

Social Security Disability Examination

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Introduction

The Social Security Administration (SSA) has the responsibility for evaluating applications for Social Security Disability Insurance, or SSDI. The SSA contracts with state agencies—called Disability Determination Services (DDS) in each state to perform these services. The SSA’s national headquarters is located in Baltimore, and oversees operations through ten regional offices. The Social Security Act provides benefits granted on the basis of “impairments”, as defined in the Social Security Act.

- SSDI is program for those who have paid into the system (FICA) and earned “quarters of coverage.”
- SSI is a needs based program.

Qualifying criteria include the anticipated length of the disability and a set of accepted disabling medical conditions that cause impairments. These criteria define the degree of functional impairment that sets the qualifying threshold for disability benefits. The law defines disability as “the inability to engage in substantial gainful activity by reason of a medically determinable impairment which can be expected to result in death or which has lasted or can be expected to last for 12 continuous months.” The disability program evaluates a claimant’s remaining *functional capacity* to perform *any* type of work in the national economy.

Why should psychiatrists perform Social Security Disability Evaluations?

There are several advantages to conducting regular Social Security Disability Evaluations.

- They offer concentrated practice in conducting efficient assessments of a relatively wide variety of patients
- They present an opportunity to refine conceptualization, writing, and dictation skills
- They are an effective way of filling gaps in a schedule with guaranteed payment
- They can serve as an entrée to becoming involved in other types of psychiatric disability evaluations because of the contact they afford with the legal community

- They present an opportunity to provide quality professional services within the public sector with few of the problems or difficulties often associated with such work.

How to become an examiner

The Social Security Administration contracts with physicians to perform evaluations of individuals who have applied for benefits. Claims examiners or administrative law judges may request psychiatric evaluations to develop evidence necessary for a decision. Medicare is added after a defined period of disability.

Call your local Social Security Office or use your Internet search engine to locate the telephone number for your state's Disability Determination Service to arrange to become an examiner. For example, type "**disability determination services**" in the Google search engine, and locate the telephone contact information for your state.

The Psychiatric Evaluation

A psychiatric evaluation consists of a review of medical records provided by the DDS, a face-to-face psychiatric evaluation of the applicant, and the provision of a written report. The report follows a standard psychiatric evaluation format, with particular attention to several routine questions that should be addressed in the Summary and Discussion section of the written report. The Disability Determination Services usually provides a suggested outline. The outline for child psychiatric evaluations is more complex, but straightforward for those with child training. The SSA is interested in *facts and evidence based conclusions* as they bear upon impairments of specific functional capabilities. Specific observations and reporting of the claimant's Activities of Daily Living, along with relevant psychiatric history, and a fact based Mental Status Examination are crucial to the exam's utility. The DSM-IV is used.

The Psychiatric Review Technique Form SSA-2506-BK (9-2000)

The Psychiatric Review Technique Form SSA-2506-BK (9-2000) reinforces the importance of providing *data* to support conclusions in the evaluations conducted for SSA, and not simply diagnostic conclusions based on a vaguely stated history and sketchy mental status examination. This form contains several sections (A, B, and C), the most important of which describes symptoms or behaviors to be checked as present or absent for the following categories of disorders. The 12.**XX** numbers represent the "category" of the disorder.

1. 12.02 Organic Mental Disorders
2. 12.03 Schizophrenic, Paranoid and other Psychotic Disorders
3. 12.04 Affective Disorders
4. 12.05 Mental Retardation and Autism
5. 12.06 Anxiety Related Disorders
6. 12.07 Somatoform Disorders
7. 12.08 Personality Disorders
8. 12.09 Substance Addiction Disorders
9. 12.10 Autism and Other Pervasive Developmental Disorders

Each of these categories is provided with a specific set of criteria by which its absence or presence is judged.

For example, for 12.03 the test is:

“Psychotic features and deterioration that are persistent (continuous or intermittent), as evidenced by at least one of the following:

- 1) Delusions or hallucinations
- 2) Catatonic or other grossly disorganized behavior
- 3) Incoherence, loosening of associations, illogical thinking, or poverty of content of speech if associated with one of the following;
 - a. Blunt affect, or
 - b. Flat affect, or
 - c. Inappropriate affect.

Significant modifications in what are termed the **“B” criteria** were introduced effective September 20, 2000, and are reflected in the following description:

1. Restriction of Activities of Daily Living
2. Difficulty in Maintaining Social Functioning
1. Deficiencies of Concentration, Persistence or Pace; [deleting “resulting in Failure to Complete Tasks in a Timely Manner” effective Sept. 20, 2000]
2. Episodes of Decompensation, each of extended duration. [This was modified to eliminate “deterioration in work or work-like settings”.]

To satisfy the **listings requirements**, the impairment must be at least “marked” or greater in two or more of the four areas of functional limitation. [This was modified to standardize the necessary number of “B” criteria from 3 to 2 for Somatoform Disorders and Personality Disorders.] An extreme rating on any of the first 3 criteria will satisfy the listings requirements, as will a rating of “4 or more” for criterion 4.

“C” criteria for chronic disorders are now included in the Listings **12.02 Organic Mental Disorders, 12.04 Affective Disorders, in addition to 12.03**

Schizophrenia. The “C” criteria are considered if the “B” criteria are not met. This modification was effected because of the realization that an additional test of functional limitation was necessary for conditions that tend to be chronic and disabling, but that might not meet the severity requirements of the “B” criteria. Documentation must show a chronic disorder of at least two years’ duration that has caused “more than minimal limitation of ability to do basic work activities.” An inability to function outside a highly supportive living arrangement need only have lasted one year, reduced from two years. *A third “C” criterion has been added addressing individuals who are marginally adjusted and for whom an even minimal increase in mental demands or change would be predicted to cause the individual to decompensate.*

Mental Residual Functional Capacity Assessment Form

The **“Mental Residual Functional Capacity Assessment”** (Form SSA-4734-F4-SUP) is a measure of the claimant’s ability to perform functions necessary to employment. Each mental activity is to be evaluated within the context of the individual’s capacity to sustain that activity over a normal workday and workweek, on an ongoing basis.

The general areas are titled:

- A: Understanding and Memory (3 measures)
- B. Sustained Concentration and Persistence (8 measures)
- C. Social Interaction (5 measures)
- D. Adaptation (4 measures)

The social security examiner may request this form, as may a hearings judge, or an attorney representing the applicant at the hearings stage of the appeal process.

Conduct of the evaluation

The purpose of the psychiatric evaluation should be explained to the claimant. The examinee should be advised of the limitations on confidentiality associated with their status as an applicant for SSDI. They should be advised that the interview is for evaluation purposes only, and that it is not for treatment. They should be informed that a copy of the evaluation would be provided to the Social Security Administration.

All applicants are asked to read and sign a disclosure form that documents that they have been told that no medical treatment will be provided and that no doctor patient relationship is being established.

If applicants wish to have a copy of their evaluation provided to a third party, they should request DDS to provide the copy, using the form provided. This limits concern regarding confidentiality violations, and places the examinee in control of their own medical information. This practice is particularly advisable, as the SSA guidelines for information release have changed many times over the last several years.

Conduct the examination according to the standard format outline provided by DDS. Consider developing a form to be used with your word processor, as that speeds the transcription process and will help you to remember the necessary areas of inquiry.

- Record primary data, including liberal use of quotes, accumulated during the evaluation.
- State the specific findings on the mental status examination directly.
- Avoid statements such as “concentration and memory are grossly normal” in favor of facts.

As an example: “The patient was able to recall three out of three dissimilar objects at 5 minutes and was able to repeat 7 digits forward and 5 digits backward”. One might utilize a prepared evaluation format, which helps to avoid omissions. The evaluation should be dictated, as it is possible to produce a meaningful 4–6–page report within 5 or 10 minutes given sufficient practice and experience. For transcription purposes, you might create a formatted word processing file that contains relevant headings, which will save a significant amount of typist time. One proofreading is all that is normally required. This will make it possible to conduct the evaluation and issue a report within 24 hours. Because the history and the overall feel for the flow of the evaluation are crisper during the day it is performed, most clinicians prefer to dictate their report immediately after it is completed.

The Social Security Disability Psychiatric Evaluation requires diagnoses utilizing the DSM–IV format. You will be asked to comment on the degree and duration of functional limitation resulting from the diagnosed condition.

- These requests are made explicit in the evaluation request.

- Avoid offering diagnoses of mental retardation in the absence of formal psychological testing, and remember when they are made, that such diagnoses belong on Axis II.

Provide an evaluation of the claimant's ability to manage his or her own funds, as this will determine whether or not a representative payee is named if benefits are awarded. Include an opinion regarding the prognosis of the condition with treatment, and an opinion concerning the necessary length of psychiatric treatment.

Summary of Main Points:

1. Obtain a signed informed consent form; explain the purpose of the evaluation, and explain how the information will be distributed. Treat claimants courteously. You are a neutral professional, and you are not an adjudicator.
2. Conduct a standard psychiatric evaluation utilizing the DDS guidelines. Record the primary data you obtain in the evaluation to clarify and substantiate your conclusions. Your opinion must be supported by facts and evidence which will be given weight by the examiner or by an Administrative Law Judge that hears an appeal of an earlier adverse decision of an application.
3. Employ DSM-IV diagnostic criteria in your diagnosis section.
3. Specifically answer the examiner's questions regarding the claimant's prognosis with treatment, and the claimant's ability to manage his/her own funds.
5. Provide your report promptly to DDS.
4. If you for any reason feel that it would be unsafe for you to begin or continue an evaluation, cancel it, and notify DDS of your reasons. It may be necessary for the evaluation to take place within a secure facility.

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Primary link

<http://www.ssa.gov/disability/professionals/bluebook/>

This is the "Blue Book" published by the SSA, on line. The home page is included in this file. It contains all of the rules and regulations regarding SSI and SSDI.

You will find links for adult and pediatric populations, with separate sections for mental health impairments.