STATE OF SOUTH DAKOTA CLASS SPECIFICATION

Class Title: Disability Claims Analyst Class Code: 010532

Pay Grade: GH

A. Purpose:

Determines medical eligibility on initial, reconsideration, child, continuing disability review, and complex priority claims for the Social Security Administration (SSA) disability program by receiving applications, interviewing claimants, obtaining and reviewing medical and vocational information, and preparing reports.

B. Distinguishing Feature:

The <u>Disability Claims Analyst</u> determines medical eligibility for all claim types. This is done by reviewing disability claims applications and obtaining information to continue and make or terminate disability determinations. This position does not supervise, but may act as a mentor in the support and development of new claims analyst staff. Incumbents will complete a training and mentorship program to develop knowledge and proficiency in order to determine medical eligibility for all claims types.

The <u>Disability Claims Specialist</u> monitors and completes quality assurance reviews, case consulting, training, and other special projects to ensure federal law, rules and procedures are followed providing efficient and effective service. This position frequently reviews work of Disability Claims Analysts and medical consultants.

The <u>Disability Claims Program Supervisor</u> supervises a work unit of Disability Claims Analysts and Disability Claims Specialists that carry out the adjudicative claims process for the Social Security Administration (SSA) disability program to ensure the program operates within federal rules and regulations.

C. Functions:

(These are examples only; any one position may not include all of the listed examples nor do the listed examples include all functions which may be found in positions of this class.)

- Obtains and analyzes medical and vocational information to ensure sufficient information is received to determine the medical eligibility for those applying for Social Security disability benefits.
 - a. Requests daily living information from claimants and third parties.
 - b. Requests medical, psychological, vocational, and related information from the claimants' physician, treating facility, or other agencies; and request additional information when evidence is discovered that reveals there is a need for further development.
 - c. Interviews claimants, physicians, employers, claimants' friends, relatives, legal representatives, institutional staff, and other service agencies to gather necessary information to substantiate claims.
 - d. Confers with medical consultants, disability claims specialists, and supervisors to resolve complex problems with claims or medical evidence.
 - e. Reviews and analyzes the evidence to determine whether there is enough information in the file to make a determination on the claim.
 - f. Requests specialized examinations and/or testing if the medical information is not sufficient to make a medical determination.
 - g. Requests essential vocational evidence to ensure the claimants work issues are accurately addressed in the determination of eligibility.

- 2. Makes determinations on eligibility for Social Security disability benefits to ensure claims are handled effectively.
 - a. Reviews medical information and writes residual functional capacity assessments based on the sufficient evidence.
 - b. Makes referrals to medical consultants to sign off on the functional assessments or to assist with problems in interpreting the severity of medical or psychological conditions.
 - c. Reviews the vocational information and determines the employability factor of the claimant, based on their age, education, and work experience.
 - d. Interprets and explains program criteria and the basis for the determination to claimants, their representatives, and public officials.
 - e. Writes rationales explaining the reasoning for decisions made in processing the claim, based upon an analysis of medical, psychological, and vocational records and federal policies, rules, and regulations.
 - f. Determines the need for future reviews based upon knowledge of the impairment and the potential for changes in claimant status and sets the review dates.
- 3. Manages assigned cases to maintain up to date information ensuring effective case processing.
 - a. Monitors a computer database program that assists in establishing caseload priorities.
 - b. Takes daily action to order records, view exam reports, order or reschedule exams, review records on claims with all records in, process claims when back from the consultants, and takes follow-up action to ensure effective claim movement.
 - c. Views claim files through a web-based electronic disability collection system to edit, move, flag, and take a specified case action.
 - d. Enters data into the electronic claims analysis tool that guides analysts through the sequential evaluation process of individual claims.
 - e. Responds effectively to claimant phone calls or personal inquiries, documenting pertinent information in the claim file, and making referrals to other community resources as needed.
- 4. Performs special projects to ensure timely and correct processing of all claims.
 - a. Mentors other analysts by providing work direction and assistance to guide them in the effective adjudicative processes and efficient case management techniques.
 - b. Oversees claims development units, where direction is given to other analysts on proper ordering and payment decisions regarding medical records and other evidence that will be needed to evaluate a claim.
 - c. Handles special caseload units that process complex priority claims (military casualty, terminal illness, pre-hearing, compassionate allowance, quick disability decision, etc.) to ensure these claims are processed in an efficient and effective manner meeting program requirements.
- Performs other work as assigned.

D. Reporting Relationships:

Typically no subordinates report to this position, but the incumbent may coach and mentor new analysts.

E. Challenges and Problems:

Challenges include learning and maintaining up-to-date knowledge of Social Security Administration's policies, procedures, and regulations for adjudicating disability claims; effectively adjudicate special workloads; keeping up-to-date and understanding medical conditions, how they affect someone's function, and writing functional assessments; and understanding when a claim has sufficient evidence to make a determination. Other challenges include making quality and timely determinations, maintaining high productivity standards, and managing a caseload effectively.

Problems include dealing with hostile claimants in cessation of disability benefits or in areas of ineligibility determination.

F. Decision-making Authority:

Decisions include determining the need for medical, vocational, and collateral evidence; determining the extent of investigations by evaluating the sufficiency of evidence; and determining claimants overall medical eligibility for disability benefits.

Decisions referred include conducting quality assurance, training, assignment of claims, and complex medical decisions.

G. Contact with Others:

Daily contact with medical consultant staff, treating physicians, and health care institutions to resolve questions on claims processing and medical treatment responses; the local social security field offices to provide or receive claim information; and with claimants, their representatives, and employers to obtain information for processing disability claims.

H. Working Conditions:

The incumbent works in a typical office environment.

I. Knowledge, Skills and Abilities:

Knowledge of:

- applicable laws, rules, and regulations of the Social Security disability program;
- disability adjudication policies and procedures;
- effective interviewing techniques, and information collection and analysis;
- concepts related to client's rights, confidentiality, and professional ethics;
- medical, psychiatric, psychological, vocational, and legal issues relating to disability;
- medical and psychological terminology;
- impairments, diseases, treatments, and responses;
- functional limitations of physiological and psychological impairments;
- vocational aspects of disability criteria.

Ability to:

- investigate, analyze, and extract critical information;
- identify problems;
- · be organized and manage multiple priorities;
- communicate clearly and concisely;

- make decisions maintaining a high level of production, accuracy, and timeliness;
- utilize multiple computer software applications and data systems proficiently;
- coach and mentor coworkers;
- review medical and other types of records;
- critically analyze large amounts of information and write reports and medical functional assessments;
- provide exemplary customer service;
- work with others in a manner which shows sensitivity, tact, and professionalism;
- comprehend information and appropriately apply new information learned to the adjudication process;
- take direction and constructive criticism;
- work independently and in a team setting to reach common goals;
- maintain an optimistic demeanor and outlook that reflects agency culture;
- apply analytical thinking and deductive reasoning to make accurate disability determinations.

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