

News and Publications

The Life of a Social Security Claim

By Julia Swain August 2011

Social security benefits, consisting of Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI), provide cash assistance to qualified disabled individuals through the Federal government. The process is administered differently by each state. Approval for SSI and SSDI can take up to two-and-a-half years in Pennsylvania, which is a relatively short time period on a national average. Thomas Hardy, a Social Security lawyer and member of the Social Security Occupational Information Development Advisory Panel, explained the application and approval process for Pennsylvania Social Security claims to the Family Law Section on July 11.

SSI is a form of federal welfare for applicants who never worked or have not worked recently. The typical amount of SSI paid in Pennsylvania is \$674 per month. SSDI is for people who have a work history and paid into Social Security long enough to earn credits required for their age group. The monthly benefit paid by SSDI varies upon the applicant's prior income. One significant difference between the two forms of benefits is that SSDI pays a retroactive benefit to the date of application, whereas SSI is paid once its approved.

An application for benefits can be submitted online through the Social Security Administration (SSA) website or in-person at a local SSA office. Claim adjudication focuses on age, level of education and type of prior employment. A

claims processor analyzes what job an applicant can perform based upon what the applicant used to do and his/her current abilities. Approximately 70 percent of applications are denied at the first level. An appeal for reconsideration must be immediately filed within 60 days for the process to continue. The second level of consideration provides a higher level of claim scrutiny. The examiner starts building a file on the applicant and writes to the doctors listed on the person's application. At this level, an applicant's attorney can supplement the file with any relevant information related to the claim. Also, the applicant may be notified to attend a mandatory appointment with a SSA physician. At this level, about 80 percent of the applications are denied and approximately 10 months have elapsed from the date of application. Again, the applicant must immediately appeal within 60 days.

The next step is a proceeding before an administrative law judge (ALJ), which takes place about eight months later. Each ALJ handles the proceedings differently. The applicant's attorney can submit a brief to supplement the file. At the proceeding, typically the applicant and a vocational expert testify. A doctor may be called as a witness. If the vocational expert identifies that jobs for which the applicant is qualified exist in the applicant's geographic area then the claim is denied. It is important to note that the vocational expert does not have to show that the jobs are available for the applicant to apply for or fill. The hearing lasts about 20 to 30 minutes, with an opinion rendered within one month.

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If the claim is denied, the applicant can appeal to the Appeals Council, which is only one office in Falls Church, Va. It takes about two years for the file to be opened given the large number of appeals they receive. The Appeals Council only reviews for errors of law. If the claim is denied, the final appeal can be lodged in federal court.