



May 27, 2014

Carolyn Colvin  
Acting Commissioner of Social Security  
Social Security Administration  
P.O. Box 17703  
Baltimore, MD 21235-7703

Re: Updating the Disability Criteria for People Living with HIV/AIDS  
Docket No. SSA-2007-0082

Dear Commissioner Colvin:

On behalf of the HIV Health and Human Services Planning Council of New York (Planning Council), I write to express concern regarding the proposed revisions to the Social Security Administration (SSA)'s listings for disability for people living with HIV (PLWH). The Planning Council is comprised of health care and service providers, governmental representatives, advocates, and PLWH, all of whom have many years of experience in dealing with the debilitating physical and psychological consequences of HIV infection. In the New York Eligible Metropolitan Area in 2012, a total of 450,904 individuals received SSI benefits.

Planning Council members acknowledge the importance of updating the SSA's listings to accommodate major advances in treatment of this illness but want to ensure that PLWH who are severely disabled will be able to access benefits and maintain their health and well-being. Specifically:

- We underscore the importance of ensuring that SSA adjudicators do not depend exclusively on an individual's CD4 count or on the SSA's list of fatal and/or severely disabling HIV-related conditions. Some people living with HIV/AIDS with CD4 counts above 50 are very ill and not able to seek gainful employment. Moreover, the adjudicators should take into account all fatal and/or very debilitating conditions, not just those on the approved list, when determining a PLWH's eligibility for benefits.

- We endorse the proposal to add criteria recognizing the severity of complications of HIV infection contributing to at least three hospitalizations, each lasting 48 hours or longer, during the course of a single year when assessing limitations in ability to engage in a variety of activities of daily living or function normally in a social context.
- We oppose the proposal to eliminate the gender-specific section of the HIV/AIDS medical listings (14.00F4). We know that women experience different clinical symptoms and complications than men such as aggressive pelvic inflammatory disease (PID), recurrent and difficult-to-treat yeast infections, other vaginal infections including gonorrhea, chlamydia, and trichomoniasis, severe herpes simplex virus ulcerations, and an increased risk of precancerous changes to the cervix leading to increased risk for cervical cancer. Without the explicit and protective language identifying women's specific manifestations, there is considerable risk that women's ability to secure the benefits to which they are entitled will be jeopardized. We know, too, that the physicians who evaluate claimants for disability are not necessarily specialists in HIV/AIDS and may be even less versed in the manifestations of HIV in women. If these manifestations are not expressly articulated, evaluators will more likely overlook them or not recognize that they are tied to HIV infection.

We commend the SSA for undertaking this reexamination of HIV and the qualifications for disability and urge the agency to take into consideration the severe and debilitating nature of HIV infection so that PLWH who truly cannot work full-time are able to access benefits and maintain a reasonable quality of life.

Thank you very much for your time and attention.

Very truly yours,



Robert Cordero, MSW  
Community Co-Chair

cc: Hon. Bill de Blasio, Mayor  
Mary Bassett, MD, MPH, Commissioner of Health  
Jan Carl Park, Governmental Co-Chair

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