

January 31, 2020

Commissioner Andrew Saul Social Security Administration 6401 Security Boulevard Baltimore, MD 21235-6401

Submitted electronically through regulations.gov

Re: Notice of Proposed Rulemaking on Rules Regarding the Frequency and Notice of Continuing Disability Reviews, 84 Fed. Reg. 36588 (November 18, 2019), Docket No. SSA-2018-0026

Dear Commissioner Saul:

Thank you for the opportunity to submit comments in response to the Social Security Administration (SSA)'s proposed rule on the conduct of Continuing Disability Reviews (CDRs). We are deeply concerned that the proposed rule will prevent older adults and people with disabilities and complex health needs from accessing vitally important disability benefits and we ask you not to move forward with this rule.

The Center for Consumer Engagement in Health Innovation at Community Catalyst is a national advocacy organization that amplifies the voices of consumers and communities in health care and in health policy. Our mission is to organize and sustain a powerful consumer voice to ensure that all individuals and communities can influence the local, state and national decisions that affect their health. We work with state and local consumer health advocates to promote innovative, personcentered health care that that uplifts the voices of communities of older adults and people with disabilities across the country. One key focus of our work is ensuring older adults and people with disabilities have access to the health care services and social supports they need. The proposed rule would have devastating health impacts for people with complex health care needs.

The proposed rule would increase the frequency of Continuing Disability Reviews. SSA estimates that the increased reviews would result in \$2.6 billion fewer in benefits paid out over ten years. We are concerned that this rule will disproportionately impact particular categories of beneficiaries. The rule adds a new medical diary category ("Medical Improvement Likely"), for which there is no existing medical standard, and proposes changes to the criteria used to assign a beneficiary to a particular medical diary category. People assigned to this new category will be subject to more frequent reviews than people assigned to the "Medical Improvement Possible Category." Based on the proposed rule, older adults who qualify for disability benefits because they are unable to work, children with disabilities, people with behavioral health needs, and those with cancer-related disabilities may be subject to more frequent reviews.

The existing disability review process already requires extensive documentation and medical evidence. If there is any mistake at any point in the process, people can be fully cut off from their benefits, which is often their only source of income. Additionally, many people qualify for Medicare and Medicaid on the basis of their disability review, meaning that this change could put access to health coverage in jeopardy for many older adults and people with disabilities. Successfully navigating the SSA benefit system requires access to information and legal resources that are difficult to obtain for many people. Increasing the frequency of these reviews increases the likelihood of people losing their benefits due to administrative errors.

Compounding the challenge is the short appeal window, which allows individuals only ten days continue their benefits while appealing the CDR decision. The increased frequency of these CDRs increases the likelihood of eligible beneficiaries going without benefits due to factors outside of their control, such as not being able to get to a doctor's appointment to get the necessary documentation, or being unaware that they need to opt into benefits while appealing a decision. The population seeking disability benefits has complex health needs, and a discontinuation of their care can be life threatening. Consumers use their benefits to fulfill critical social needs like housing and nutrition – a sudden cut to those resources could leave people with high health needs without basic necessities.

Moreover, this proposed rule would require \$1.8 billion dollars to implement. SSA already struggles to serve their existing caseload and comply with existing disability review standards, which would worsen with the influx of an additional 2.6 million CDRs. Implementation of such frequent CDRs would waste SSA resources on unnecessary administrative costs, result in fewer people receiving the benefits they desperately need, and slow down the disability determination system for everyone. The disability review process is already fundamentally flawed and inaccessible to consumers. Resources would be better utilized to streamline the review process and get more beneficiaries off years-long waiting lists to receive resources they are eligible for.

We urge the Social Security Administration to withdraw this proposed rule and instead focus on providing people with complex health needs the supports they need. Thank you for your consideration.

Sincerely,

Ann Hwang, MD Director, Center for Consumer Engagement in Health Innovation