



Applying for Disability Benefits: The SSA Perspective

Office of Disability Policy



The Social Security Act: Two Disability Programs

Social Security Disability Insurance (SSDI):

- Title II (Est. 1954)
- Funded through FICA (Social Security) taxes
- Benefits based on **WORK**

Supplemental Security Income (SSI):

- Title XVI (Est. 1972)
- Funded through the General Fund
- Benefits based on **NEED**



Social Security's Definition of Disability

- The inability to engage in any **substantial gainful activity**
(2016 amount is **\$1,130** per month)
- By reason of any **medically determinable impairment(s)** (MDI) (**physical or mental or combination**)
- Which can be expected to result in **death or**
- Which has lasted or can be expected to last for a continuous period of not less than **12 months**

SSA does NOT pay partial or short-term disability benefits

- Definition is the **SAME** for both disability programs



Title II – SSDI

Date last insured: To be eligible for SSDI, you must meet recent work and duration of work tests

TIP: File for disability promptly after you stop working due to effects of Huntington's disease

For more information on the earnings requirement:

<https://www.ssa.gov/pubs/EN-05-10029.pdf>

- Monthly disability benefit is based on your average lifetime earnings
- 5-month waiting period after disability benefits are awarded
- Eligible for **Medicare** after two years



Title XVI – SSI

Makes monthly payments to:

- Adults who have limited income and resources
and are age 65 or older **OR** are blind or disabled
- Disabled children from birth to age 18 who have limited income and resources
- Eligible for Medicaid
- **Means-tested:** To be eligible for SSI, you must have limited income and resources

For more information on eligibility for SSI:

www.socialsecurity.gov/ssi/text-eligibility-ussi.htm



Medicare and Medicaid Coverage

Medicare

- People who qualify for SSDI also qualify for Medicare
- Enrollment is automatic after being entitled to disability benefits for 24 months
- Information is provided several months before coverage starts
- Centers for Medicare and Medicaid Services (CMS) oversee the program

Medicaid

- People who qualify for SSI also qualify for Medicaid
- Administered by the state



Sequential Evaluation

The disability determination follows a **sequential evaluation** process:

1. **Substantial Gainful Activity (SGA)?** – The 2016 SGA amount is **\$1,130**
2. **Severe impairment(s)?** – The medically determinable impairment(s) must significantly limit the ability to do basic work activities (for example, walking, sitting, or remembering)
3. **Meets or medically equals a listing?** – The listings describe impairments for 14 body systems for adults and 15 for children

www.socialsecurity.gov/disability/professionals/bluebook



Sequential Evaluation (cont.)

4. **Prevents past relevant work?** – We determine the claimant's Residual Functional Capacity (RFC) based on the combination work-related limitations resulting from the physical and mental impairments. This RFC is compared to the claimant's past relevant work as the claimant actually performed it and how it is generally performed in the national economy.
5. **Prevents other work?** – We compare the claimant's RFC and vocational factors (age, education, and past work experience) to the work in the national economy.



Establishing the MDI

If you are not performing SGA, we move on to consideration of your medical conditions.

We require a **medically determinable impairment (MDI)** that is established by documentation of:

- Medical history,
- Signs and symptoms, and
- laboratory findings

TIP: The more information you can give us about where you get treatment, the easier it is to obtain records, which will in turn help to give you a decision faster.

TIP: Promptly signing forms, such as authorizations to release information, helps to avoid delays as cases move along through the process.



Evaluating Disability

SSA evaluates impairments, such as Huntington's Disease, by considering its effects on **physical** and **mental** functioning

Examples include:

- Physical limitations, such as gait and station or gross and fine motor movements
- Cognitive limitations, such as memory loss
- Emotional limitations, such as depression
- Behavioral limitations, such as a change in personality

SSA does not determine disability based on diagnosis alone



Evaluating Disability (cont.)

SSA may evaluate the effects of Huntington's Disease by considering the criteria in:

- Neurological listing **11.17** (degenerative diseases)
- Mental listings **12.02** (Organic mental disorders), **12.04** (affective disorders, and **12.06** (anxiety-related disorders)

OR, if necessary,

By considering physical/mental RFC and the claimant's ability to do past relevant work or other work

- Sustainability (ability to do work activities in an ordinary work setting on a regular and continuing basis, 40 hours a week)
- Basic mental demands of unskilled work (for example, the ability to understand, remember, and carry out simple instructions)



Evaluating Disability (cont.)

TIP: It is helpful for us to have a statement from the claimant's treating physician providing his or her medical opinions about:

- The claimant's physical and mental functioning
- What work-related activities the claimant can or cannot perform on a sustained basis (40 hours a week)
- The reasons for those opinions (such as, the clinical findings or clinical observations)



Evaluating Disability (cont.)

Anyone who is familiar with the claimant's daily functioning (for example, a spouse, a caregiver, or a friend) can give us evidence

SSA Function Reports:

- SSA-3373 (Function Report – Adult)
www.socialsecurity.gov/online/ssa-3373.pdf
- SSA-3380 (Function Report – Adult – Third Party)
www.socialsecurity.gov/online/ssa-3380.pdf

TIP: Describe how the claimant's condition limits his or her daily activities or give a “diary” of a typical day



Childhood Claims

A “**child**” is an individual under age 18. We follow a three step process for childhood claims:

1. Was there any substantial gainful activity?
2. Does the child have a medically determinable impairment(s) that is severe?
3. Does the impairment(s) meet, medically equal, or functionally equal the medical listings.

For functional equivalence, we evaluate the child’s functioning in 6 domains: acquiring and using information, attending and completing tasks, interacting and relating with others, moving about and manipulating objects, caring for themselves, and health and physical well-being.



Applying for Disability Benefits

The claimant can:

- **Apply online** at www.socialsecurity.gov

OR

- **Schedule an appointment** by calling SSA's national 800 number (1-800-772-1213) or contacting the local Social Security Office



my Social Security

- Online account that allows people quick, convenient, and secure access to their personal Social Security record
- If you already receive benefits, you can:
 - Get a benefit verification letter
 - Change your address and phone number
 - Start or change direct deposit of your benefits payments
 - Get a replacement Medicare card
 - Get a replacement SSA-1099 or SSA-1042S
 - Get a replacement Social Security card (in some states)
- If you do not receive benefits, you can use *my Social Security* to estimate benefit amounts, access your earnings records, and estimate the Social Security and Medicare taxes you've paid



The Field Office Disability Interview

During the Field Office interview, the Claims Representative (CR) explains to the claimant:

- SSA's definition of disability
- Program requirements
- The disability process

The CR also obtains the required applications and forms (for example, a medical release authorization)

After the interview, the CR forwards the to the **Disability Determination Service (DDS)** office (usually located in the state where the claimant lives)



The Disability Determination Service (DDS)

- The DDSs are **State agencies** responsible for developing medical evidence and rendering the initial determination on whether a claimant is disabled or blind under the Social Security Act
- The DDSs are fully funded by the **Federal Government**





Case Development Process

Types of evidence include:

- Medical records
- Vocational information
- Activities of daily living report
- Third-party information (for example, a letter from a spouse, a caregiver, a friend, or a teacher)



The DDS Disability Examiner

The DDS Disability Examiner (DE) reviews the electronic claim for:

- Disability reports
- Medical release authorization and claimant-supplied medical records
- Vocational information:
 - Age
 - Education
 - Past work information



The DDS Disability Examiner (cont.)

The DDS DE:

- Verifies that there is sufficient medical evidence to make a determination
- Verifies that all medical documentation is complete
- Requests additional evidence (if needed)
- Resolves conflicts in the evidence
- Schedules a Consultative Examination (CE) (if needed) with one or more medical experts (at SSA's expense)



The Medical Consultant and the DE

The Medical Consultant (MC) and the DE work in partnership to make disability determinations in a DDS

- The MC reviews all the medical evidence
- AND
- Assists the DE in:
 - Case Analysis
 - Physical Residual Functional Capacity Assessment
 - Mental Residual Functional Capacity Assessment



The Disability Determination

- Over 3.3 million claims were reviewed at the initial and reconsideration level in fiscal year 2015
- Of all people awarded disability benefits, over **70%** are awarded their benefits **at the initial or reconsideration level** by the DDS
- Average processing time for claims at the initial level is 85–90 days



Appeals

There are multiple levels of appeal if the claimant is initially denied:

- Request for reconsideration by the DDS
- Request for hearing by an Administrative Law Judge (ALJ)
- Request for Appeals Council (AC) review



Overview of SSA's Hearings Level

One of the largest administrative judicial systems in the world:

- Over 1,275 administrative law judges
- Over 140 Hearing Offices throughout the Country
- Over 500,000 decisions per year



The Appeals Process

- Claimant files a request for reconsideration, hearing, or review by the Appeals Council
- Additional case development is done, if needed. Additional evidence may be requested or a CE may be scheduled
- At reconsideration, the case is returned to the DDS for reconsideration by staff who were not involved in the initial determination
- At the hearing level, the case is assigned to an ALJ, and a hearing is held
- Post-hearing development is done (if needed)



The ALJ Hearing

- Non-adversarial proceeding to determine if claimant is disabled
- Claimant appears before an ALJ in person or via video-teleconference
- Testimony taken under oath or affirmation
- Verbatim recording made by hearing reporter

Who may testify:

- Claimant
- Claimant's witnesses
- Vocational expert
- Medical expert
- Child's parent or guardian
- Child (if appropriate)



Compassionate Allowances

The Compassionate Allowances (CAL) initiative allows us to quickly identify conditions (based on **claimant allegations**) that invariably meet our disability standards

- CAL conditions receive **expedited processing** but the claimant's condition still has to meet the definition of disability
- CAL claims are evaluated under the same sequential evaluation process as all other claims
- For more information on CAL go to:
www.socialsecurity.gov/compassionateallowances



Compassionate Allowances

- CAL is not a separate program from the SSDI and SSI programs
- Initiative began with a public outreach hearing in 2007 and 50 conditions were selected for initial rollout (October 27, 2008)
 - 100 conditions as of July 30, 2011
 - 200 conditions as of December 6, 2012
- Potential CAL conditions are identified primarily from:
 - Public outreach hearings
 - Advocacy groups
 - Social Security and Disability Determination Service communities
 - Advice of medical and scientific experts
 - Research with the National Institutes of Health (NIH)



Compassionate Allowances

- CAL list currently includes:
 - Adult Onset Huntington's Disease
 - Juvenile Onset Huntington's Disease
- Added Huntington's disease to the CAL list in 2012 (Juvenile in August and Adult in December)
- Impairment summary is available to adjudicators for making a quicker disability determination
- A majority of CAL cases are allowances



CAL Outreach: Moving Forward

- No CAL Hearings planned in the near future due to budget restraints
- Outreach to advocacy organizations via a variety of meeting formats
- You may submit written comments or provide the names of potential conditions to:

Compassionate.Allowances@ssa.gov



Questions

