



**CONSORTIUM FOR CITIZENS
WITH DISABILITIES**

January 15, 2015

The Honorable John A. Boehner
Speaker, U.S. House of Representatives
H-232, The Capitol
Washington, DC 20515

The Honorable Nancy Pelosi
Minority Leader, U.S. House of Representatives
H-204, The Capitol
Washington, DC 20515

RE: H. Res. 5, Sec. 3(q), "Social Security Solvency"

Dear Speaker Boehner and Leader Pelosi,

The undersigned members of the Consortium for Citizens with Disabilities (CCD) write to express our dismay at the inclusion of a provision in the House rules for the 114th Congress (H. Res. 5) that creates obstacles to a common-sense, fiscally responsible action needed to prevent across-the-board benefit cuts of 20 percent to Social Security Disability Insurance (SSDI) in 2016.

The CCD is a coalition of national organizations working together to advocate for federal public policy that ensures the self-determination, independence, empowerment, integration, and inclusion of the 57 million children and adults with disabilities in all aspects of society. SSDI's modest but vital assistance supports these goals for over 11 million Americans, helping beneficiaries with disabilities and their families to meet their everyday needs -- keeping a roof over their heads, putting food on the table, paying for out-of-pocket medical and disability-related expenses, and meeting other basic living expenses.

Congress has known for the last two decades that Social Security's Disability Insurance (DI) fund will need to be replenished by 2016. The need for action now is no surprise, but stems from long-term demographic trends including an aging workforce now in its disability-prone years, and an increase in work by women that has led to an increase in women's eligibility for Social Security including SSDI.

Reallocation will ensure that SSDI is available to both current and future beneficiaries, including the 7 in 10 SSDI beneficiaries who are age 50 and older. SSDI benefits average just \$38 per day. Benefits make up the majority of income for 4 out of 5

beneficiaries and provide the sole source of income for 1 in 3 beneficiaries. The impact of any reduction in benefits could be truly devastating.

Congress needs to act expeditiously, as it has done many times in the past, to reallocate existing payroll taxes between Social Security's DI and Old-Age and Survivors' Insurance (OASI) funds. As outlined by Social Security's actuaries, both trust funds would be able to pay full scheduled benefits through 2033 by temporarily raising the 1.8 percent DI share of the current 12.4 percent Social Security payroll contribution to 2.8 percent in 2015 and 2016, and then gradually reducing it back to 1.8 percent by 2025. Congress has reallocated between Social Security's funds in this manner about equally in both directions to keep the system on an even reserve ratio -- 6 times using a narrow definition of reallocation, and 11 times using a broader definition of reallocation. Reallocation does not require any new taxes and will maintain the long-term solvency of the combined Social Security trust funds at 2033, as currently projected.

Reallocation -- without accompanying cuts to Social Security coverage, eligibility, or benefits -- is the common-sense, responsible solution that Congress should enact promptly. Unfortunately, the provision in the House rules creates roadblocks to reallocation and to keeping Social Security's promise to the more than 165 million Americans who currently contribute to the system and the nearly 11 million Americans who currently receive SSDI benefits.

Maintaining our Social Security system goes far beyond dollars and cents. It is about strengthening economic security and dignity for all Americans. Consideration of any changes to this vital system must include the voices and views of people with disabilities as well as all Americans who may need SSDI in the future. We are deeply alarmed that the House of Representatives would adopt rules of such importance to the future of Social Security with no public dialogue or opportunities for input from your constituents, and we urge you to reject such an approach in the future.

Sincerely,

ACCSES

American Academy of Pediatrics

American Association of People with Disabilities (AAPD)

American Association on Health and Disability

American Council of the Blind

American Foundation for the Blind

American Music Therapy Association

American Network of Community Options and Resources (ANCOR)

American Speech-Language-Hearing Association

Association of Assistive Technology Act Programs (ATAP)

Association of Jewish Family & Children's Agencies

Association of University Centers on Disabilities

Attention Deficit Disorder Association (ADDA)

Autism National Committee (AutCom)

Autistic Self Advocacy Network (ASAN)

Bazelon Center for Mental Health Law

Brain Injury Association of America
Community Legal Services
CSH
Dialysis Patient Citizens
Disability Rights Education & Defense Fund
Easter Seals
Epilepsy Foundation
Goodwill Industries International
Health & Disability Advocates
Jewish Federations of North America
Lupus Foundation of America
Lutheran Services in America Disability Network
National Academy of Elder Law Attorneys
National Alliance on Mental Illness
National Association of Councils on Developmental Disabilities
National Association of Disability Representatives
National Association of School Psychologists
National Association of State Head Injury Administrators
National Committee to Preserve Social Security and Medicare
National Council for Behavioral Health
National Council on Aging
National Council on Independent Living
National Disability Rights Network
National Down Syndrome Congress
National Multiple Sclerosis Society
National Organization of Social Security Claimants' Representatives (NOSSCR)
National Respite Coalition
National Senior Citizens Law Center
Paralyzed Veterans of America
SourceAmerica
Special Needs Alliance
The Arc of the United States
United Cerebral Palsy
United Spinal Association

CC: Members, House of Representatives