

What Does It Take To
Qualify for Disability Benefits

Mental Illness and Social Security Disability:

A Practical Guidebook for Individuals, Families, and Mental Healthcare Providers

NOSSCRTM

National Organization of Social Security Claimants' Representatives

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**Mental Illness and Social Security Disability:
A Practical Guidebook for Individuals, Families,
and Mental Healthcare Providers**

By:

Social Security Disability Attorneys

Tim Cuddigan Sean Cuddigan Philip Martin

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What You Need To Know Now

Mental health disorders are now the most common reason for Americans to be classified as disabled by the Social Security Administration (SSA). According to the most recent statistics, more than 10 million Americans are receiving Social Security Disability Insurance (SSDI) or Supplemental Security Income (SSI) benefits. This includes disabled workers, disabled widowers and disabled adult children. Of the total in all three groups more than 3.5 million (35.5 percent) are classified as disabled due to a mental illness (including intellectual disabilities).

Qualifying for disability benefits due to a mental disorder is complex and difficult.

Social Security is going to ask you a lot of questions to determine if your mental condition qualifies for disability payments. Does the condition cause you to be absent from work too often? Are there many days when you just can't get out bed? Do you have problems concentrating on a task or remembering instructions at work? Do you have trouble keeping up with production quotas?

SSA will also want to know how well you can carry out activities of daily living. Activities of daily living are simply the normal, basic things that most people must do in life, such as bathing, getting dressed, cooking, cleaning, shopping, etc. Social Security also uses social functioning as another indicator to determine the severity of a mental disorder. Social Security will evaluate your ability to communicate and relate to family, friends, co-workers and those in the public arena to determine if you are able to function independently, appropriately, and effectively.

In considering an application for disability benefits, Social Security is also going to ask about treatments and medications. They will want to know for how long you have been treated and if the treatments or medications improved your condition and what are the side effects.

Statistics show that a person dealing with a mental illness is no less likely to be awarded benefits than a person with a physical disorder.

That's the good news. However, it is difficult for everyone to qualify for benefits. More than two out of three initial applications for Social Security disability benefits are denied, and fewer than four in ten are approved after all levels of appeal.

Social Security's typical response to people with severe mental problems who apply for disability is that they can work at simple unskilled jobs. We know, from experience that mental health disability cases are not easy to win, but they can be won, if the case is properly documented.

Often times the question is not whether or not you are able to work but rather whether you are able to sustain work. It is critical to prove how your limitations interfere with your ability to hold a job over the long haul.

The process can be slow, frustrating, and disheartening especially when you are in real need of the benefits you paid for with your Social Security taxes.

More than 60% of applicants who are denied SSDI or SSI benefits the first time they apply simply give up in frustration. Many people would have been eventually awarded benefits if they kept fighting for the benefits they paid for.

Don't give up!

Types of Disability Payments

There are two kinds of disability payments allowed under Social Security law:

1. **Social Security Disability Insurance (SSDI)** pays benefits to you and, in certain circumstances, dependent children if you are disabled and you worked long enough and paid Social Security taxes.

2. **Supplemental Security Income (SSI)** is based on financial need. The Social Security Administration says, "It is designed to help aged, blind, and disabled people, who have little or no income."

Listings.

The Social Security Administration maintains a list of impairments with detailed requirements for when the SSA should judge a mental or physical condition to be disabling. If an individual matches the requirements in the listings (also called the "Blue Book") they automatically qualify for disability payments.

In 1984, Congress overhauled the SSA disability program and, among other changes, revised the listings for mental conditions. The revised listings for mental impairments reduced the weight given to medical factors and put a greater weight on functional capacities, such as the applicant's ability to perform activities of daily living. They also required that evidence provided by the applicant's healthcare provider be considered first, before an examination with a doctor hired by the Social Security Administration.

Most individuals with mental health issues don't match up exactly to the Social Security's listings and therefore do not automatically qualify for benefits. Nevertheless, they can qualify for benefits by proving they are not able to sustain work activity due to a mental health disorder.

What is Disability as Defined by Social Security?

According to the Social Security Administration, “the definition of disability under Social Security is different than other programs. Social Security pays only for total disability. No benefits are payable for partial disability or for short-term disability.

Disability under Social Security is based on your inability to work. (They) consider you disabled under Social Security rules if:

You cannot do work that you did before.

(They) decide that you cannot adjust to other work because of your medical condition(s).

Your disability has lasted or is expected to last for at least one year or to result in death.”³

Many applicants for Social Security disability believe that if their doctor tells them they are disabled then they should have no trouble qualifying for benefits. *Unfortunately, this is not the case.* The word “disabled” can mean different things to different people and even to different parts of the government. Webster’s dictionary defines “disabled” as “incapacitated by illness or injury; also: physically or mentally impaired in a way that substantially limits activity especially in relation to employment or education.” Your doctor may have a somewhat different definition.

To Social Security, “disabled” means that you cannot sustain any job in the national economy given your age, education, and work experience. For that reason, Social Security’s rules state that disability is a matter for the government to decide – not your doctor. Social Security has its own rules and its own procedures. Social Security even has its own doctors who will review your case and come to their own conclusions.

An important disability secret is that, in the end, labels such as “disabled” are not very important.

³ www.ssa.gov

The Social Security Administration makes decisions regarding disability cases based on an applicant's ability to work. Under its framework, there are numerous mental disorders that qualify for disability benefits, if severe enough to limit a person's ability to work.

These disorders include (but are not limited to):

Some Qualifying Mental Disorders for Social Security Benefits

- anxiety disorders;
- post-traumatic stress disorder (PTSD);
- depression;
- bipolar disorder (formerly manic depression);
- schizophrenia;
- schizoaffective disorder;
- traumatic brain injuries resulting in mental, emotional and cognitive disorders; and
- learning disabilities such as low intellectual functioning.

(In the next sections of this guidebook we will examine in greater depth the most common mental disorders and how they relate to Social Security disability benefits.)

Physical illnesses and disorders which prevent individuals from sustaining employment also may qualify a person for benefits.

Some Qualifying Physical Disorders for Social Security Benefits

chronic breathing problems including chronic obstructive pulmonary deficiency (COPD), emphysema and asthma;

hip and knee injuries, and other joint conditions including arthritis;

muscle and bone disorders;

diabetes;

back and neck injuries and conditions, including degenerative disk disease, disk herniation, bulging disks, spinal stenosis and scoliosis;

spinal disorders;

chronic migraine headaches;

HIV and AIDS;

cancer;

heart problems;

stroke and other neurological problems;

epilepsy and seizure disorders;

multiple sclerosis (MS);

hepatitis C; and

fibromyalgia and other chronic pain disorders.

Anxiety Disorders

“Unlike the relatively mild, brief anxiety caused by a specific event (such as speaking in public or a first date), severe anxiety that lasts at least six months is generally considered to be a problem that might benefit from evaluation and treatment,” according to the National Institute on Mental Health.⁴ “Anxiety disorders commonly occur along with other mental or physical illnesses, including alcohol or substance abuse, which may mask anxiety symptoms or make them worse.” There are several types of anxiety disorders that are included in the Social Security Administration’s listings on mental health:

1. **Generalized Anxiety Disorder.** This is a constant state of tension or worry that lasts six months or longer.
2. **Panic Attacks.** Under Social Security rules, a claimant may qualify for benefits if they have a panic disorder or panic attacks characterized by repeated episodes of unprovoked anxiety or terror. These episodes can last up to ten minutes and include such physical symptoms as: shaking, racing heartbeat, breathing difficulties and nausea; and the person may believe they are having a heart attack.
3. **Obsessive-Compulsive Disorder.** Those with OCD may suffer from frequent intrusive thoughts or impulses known as obsessions, which they try to control through repetitive behaviors known as compulsions.
4. **Phobia.** A phobia is an irrational and overwhelming fear of an object or situation that prevents a person from engaging in life activities, including work. Although the person knows they are over-reacting, they cannot stop the fear.

Most individuals with anxiety problems don’t match up exactly to the Social Security’s listings. The Social Security Administration enlists a complex set of rules, to determine disability. Disability benefits for anxiety disorder are awarded only to those who can demonstrate a severe and marked impact on their lives and prove they are unable to sustain work activity as a result of their condition.

⁴ www.nimh.nih.gov/

Post-Traumatic Stress Disorder

Those with Post-Traumatic Stress Disorder (PTSD) experience severe stress symptoms, including recurring memories, flashbacks, and hyper-vigilance in response to a traumatic event, such as armed combat, rape, physical abuse, natural disaster, or personal injury. The symptoms last one month or longer.

To meet the requirement of the "Blue Book" listing, the applicant must have regular "marked distress" in the form of nightmares, disruptive flashbacks, or alarming memories that are more severe than just disturbing memories that make a person uncomfortable. To qualify for benefits the PTSD must severely interfere with daily activities, ability to concentrate, and interaction with others.

Accurate and detailed medical records from a doctor or other healthcare professional are critically important to winning a SSDI or SSI disability claim. For a PTSD claim, medical records should include a detailed description of the typical PTSD circumstances including details of what triggers an episode, how long it usually lasts and how frequent are the episodes. A healthcare provider's opinion on whether the description of symptoms matches their evaluation of the claimant's mental state should also be included. Most important, the medical record should include a description of how PTSD episodes adversely affect the applicant's daily life.

Depression and Bipolar Disorder

Depression and Bipolar Disorder are two common types of mood disorders. Unless it is severe and disabling, qualifying for Social Security disability benefits solely due to a mood disorder can be difficult.

To get disability benefits a claimant must demonstrate to SSA that the disorder causes serious difficulties in activities of daily living* (SSA uses the shorthand ADL), impedes social interactions with others, and interferes with their ability to concentrate. Most important, they must show how the condition interferes with their ability to do work—even simple unskilled work.

Depression symptoms must have lasted or are expected to last at least 12 months and must encompass (and medical records must show) at least four of the following:

- pervasive loss of interest in almost all activities;
- decreased energy;
- overeating or lack of appetite;
- disturbed sleep patterns: insomnia or oversleeping;
- difficulty concentrating or thinking;
- lack of physical movement;
- feelings of guilt or worthlessness;
- paranoia, delusions, or hallucinations; or
- suicidal thoughts.

For individuals with psychological disorders there are times when treatments are effective and they are able to function well and there are other times when the treatments are ineffective. The periods of time when one's mental state deteriorates are called "episodes of decompensation" and are referenced in SSA's listings.

When building a case for SSA disability benefits, documenting episodes of decompensation with precise medical records is critically important to establishing the fact that there are times when an individual is unable to function due to depression or bipolar disorder. Whenever an individual experiences an episode of decompensation, they should tell their doctor and make sure that the episode is properly documented.

*(Some examples of activities of daily living from SSA include: cleaning, shopping, cooking, taking public transportation, paying bills, maintaining a residence, caring appropriately for your grooming and hygiene, using telephones and directories, and using a post office.)

Schizophrenia

Schizophrenia is a mental disorder that is poorly understood. Friends, family and employers are commonly shocked and confused by the disorder which can cause a wide range of unusual behaviors including hallucinations, delusions and an inability to concentrate. The National Institute of Mental Health estimates that more than three million Americans have this illness.

Many people with schizophrenia have difficulty caring for themselves and holding a job.

Even though treatment may lessen symptoms of schizophrenia, some people, even with treatment, may not be able to work because of the severity of their illness or due to the side effects of anti-psychotic medications.

In order to prove you are disabled under Social Security's rules, you need to show that your schizophrenia prevents you from performing even simple, routine repetitive work or causes at least two of the following:

- marked restrictions on activities of daily living (including activities like dressing, cleaning, managing money),
- marked difficulties functioning in social setting,
- marked inability to complete tasks in a timely manner, and/
or
- three or more episodes of decompensation – periods of time when treatments are ineffective and one's mental state deteriorates – that last an extended period of time.

To qualify for benefits the symptoms of schizophrenia must have lasted or are expected to last for at least 12 months.

Schizoaffective Disorder

A condition that involves the symptoms of schizophrenia combined with symptoms of mood disorder, schizoaffective disorder is not considered a distinct disorder by some medical professionals who believe the illness is schizophrenia first and foremost, with some mood problems. However, for the purposes of disability, SSA does consider schizoaffective disorder a distinct medical condition.

Individuals whose lives have been touched by schizoaffective disorder would likely meet the SSA listing if they have one or more of the following symptoms:

- delusions or hallucinations,
- illogical thinking or speech that lacks meaning with inappropriate effect, and/or
- emotional isolation.

Whether or not an individual is approved for disability benefits depends almost entirely on the information contained in their medical records. This includes statements and notes from a treating physician (a doctor who has a history of treating the applicant and is, therefore, qualified to comment as to their condition and prognosis). It also may include reports of imaging studies (such as x-rays, MRIs, and CT scans) and lab panels (i.e. bloodwork), discharge summaries from hospital stays and physical therapy reports.

In some disability claims, Social Security will request that an applicant be examined by a healthcare professional of their choosing. Their findings will also be considered in determining disability eligibility. Although it doesn't always work this way, administrative law judges who decide disability cases are required to give greater weight to the opinions of a treating physician.

Traumatic Brain Injuries

Traumatic Brain Injuries, TBIs for short, are caused by a sudden blow to the head which causes damage to the brain and often are accompanied by bleeding inside the head or swelling of the brain. A whole host of serious medical problems can result from a TBI — stroke and epilepsy among them. It is estimated that every year one and a half million Americans suffer traumatic brain injuries caused by falls, auto accidents, sports injuries, and other violent encounters. Many of our veterans have returned from combat in Iraq and Afghanistan with TBIs caused by homemade roadside bombs.

For those who have suffered a TBI and want to apply for Social Security disability benefits, it is important to remember that, as with most disorders, it is not the name of the impairment that qualifies one for disability benefits, but the symptoms, if the symptoms prevent a person from working.

A traumatic brain injury claim must be supported by medical evidence such as physical examinations or lab tests. Additionally, the claimant must demonstrate that they have significant functional limitations as a result of a TBI, which prevent them from performing any of their past work or any other type of work that their age, education, and skills might qualify them for.

TBIs are different from other impairments. It is often difficult to assess long term outcomes after a brain injury. Social Security recognizes this. With other impairments, individuals cannot receive disability benefits until after they have been unable to work for at least 12 months. But with TBIs, Social Security may judge a person as disabled as soon as three months after a serious injury to the brain.

There are many more rules and conditions governing TBI and disability. TBI disability cases are complex and difficult but they are winnable.

Intellectual Disabilities

Individuals can apply for Social Security disability benefits for any disability or condition that prevents them from being able to work and that includes intellectual disabilities. Social Security does not differentiate between physical or mental impairments, only how a specific impairment interferes with an individual's ability to function in activities of daily life and especially work.

How does Social Security measure the ability to function with a intellectual disability? Medical records and school records play a key role in determining what is known as an individual's residual functional capacity (RFC) — what a person is able to do despite their impairment or impairments.

For adults, their RFC rating will be measured against the demands of whatever past work they did to determine if they are able to return to their past work and if they cannot, if they have the capability to switch to a different type of work.

Individuals who are found to be unable to do either will generally be approved for disability, provided that they have not exceeded earning limits set by SSA. As a general rule, to be eligible for benefits, SSA says one cannot be engaged in "substantial gainful activity" (SGA). Under their rules for SSDI payments, SSA says if in 2015 a person works and earns more than \$1,090 per month in gross wages, they are engaged in substantial gainful activity and are, therefore, ineligible for disability benefits. There are different rules for individuals who are blind, or are self-employed, or are seeking SSI payments.

Benefits for a Disabled Adult Child

If you have a child who is over 18 years-old and unable to live independently or earn a living because of a mental or physical disability, you probably have financial concerns. How will you pay for your child's expenses when you can no longer work? What will happen to your child if something happens to you?

There is help available. Under Social Security rules some disabled adult children are eligible for Disabled Adult Children (DAC) benefits based on a parent's earning record. (DAC benefits are also referred to as Childhood Disability Benefits [CDB] by the Social Security Administration.). To qualify you (the parent) must be receiving Social Security benefits either due to retirement age or a disability of your own. And your adult child must meet specific requirements.

They must:

- be over the age of 18,
- be unmarried, and
- have a qualifying disability that began before age 22.

What is a "qualifying disability" under Social Security rules? The disability must meet all the criteria of a condition that is included in the Social Security Administration's Blue Book list of impairments or is equivalent in severity to a listed impairment or they must be unable to perform any substantial work for pay because of their limitations. The disability must have lasted for at least 12 months, or is expected to last for at least 12 months, or result in death.

If your adult child qualifies for Social Security disability they can receive benefits as long as they are unmarried. The benefits will be terminated if the child marries, but an exception may be made if a disabled adult child marries another disabled adult child.

If your child is judged by SSA to be eligible for benefits they will be collecting what are called auxiliary benefits, SSDI payments based on a qualifying parent's Social Security earnings.

The Disability Claims Process

“A Social Security representative in the local field office will take your application for disability benefits in person, by telephone, by mail, or online. The application will ask you for a description of your disability, who is treating your condition, and other information that relates to your disability.

Most Social Security disability claims are initially processed through a network of local Social Security Administration (SSA) field offices and state agencies (usually called Disability Determination Services or DDSs).⁴ Your attorney can also take your application in their office and file the application for you.

Typically, it will take from three to five months to get a decision on your initial application.

If DDS finds that you are disabled, SSA computes the benefit amount and begins paying benefits. If your claim is denied (and the majority of claims are denied) and SSA says you are not disabled, you have a right to appeal that decision.

The Appeals Process

If you wish to appeal, you must complete and return the proper Social Security appeal forms within 60 days from the date you receive a letter from SSA turning down your application for benefits. (SSA assumes you receive the letter five days after it is sent.)

Generally, there are four levels of appeal. They are:

Reconsideration

A reconsideration is the first appeal to your initial denial. The Disability Determination Service will do another complete review of your claim by someone who did not take part in the first decision. SSA will look at all the evidence submitted when the original decision was made, plus any new evidence. The reconsideration appeal typically takes two to three months.

⁴www.ssa.gov

Hearing

If your claim is denied again under reconsideration, you may ask for a hearing. Due to delays in the appeals process due to many disability cases and too few judges, the waiting time for a court date after you file the appeal can be — on average — 15 months (in 2015). The hearing will be conducted by an administrative law judge who had no part in the original decision or the reconsideration of your case. This is the best opportunity to present your case because you get to tell your story in person.

Appeals Council

If you get an unfavorable ruling at your hearing you may ask for a review by Social Security's Appeals Council. The Appeals Council looks at all applications for review, but a review is not guaranteed. In order to have the best chance of success in front of the Appeals Council, it is helpful to write (or have your attorney write) a brief — a legal argument in support of your case — outlining your disagreement with the judge's decision. The Appeals Council can refuse a review of your case, remand your case back to the same judge for another hearing, or award you benefits.

Federal Court

Your last level of appeal is to file a lawsuit in federal district court if the Appeals Council turns down your request for review or if you are not satisfied with the Appeals Council ruling on your case. In almost all cases, you will need an attorney to represent you in Federal Court. In order to do this your attorney must supply the Federal Court with proper documentation and write another a legal argument in support of your case.

What to Expect at Your Social Security Hearing

The hearing is the most important part of your disability claim, so being thoroughly prepared is critically important.

At the hearing your case will be heard by a United States Administrative Law Judge either in person or by video who will decide your claim. The hearing will be held in a conference room not a courtroom or courthouse. Other people in the hearing include a court reporter, a vocational expert, and perhaps a medical expert. The judge will have reviewed your medical records and any medical opinions prior to the hearing.

Social Security does not have a government attorney argue against the claim but the judge needs to look at the case from both angles — disabled and not disabled.

The hearing will take approximately 60 minutes depending on the judge, the complexity of the case, and other factors. The judge will ask you questions during the hearing. Each judge has a different style of questioning.

Topics covered during your testimony will include:

Your age, education, marital status and living arrangements.

The date you last worked and the reason you stopped work.

A review of all your work for the last 15 years with dates for each job, the physical requirements for each job, the technical or skill requirements for each job and why the job ended.

The discussion of your medical conditions will include your symptoms, treatment and work limitations. You will be asked about each one of your medical problems individually with questions about how long you have had the problem, what doctors you have seen for the problem and how the problem affects your day-to-day functioning as well as your ability to perform work related activities such as

walking, standing, sitting, bending, climbing, crawling, lifting and carrying and using your arms and hands.

If one of the conditions that affects your ability to work is a mental impairment, you will be asked to explain how the mental impairment affects your ability to think, concentrate, socialize and perform other mental functions.

There will also be a discussion of activities of daily living and how your medical condition interferes with you from having a normal day. The judge will want to know why you can't return to your past work and why you can't perform other work.

Once you're done talking, a medical expert may testify in person or by phone. The medical expert has never examined you; the expert will have only reviewed your medical records.

The judge will ask the medical expert questions. The medical expert will offer opinions about work limitations and the severity of the medical conditions.

Finally, a vocational expert will testify. The judge will ask the vocational expert if an individual could work with the limitations the judge believes you have. Sometimes the judge believes that you are as limited as you say, other times the judge may not believe you are that limited. Either way, the vocational expert will respond if there are any jobs that exist with the limitations described by the judge.

Usually you will not receive a decision at the hearing. More typically your decision will be in writing and will take from 60 days from the date of your hearing to receive. The length of time you have to wait for a decision can vary greatly from one judge to another.

A copy of the decision will be mailed to you.

Right to Representation

Under Social Security rules you are permitted to have another person be your representative and advocate through the entire claims process. SSA puts no restrictions on who can be a representative; it can be a trusted friend or a family member or a paid professional like an attorney who focuses exclusively on Social Security disability law.

Bear in mind, however, that the system is complex and confusing, so it is advantageous to select a representative who knows how to navigate the system and is willing to "go the distance" in what may be a lengthy process.

In SSDI and SSI cases, payment to a disability attorney or other paid representative is limited by law to no more than 25% of back payments due and caps the amount at \$6,000. An individual who wins their case pays the lesser of the two amounts. Disability representatives do not receive any percentage of future disability benefits. Typically there are a few incidental costs, separate from attorney fees, which are incurred to prepare a case, like the costs of getting medical records, for example. Those expenses have to be repaid at the end of a case whether or not the individual wins their case.

Most Social Security lawyers take their cases on a contingency basis, that is, they only get paid if you win your case.

For a referral to a lawyer in your area call the national office of NOSSCR (the National Organization of Social Security Claimants' Representatives) at 1-800-431-2804.

5 Tips for Improving Your Chances of Obtaining Benefits

1. **See a doctor.** It is not enough to say you are disabled, you will have to prove your medical condition and the Social Security Administration will require detailed reports from a psychologist or psychiatrist. Social Security relies on medical information from doctors, clinics and hospitals to determine how severe a mental condition is. No matter how disabled you may think you are, SSA will not pay benefits without precise medical documentation. SSA may request that you be examined by one of their doctors. Skipping a SSA requested exam can result in the dismissal of your claim.
2. **Follow all prescribed treatments.** This is the most important tip of all and the one most often ignored. It is essential that you completely follow the treatment plan set by your doctor including taking all prescribed medications. When the SSA is reviewing a claim for disability benefits, they will be looking at what treatment you have undergone and how you responded to prescribed treatments. If you have not cooperated with the treatments that have been prescribed by a doctor, it can derail your claim for disability benefits.
3. **Keep a detailed journal.** You should record carefully and in detail your medical information regarding any appointments with doctors, counselors and hospitals. You should write down the names of all healthcare providers and the dates. This log will be helpful in obtaining all your medical records for a case. You are also advised to keep copies of any medical records provided to you.
4. **Keep records of how your illness affects you on the job.**
5. **Stay away from alcohol and illegal drugs.** If you have a disabling condition that is psychiatric in nature and you consume illegal drugs or drink alcohol to excess you will have a difficult time proving that they aren't the cause of your impairments (or at least a contributing factor).

The Critical Role of Mental Healthcare Providers

Speaking now to mental healthcare providers: you play a vitally important role in supporting your patients and enabling them to have more involvement and control over their lives.

Regrettably, many Americans who live with mental disorders have no reliable source of income. Qualifying for Social Security disability benefits can mean the difference in whether or not they get adequate food, decent housing and much needed medications and medical care. Healthcare professionals play a crucially important part in the Social Security disability process.

The healthcare providers' part in the Social Security disability process is to give honest, objective information based on their observations of their patients. The medical evidence they provide (or help their clients obtain from other healthcare professionals) through evaluations, tests, treatment records, reports and narrative letters are given great weight by Social Security Administration (SSA) administrative law judges who determine whether or not to award benefits to a claimant.

The SSA says, "When evaluating mental disorders, information from treating sources is essential to accurately assess the onset and severity of claimants' impairments and their effect on functional capacity. This applies to new claims, determinations of continuing eligibility for current beneficiaries, and appeals. With your timely response to requests for information, your patients may more quickly start (or continue) to receive cash benefits and Medicare or Medicaid. Without your records, the decision may be made based on the results of a one-time consultative examination by a medical professional unfamiliar with your patient."⁵ (Emphasis added.)

Here are the typical activities you, as a healthcare provider, can perform on behalf of your patients who are applying for SSDI or SSI benefits:

- providing your medical records;

⁵www.ssa.gov

- completing Disability Determination Services (DDS) forms; and
- drafting narrative letters and completing forms that include information regarding the person's functional capacity.

As far as Social Security disability benefits are concerned you do not have to be an advocate for a patient or to be in a potentially uncomfortable position of determining a person's eligibility for benefits. Your role is to report the objective medical evidence of a person's impairments and how those limit their ability to function in everyday life.

A Final Thought and Our Most Important Advice.

Be patient.

There is a long backlog of cases at Social Security so the process can take a great deal of time. Usually it takes about 22 months from the time you apply for benefits until you get a hearing in front of a judge.

Don't Give Up!