

## Lesson 1 - Overview of the SSA Process



Begin your training with this introduction. Make sure that you pass each lesson quiz with a score of 70% or better before moving to the next lesson. If you need assistance, please do not hesitate to contact us. Our business motto is simple – We Succeed Together!

### The Social Security Process

The Social Security disability process is a series of actions that may or may not lead to a desired result. In this case there are two desired results, those of Social Security and those of the client. SSA's primary objective is to process cases correctly and efficiently. While the client and his representative's primary objective is an allowance determination.

Social Security makes the rules so they are holding all the cards. The only way to defeat the system is to learn exactly how the system works inside and out. You must also learn the internal politics of SSA and what motivates the employees.

This is not the kind of information you'd receive in an ordinary advocate training program. With our unique approach to training, developing this understanding is going to be a lot easier than you think.

To understand the Social Security disability process, you must have a general idea of what occurs when a claimant applies for benefits. Keep in mind that although the SSA disability program is a single national system, internal case processing procedures may vary from State to State. Our training will provide a general prospective on all case processing procedures that will enable you to better adapt to procedures in your location.

### What happens when a person applies?

A disability case begins when an individual finds that he is no longer able to perform work due to a severe impairment or injury. A "Severe Impairment" is defined by Social Security as any impairment that causes a physical or mental limitation. However, just having a severe impairment does not mean that a person is disabled by SSA's definition.

SSA's definition of a total disability is the foundation of the entire disability program. If your client's meets SSA's definition, he will be awarded benefits.

Social Security defines a total disability as:

A severe mental or physical impairment that is:

- a) Expected to last 12 continuous months or longer.
- b) Prevents all work activity.
- c) Is medically documented.
- d) Or the impairment is believed to be terminal

Unless marked as terminal, the claimant's impairment must also cause physical or mental limitations that would significantly interfere with a person's ability to perform or sustain work. If a person does not meet this definition, he will not be found disabled.

When ready to apply, the disabled individual can contact his local Social Security District Office to begin the process. A person can apply for benefits by phone, mail, online or in person. Most applications are now occurring online. An applicant can apply alone or with the assistance of a representative. The appropriate forms for the application level are completed by the applicant and submitted to SSA.

The client's application is sent to a central processing center and a paper copy is generated for the client's signature. Electronic signature is also available to shorten this process. When the signed forms are returned to SSA, the case is officially opened. An advocate also completes the SSA-1696 Authorization to Represent form during the online application process. A signed copy of the SSA-Form 1696 will be required to make it official.

For your convenience, we have provided a link to SSA's online Application website in your Syllabus. After completing your course, access this site and learn how the SSA application system works.

During the application process, a claimant fills out a number of forms giving information about his/her condition, medical sources, income, etc. The Social Security Administration (SSA) will use this data to determine the client's eligibility to apply for benefits.

If the claimant meets the SSA's income and resource requirements, he/she continues the application process. If the claimant does not meet SSA's income and resource criteria, the

application is cancelled. There is absolutely nothing you can do for a client who does not meet SSA's income and resource criteria for a given case type.

There are **two** levels of eligibility that the claimant must meet in order to receive benefits:

1. Eligibility to apply, which is based on income and resources.
2. Eligibility to receive benefits, which is based on the severity of the applicant's disorder.

If the applicant meets SSA's income and resource requirements, he/she is then allowed to apply. The applicant may then submit medical proof that he/she suffers from a severe impairment. As previously mentioned, a disability advocate cannot help a claimant meet SSA's income eligibility requirements. The advocate can help the applicant meet Social Security's medical eligibility requirement to receive benefits. In fact, it is the primary duty of a disability advocate to assist the applicant in meeting SSA's medical criteria. This is done by making sure that all aspects of the applicant's impairment are considered by SSA before the final decision is rendered.

## Case Types

There are many different types of disability claims. However, for our purposes, there are only two general case categories:

1. Social Security Disability Income (SSDI) Title 2.
2. Supplemental Security Income (SSI) Title 16.

Social Security Disability Insurance (SSDI) are cases for those who have paid into the FICA system during their working years. If a working person pays into the SSDI system for a long enough period, he/she is said to be insured. Insured means that the person is eligible to apply for the much higher SSDI cash benefit.

A Supplemental Security Income (SSI) is usually a benefit reserved for children or persons with very limited work histories. These individuals will not have paid enough into the system to be insured. However, if these individuals meet SSA's very low income and resource criteria, they can receive these benefits. As an advocate, you want to avoid SSI cases except under special

circumstances. You'll learn why later in the course.

## Application Levels

For training purposes, there are three basic application levels:

1. Initial
2. Reconsideration/ -1st Appeal/Hearing
3. Administrative Law Judge (ALJ)

We recommend that a Disability Advocate restrict representational services to the above three levels. Our experience has shown that if you haven't won the case by the ALJ level, you will probably never win. We know of no law prohibiting an Advocate from representing a case at the Appeal Council level however, the Appeal Council level is far more formal than an ALJ appeal and is best left to attorneys or advocates with wide experience.

## The Initial Application Level

An initial claim is usually done online or at the claimant's local District Office (DO). Once processed, the application is sent to the Disability Determination Section (DDS) and the Claims Examiner is assigned to the case. This person is responsible for developing, evaluating and making a final decision in the case. The examiner makes this decision in conjunction with a medical professional, usually an MD or Psychiatrist.

If it was not already done at the DO, an Examiner will contact all medical sources listed in the claimant's application, requesting evidence related to the claimant's alleged impairment. The examiner may also contact the claimant for additional information about his/her condition or for details about the claimant's past work history. As the claimant's authorized representative, you have both the right and the responsibility to review these records on your client's behalf.

The DDS Examiner and in-house medical adviser will review the client's medical records looking for ways to deny the case. The Disability Advocate will review the same medical and vocational data looking for evidence that supports the claimant's inability to perform work. Among experienced Disability Advocates, this back and forth between the advocate and SSA is sometimes referred to as "The Game".

In “The Game”, the Disability Advocate is pitting his/her argument against that of the SSA employee. This is a tricky situation for the Advocate, so a properly trained advocate must understand a number of simple strategies to use in the client’s defense. You’ll learn these important strategies later in the program.

## The Initial Decision

When the DDS Examiner receives all of the client's available medical and vocational evidence, the case is evaluated to determine if it meets SSA’s criteria for a total disability as defined in the Code of Federal Regulations. The steps the Examiner follows in determining disability are called the **Sequential Analysis** process.

Using the Sequential Analysis process, the Examiner makes a decision. He or she may get the assistance of a staff physician to determine the level of impairment severity, but the decision is ultimately the Examiner's responsibility.

If the case is denied, the DDS Examiner prepares a Personalized Denial Notice (PDN) and a Technical Rationale (TR) explaining why the case was denied. The case materials and decision notices are sent back to the claimant’s local District Office (DO). The DO then mails the decision letter to the claimant and his/her authorized representative. The case will remain at the local DO for sixty days or until the claimant or representative requests an appeal.

## An Important Change

Many Disability Advocates don’t accept cases at the Initial level because acquiring the necessary evidence of record can take a lot of footwork. However, there are subtle but extremely important advantages to accepting a case at the Initial Level even if you don't win right away.

In the early days, Disability Associates recommended that the Advocate not enter a case until the Reconsideration or ALJ levels. After years of experience (not to mention trial and error), we've discovered that assisting in the initial claim can provide a unique opportunity to create a stronger case for the appeal level. Of course, this only holds true if the case has good evidence that can support a win.

A case prepared at the initial application level by an Advocate usually results in

more allowances at the appeal levels. This occurs because representation at the initial level can help to avoid many of the common errors that result in a denial decision. Guiding a case at the Initial Level can also save time because you may be able to win early and avoid the appeal process altogether.

## The Reconsideration Appeal

You'll most often enter a case at the Reconsideration level. Why? Because SSA employees often tell applicants that they don't need a representative at the Initial Level. By the Reconsideration Level, the claimant will no longer be willing to take SSA at its word and he'll seek serious representation. If the claimant is aware of a disability advocacy service, at this point he'll seek it out.

Entering a case at the Reconsideration Level will still give you ample time to review the evidence previously accumulated. You can submit additional medical evidence at reconsideration to boost your argument. You can also strengthen a reconsideration case by alleging additional impairments or limitations. These new allegations must be supported by the claimant's medical evidence in order to be accepted by SSA.

Although new evidence or additional impairments may help to win a disability case, they may also slow down the reconsideration process. This fact should not stop you from acquiring new evidence or adding allegations if they are substantiated by medical evidence. Your primary obligation as an Advocate is to win your client's case. Speed is secondary!

## The Appeal Process

If the claimant chooses to appeal, either the claimant or the representative must file the appeal within (sixty days) of receiving the denial notice. The above actions will initiate a reconsideration appeal.

When notified of the Reconsideration request, the DO will send the case back to the Disability Determination Section (DDS) or in some states, will allow you the option of a face-to-face hearing. If the case is returned to the DDS, it will contain all medical reports from the initial application. The case is assigned to a different DDS Examiner for review.

If the claimant has seen a medical doctor since the last decision, you must get a copy of that report and send it to the DDS. This is especially true if the

evidence shows a worsening of the claimant's condition! The Examiner will send for this new information only if he/she is made aware of its existence by the claimant or representative.

The case is again evaluated at reconsideration or 1st Appeal and a decision is made. If the decision is a denial, the client and representative notice process will be repeated. The claimant and representative will or should be notified by mail of the SSA's decision. The claimant will be given another sixty days to request an appeal to the Administrative Law Judge (ALJ).

Please note that some states use hearings at both the Reconsideration and ALJ levels. A hearing is simply a face-to-face review of the claimant's application. A Reconsideration face-to-face hearing is small, informal and is usually conducted by a Hearings Officer or Administrative Law Judge.

### [Administrative Law Judge \(ALJ\) Appeal](#)

The next appeal level is the Administrative Law Judge (ALJ) appeal. At this level the claimant definitely needs help from a professionally trained advocate. If you took the case at the Reconsideration Level and received a denial notice, you would automatically contact the DO in writing to request an ALJ Appeal for your client. You'll submit various forms to start the ALJ appeal process just as in the first applications.

### [The Appeal Counsel](#)

This appeal is available to those denied at the ALJ appeal level. As previously mentioned, we believe that if you haven't won the case by the ALJ chances are you'll never win it. This doesn't mean that you can't take a case to the Counsel. If you feel that the client has been discriminated against by the process, this is the time to consider this level.

### [The Formal Argument](#)

You are not required to write a formal argument in a disability claim. However, a formal argument is the best way for an advocate to state the specific reasons why you disagree with SSA's decision. Submit a formal argument if you feel it will better explain your position on the issues. An argument should attempt to clarify the issues within the case in the client's favor. Composing a formal

argument can also help you to stay focused on the key case issues.

## Summation

In this lesson you have been given a superficial overview of the Social Security disability process. You can test your newly found knowledge by taking the lesson one quiz. Please do not move to the next lesson until you have acquired a score of at least 70% on the lesson quizzes.

## Preview of Lesson Two

In Lesson Two of your training course, we will repeat the above steps in the disability process adding additional details as we proceed. This repetitive approach will help you to better understand the overall Social Security disability process.

## Assignment

Read Chapter 1 of the Social Security Guide. Take the lesson 1 Quiz.