

## **Position Information – Social Insurance Specialist (Disability Specialist),**

### **GS-0105-7**

This position is located in the Center for Disability (CD), Social Security Administration (SSA). At the full performance level, the incumbent would be expected to provide a full range of developmental and adjudicative duties related to a variety of disability determination workloads for the Social Security Administration. The incumbent assists the Disability Determination Services (DDS's) by developing, evaluating and processing medical disability decisions on Title II and Title XVI cases (including complex cases); and makes entitlement and post-eligibility determinations while processing various types of Social Security disability cases that may include cases at the initial or appeal level and medical and work-related Continuing Disability reviews. ***If hired below the full performance level, the incumbent will perform in a trainee capacity, with assignments leading to being able to perform the full range of duties described below.***

#### **Duties:**

- Reviews and takes action on Title II and XVI disability claims submitted within the initial claims, appeals and continuing disability review (CDR) processes. Serves as a Processing Center disability resource person on medical and non-medical issues on a wide range of disability claims at all levels of appeals. Takes action on favorable disability Administrative Law Judge (ALJ), Appeals Council and court case decisions.
- Reviews disability determinations made by State agencies to establish, continue, deny or cease entitlement to benefits for periods of disability, ensuring accurate and consistent application of pertinent laws, regulations and other criteria.
- Approves, modifies, reverses or returns to the State agency reviewed cases and specifies to the State agency what additional development is needed and the most effective channels for obtaining such development.
- Requests development of medical and vocational evidence from district offices (DOs), State agencies, medical sources, employers, other Federal agencies and others. Makes mail or telephone direct contact with beneficiaries, claimants, treating physicians, lawyers and other third parties for the resolution of discrepancies and obtaining complete information.
- Examines and evaluates all medical evidence, vocational factors and other material pertinent to the disability decision in order to ascertain the correctness of determinations, and determines whether the decision can be reopened and revised under rules of administrative finality (i.e., errors based on the evidence, good cause, new evidence, etc.). Revises or instructs State agency or DO to revise prior determination.
- Reviews and utilizes medical staff input and written assessments of medical evidence. Resolves discrepancies between medical staff opinions and evidence in file. Obtains consultative examinations where indicated or may request such exams as specified by the medical staff.
- Assesses significance of residual functional capacity (RFC), age, education and work experience in determining the ability of claimants to engage in substantial gainful activity (SGA).
- In developing and evaluating SGA work issues, makes appropriate contacts to resolve discrepancies and to determine if work was subsidized.
- Makes cessation and continuance determinations. Reviews determinations made by DOs on SGA issues and revises, as necessary. Authorizes suspension, termination and resumption of benefits.
- Decides if medical or work factors are a basis for a CDR or for denying a disability claim. Decides on the potential for improvement of the claimant's condition, and establishes or changes medical re-exam, or periodic review diaries.
- Reviews ALJ and Appeals Council cases in which the Office of Disability Adjudication and Review (ODAR) has issued a favorable decision to ensure consistency with SSA regulations. Identifies cases which must be returned to ODAR for resolution before all benefits can be paid. As required, prepares protest memoranda summarizing inconsistencies, discrepancies or misapplication of Social Security laws and regulations in returned cases.
- Identifies possible fraud issues and refers cases to the appropriate component.
- Prepares revised determinations affecting claimants' rights and benefits. Composes notices of determinations affecting claimants' rights and benefits and prepares complete and responsive replies to claimants and/or their representatives, physicians and public officials concerning requests for claims information or for purposes of explaining decisions. Provides input for response to congressional and other sensitive inquiries involving medical and non-medical issues in connection with disability claims.

- Determines if release of medical records requested by disabled individuals or their legal representatives is appropriate based on consideration of adverse impact and rules and regulations pertaining to disclosure of information.
- Furnishes advice and direction to claims and benefit authorizers on disability related issues such as capability, administrative finality, re-openings and incomplete or incorrect DO or DDS determinations.
- Trains and mentors new examiners. As needed, prepares new or updates existing training packages. Conducts formal training on medical and non-medical subjects. As assigned, reviews trainee's completed work.
- Identifies and reviews claims involving court case membership. Prepares determinations when appropriate. Takes action to ensure proper payment. Ensures that all legal requirements have been met and resolves any reopening issues. Prepares and releases notification to claimants and their representatives. Answers questions from claimants attorneys and congressional staff regarding these issues.
- Uses various SSA information systems to access and update Social Security records.
- Performs other related duties as assigned

**Complexity:**

- The work is to independently determine beneficiaries' initial and continuing eligibility for disability benefits, to review and insure that SSA laws and regulations are correctly applied in favorable ODAR decisions, and to provide technical assistance on medical disability issues on a wide range of disability claims. Adjudication of claims, CDRs and ODAR decisions requires obtaining detailed information and performing a comprehensive evaluation of multiple, interrelated issues such as medical, vocational, legal and work activity. Factors to be considered involve the assessment of medical evidence and its relation to non-medical factors which may affect the claimant's functional capacities, incomplete or conflicting data or other unusual circumstances. A complete reexamination of all facts and evidence is performed when a claimant disagrees with the initial disability claim determination. Interprets provisions of law, resolves inconclusive or conflicting evidence and makes determinations in accordance with Agency regulations.

**Responsibility:**

- The incumbent's decisions regarding continuing disability issues will affect the economy of overall operations in terms of the number and extent of investigations and assurances of due process to affected beneficiaries. The determinations made directly affect the economic well-being of claimants, reflect the Administration's efficiency in administering the law to the public, and enable the Agency to comply with class action court rulings.

**Personal Contacts:**

- Contacts are with personnel at various levels in the Center for Disability and other SSA offices including the Appeals Council, ODAR, Field/District Offices, State agencies, treating physicians, claimants, beneficiaries and/or their representatives, employers and other members of the general public via telephone or mail. Contacts concern claims at various stages/levels of appeal. Contacts at all levels are to obtain, clarify or give facts, information or instructions directly related to the work being performed. Contacts with claimants or beneficiaries are to obtain information about their condition, medical treatment, work and other aspects of eligibility; with treating or consulting physicians to obtain or interpret medical evidence; with ODAR to resolve errors and omissions in hearings decisions; with employers to obtain or clarify work related information; with Field/District offices to obtain information, explain decisions or errors and provide technical advice.

**Physical Demands & Work Environment:**

- The work is mostly sedentary and is performed in an office setting with no environmental stress.