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Hypoparathyroidism Conference

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Hypoparathyroidism and Social Security Disability from a Social Security Disability Judge’s Perspective
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SSA’s Two Disability Programs

Social Security Disability Insurance (SSDI)

Supplemental Security Income (SSI)
Social Security Disability Insurance

Paid for by Social Security taxes
Based on a record of earnings for work you performed under Social Security
5-month waiting period after disability benefits are awarded
Monthly disability benefit is based on your average lifetime earnings
Eligible for Medicare after two years
Supplemental Security Income

Means-tested program
Eligible for Medicaid
Makes monthly payments to:

Adults who have limited income and financial resources and are age 65 or older, blind, or disabled

Disabled children from birth to age 18
The inability to engage in any substantial gainful activity
By reason of any medically determinable impairment(s) (physical or mental)
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
Medically Determinable Impairment(s)

A physical or mental impairment
Resulting from anatomical, physiological, or psychological abnormalities
Which can be shown by medically acceptable clinical and laboratory diagnostic techniques
And must be established by medical evidence consisting of signs, symptoms, and laboratory findings
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
During the interview, the Claims Representative (CR) explains to the claimant:

SSA’s definition of disability
The disability process
Program requirements
The CR also obtains the required applications and forms, including release slip.
After the interview, the CR forwards the electronic claim from the SSA Field Office to the Disability Determination Services (DDS) office usually in the state where the claimant lives.
The DDS is a State agency responsible for developing medical evidence and rendering the initial determination on whether a claimant is disabled or blind under the Social Security Act.

DDSs are fully funded by the Federal Government.
The DDS 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 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:
- MER
- CE
Case Development Process

Types of evidence include:
Medical records
Vocational information
Activities of daily living and pain questionnaire
Third-party information (for example, a teacher questionnaire in the case of a disabled child claim)
Transmittal of Evidence

The DDS receives evidence via:
Mail
Telephone
Fax
Electronic Records Express (ERE)
Health Infometrics
Most evidence is routed directly to a national scanning contractor that scans documents for SSA and DDS offices.

Paper documents received by the DDS are scanned onsite and added to the electronic folder.

In an electronic folder environment, the DE must work entirely with electronic data.
Is the evidence sufficient to make a disability determination OR is the evidence insufficient?
The MC works with the DE to make disability determinations in a DDS.
The MC reviews all the medical evidence. Assists the Disability Examiner in:

- Case Analysis

- Physical Residual Functional Capacity Assessment

- Mental Residual Functional Capacity Assessment
Evidence is Sufficient

The DE and MC work in partnership to make a disability determination.

The DE and MC must consider all the evidence.
Sequential Evaluation

1. Substantial Gainful Activity (SGA)? - The 2014 SGA amount is $1,070.

2. Severe impairment(s)? - The impairment(s) must significantly limit the person’s ability to perform one or more basic work activities.

3. Meets or medically equals a listing? - The listings describe impairments for 14 body systems.
4. Prevents past relevant work?–Compare the claimant’s Residual Functional Capacity (RFC) with the claimant’s past relevant work as the claimant described it or as generally performed in the national economy.

5. Prevents other work? –Compare the claimant’s RFC and vocational factors (age, education, and work experience) to the Medical-Vocational Rules.
The Initial Determination

If the determination is favorable, the Field Office is automatically alerted that the case is complete.

If the determination is unfavorable, the Field Office is alerted, and a personal denial notice is prepared and sent to the claimant.
The claimant can appeal an unfavorable determination.

In some states, case is returned to the DDS for reconsideration by staff who were not involved in the initial determination.

Additional evidence (if any) or a CE (if necessary) is requested.

A new determination is made.
Request for an Administrative Law Judge (ALJ) and Appeals Council (AC) review:
The claimant has 60 days from the day of a reconsideration-level determination to request a hearing before an ALJ.
The claimant has 60 days from the date of a hearings-level decision to request an AC review.
Overview of SSA’s Hearings Process

The largest administrative judicial system in the world:
Over 1,200 federal administrative law judges
Over 165 hearing offices throughout the country
Over 550,000 decisions per year
Claimant files a hearing request.

Pre-hearing case development is done (if needed).

Case is assigned to an ALJ, and a hearing is held.

Post-hearing development is done (if needed).

ALJ renders a decision, at which point the 60-day period to appeal to the AC begins.
The 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
Child’s parent or guardian
Claimant’s witnesses
Vocational expert
Medical expert
The claimant, the claimant’s representative/attorney, and/or the ALJ may ask the witnesses questions.
SSA evaluates hypoparathyroidism by evaluating its effects on various parts of the body and by considering the listings in the following body systems.

For example:

Bones and muscles – musculoskeletal

Lenticular cataracts – special senses
Hypoparathyroidism (cont.)

Arrhythmia and heart block –cardiovascular

Kidney dysfunction –genitourinary

Tetany and convulsions –neurological

Confusion, memory, loss and depression –mental

Fatigue in ability to sustain work –Residual Functional Capacity
SSA considers:
All the medical evidence
Your statements about the intensity and persistence of pain or other symptoms
The impact of all medical signs and symptoms on your functioning
If your impairment does not meet or medically equal a listing (a Step 3 determination), SSA will evaluate its effects under Step 4, and under Step 5 (if necessary) of the Sequential Evaluation process.
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Thanks

Any Questions?

Comments