



Caregiver's CORNER

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Caregiver's Corner

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Caregivers Corner : SSDI Strategies

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The Process

- Your application for benefits can take between 3 and 5 months.
- Don't apply too soon to ensure that there is enough medical evidence to receive an allowance.
- If you are denied, file for reconsideration. This can take between 5 and 6 months.
- If you are denied, appeal to the Administrative Law Judge. This can take 1 – 1.5 years with a decision following 3 months later.
- If you are denied by the Administrative Law Judge, appeal to the Appeals Council. It can be up to three years before your case will be reviewed;
- **REMEMEMBER: DON'T APPLY TOO EARLY!**
- to receive an allowance.

Filing Your Application

- Answer every question honestly and accurately.
- Explain in detail how your condition affects YOUR life and limits your ability to function.
- Be sure EVERYTHING in your application corresponds with what you tell your doctor.
- List all your doctors with their correct address and phone number on the application.
- When listing medications, be very accurate when listing side effects. Even a headache or nausea is important to list!
- Feel free to repeat yourself throughout the application.
- *It is very important to answer each question independently of the other questions in the application.*

Documentation

- Be honest with your doctor about changes and problems you are having. DO NOT minimize your condition.
- Be sure your doctor is recording all your changes. Your written medical record is essential to receiving a favorable decision.
- If you feel that you are being rushed during your appointment, let the doctor know that you have important issues to discuss. This is YOUR time with the doctor.
- Keep a log and have a caregiver with you when you see your doctor. It is difficult to remember everything but if you are organized, you can ensure that everything is discussed.
- Keep in mind the nurse can help you document your issues.

Functional Capacity

- Have your doctor monitor and record changes in your functional capacity. This is key to meeting a listing for benefits.
- Keep in mind, functional capacity includes both motor AND cognitive problems.
- Discuss in detail with your doctor any and all changes including but not limited to fatigue, memory, frustration, chorea, aches and pains.

**HOW DOES SOMEONE QUALIFY FOR SOCIAL SECURITY
DISABILITY BENEFITS
WITH A DIAGNOSIS OF HUNTINGTON'S DISEASE?**

**THE SOCIAL SECURITY LISTING
REQUIREMENTS FOR
HUNTINGTON'S CHOREA**

**(as stated in the Social Security blue book: listings for
adult impairments)**

11.17 Degenerative disease not listed elsewhere, such as Huntington's Chorea, Friedreich's ataxia, and spino-cerebellar degeneration. With:

- Disorganization of motor function as described in 11.04B; or
Chronic brain syndrome. Evaluate under 12.02.

11.17 A

- 1.04B. Significant and persistent disorganization of motor function in two extremities, resulting in sustained disturbance of gross and dexterous movements, or gait and station (see 11.00C).
- 11.00C. *Persistent disorganization of motor function* in the form of paresis or paralysis, tremor or other involuntary movements, ataxia and sensory disturbances (any or all of which may be due to cerebral, cerebellar, brain stem, spinal cord, or peripheral nerve dysfunction) which occur singly or in various combinations, frequently provides the sole or partial basis for decision in cases of neurological impairment. The assessment of impairment depends on the degree of interference with locomotion and/or interference with the use of fingers, hands and arms.

11.17B

- **12.02 *Organic mental disorders***: Psychological or behavioral abnormalities associated with a dysfunction of the brain. History and physical examination or laboratory tests demonstrate the presence of a specific organic factor judged to be etiologically related to the abnormal mental state and loss of previously acquired functional abilities.
- The required level of severity for these disorders is met when the requirements in both A and B are satisfied, or when the requirements in C are satisfied.

- A. Demonstration of a loss of specific cognitive abilities or affective changes and the medically documented persistence of at least one of the following:
1. Disorientation to time and place; or
 2. Memory impairment, either short-term (inability to learn new information), intermediate, or long-term (inability to remember information that was known sometime in the past); or
 3. Perceptual or thinking disturbances (e.g., hallucinations, delusions); or
 4. Change in personality; or
 5. Disturbance in mood; or
 6. Emotional lability (e.g., explosive temper outbursts, sudden crying, etc.) and impairment in impulse control; or

7. Loss of measured intellectual ability of at least 15 I.Q. points from premorbid levels or overall impairment index clearly within the severely impaired range on neuropsychological testing, e.g., Luria-Nebraska, Halstead-Reitan, etc;

AND

B. Resulting in at least two of the following:

1. Marked restriction of activities of daily living; or
2. Marked difficulties in maintaining social functioning; or
3. Marked difficulties in maintaining concentration, persistence, or pace; or
4. Repeated episodes of decompensation, each of extended duration;

OR

- B. Resulting in at least two of the following:
 - C. Medically documented history of a chronic organic mental disorder of at least 2 years' duration that has caused more than a minimal limitation of ability to do basic work activities, with symptoms or signs currently attenuated by medication or psychosocial support, and one of the following:
 1. Repeated episodes of decompensation, each of extended duration; or
 2. A residual disease process that has resulted in such marginal adjustment that even a minimal increase in mental demands or change in the environment would be predicted to cause the individual to decompensate; or
 3. Current history of 1 or more years' inability to function outside a highly supportive living arrangement, with an indication of continued need for such an arrangement.
- 1. Marked restriction of activities of daily living
- 2. Marked difficulties in completing work

Mixed Dementia

- With a diagnosis of Mixed Dementia, a compassionate allowance is granted.
- Upon receipt of medical evidence meeting the listing for Mixed Dementia, benefits will be approved without delay;
- However, this approval will not affect waiting periods, the onset of payment or income qualification for benefits.

Questionnaires

- **Social Security Disability Determination Services will require you to complete questionnaires concerning your daily living and pain.**
- **Answer each question as honestly and accurately as possible.**
- **You can write as much as you like! Feel free to repeat yourself!**
- **Answer each question independently of the other questions.**

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- To access this presentation, go to www.hdsa.org and scroll down the home page until you come to the link for the webinar. There will be an accompanying Powerpoint presentation that will allow you to print the slides out as well as a PDF file of additional information.
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