporting her earnings to SSA. Earlier this year she received a notice from SSA that she was no longer eligible for SSDI benefits *retroactive to 2016* because of the earnings from her part-time job, and that she had an overpayment of over \$100,000. Although she appealed SSA's decision, she lost her current disability benefit while waiting for a decision. She tried to resolve this issue by calling SSA. After multiple attempts, including waiting for 3 hours on hold, an SSA representative finally told her to submit additional paperwork for an appeal. But when she tried to do that, she was turned away by a security guard because she did not have an appointment. She attempted to call to make an appointment, making multiple calls and waiting for hours on hold before her call was disconnected. She finally decided to return in person to the SSA field office and persuaded the security guard to let her in, only to have the SSA representative tell her they could not help her because someone else was handling her case. The loss of benefits was devastating. Without her SSDI benefits Ms. G was unable to pay her rent. Without her Medicare health insurance, she was forced to ration her access to healthcare, forgoing previously scheduled appointments and medications that would cost her hundreds of dollars per month out of pocket. Her part-time work isn't enough to cover her cost of living and access to healthcare. SSDI was her lifeline. Unfortunately, her

story is not an aberration. People with disabilities who attempt to work may instead lose out on the very source of income they need to survive.

Recommendations for Congress

Congress can act to ensure that people who want to work still have access to the benefits they rely on. The bipartisan SSI Savings Penalty Elimination Act (H.R. 2540), introduced by Representatives Davis and Fitzpatrick, would increase asset limits so that people are better able to save for emergencies or necessary expenses such as deposits for rent, or home or vehicle repairs. And those trying to return to work could save the money they earn without being forced to spend it prematurely to maintain their benefits. Congress can also raise income disregards so that earning money does not mean a concurrent deduction of benefits simply because of outdated rules. Legislation such as the Claws Off Social Security Act (H.R. 2999), introduced by Representative Evans, would limit harsh overpayment withholdings caused by SSA's mistakes. In addition, increased funding for adequate staffing is critical. While AI is a useful tool to support SSA's work, it is not a replacement for staff who serve those in need of personal help, such as seniors who have difficulty interfacing with technology or people with physical or intellectual disabilities for whom AI is not as accessible. The agency requires personnel who are able to interact directly with beneficiaries and staff field offices when individuals require in-person assistance. Seniors in rural areas who travel to their closest field office should be able to get robust, expert assistance from the people who work there. Furthermore, we must ensure that while SSA explores how to effectively use AI, seniors and beneficiaries with disabilities are not used as test subjects before the technology has been proven to be effective and accessible. These efforts will ensure that the agency fulfills its mission and gives people confidence that they can rely on SSA to help them maintain the benefits they are eligible for if they work.

Conclusion

It is critical that Congress and SSA consider how to make sure that benefits for people with disabilities are accessible and secure. Without feeling assured that they can earn an income without putting their benefits at risk, it will be difficult for people with disabilities to attempt to work or engage in meaningful work.

As we mark the 35th anniversary of the bipartisan Americans with Disabilities Act, we still have a long way to go. I'm grateful the Committees are examining these issues. Fixing outdated rules and ensuring that people have access to the services and supports they need to thrive is critical to fulfilling the promise of the ADA.