The complex process of adjudicating SSDI claims citing pain conditions

Each year, tens of thousands of SSDI (Social Security Disability Insurance) applications include health conditions causing chronic and/or acute pain. September is Pain Awareness **Month,** and since pain evaluation is a key factor in the Social Security Administration's (SSA) claim adjudication process, we created this infographic to illustrate the many complexities that exist when SSDI applicants cite pain as a primary reason for being unable to work.

We will take a closer look at four conditions that cause chronic or acute pain and how disability examiners evaluate SSDI claims that reference these conditions.



SSDI CLAIM ADJUDICATION Social Security uses SSDI regulations and Social Security Rulings

SOCIAL SECURITY RULINGS AND

result in death. Social Security Rulings are defined as a "series of precedential decisions relating to the programs administrated by SSA and are published under the authority of the Commissioner

(SSRs) to evaluate SSDI claims and determine if an individual's medical condition is severe enough to prevent working for at least one year or

of Social Security." Published in the Notices section of the Federal Register, these decisions are considered public record and may be based on decisions made at any level of SSA's claim review process. Social Security Rulings are often used as precedents for comparison in the evaluation of SSDI cases

citing similar conditions, which can be particularly useful for pain conditions that are often highly subjective in nature.

Degenerative Disc Disease (DDD) is one of the most common impairments included in SSDI claims. DDD is the result of spinal discs wearing down due to normal aging

DEGENERATIVE DISC

DISEASE

and activities, with people over age 40 being particularly at risk. SSDI claims citing DDD can be complex due to the unpredictable and highly subjective nature of the condition. Pain levels will vary significantly from one person with DDD to another, and symptoms may come and go over time, with many people responding well to treatment. Proving that a claimant's DDD claim meets SSA's strict definition of disability requires clear, objective evidence that the condition has resulted in a compromised nerve root of

the spinal cord, spinal pain, mobility issues, and/or impaired

function in other key areas. This means that extremely

detailed medical records spanning a decent length of time are critical, as the claimant's testimony alone that they experience pain will not be considered sufficient proof. If these criteria can be met and the condition cited on an SSDI claim can be matched with a musculoskeletal disease listed in SSA's regulations, an individual with enough work credits to qualify for SSDI could be awarded benefits. Click here to learn more about how SSA evaluates claims



evaluated under the banner of musculoskeletal disorders, which include other conditions known to cause pain in the neck, back, and other parts of the body, such as: inflammatory arthritis, • spinal stenosis, · spinal arachnoiditis, and

Rather, these claims are

• herniated discs.



citing musculoskeletal conditions.

headache pain is so common and linked to numerous other health conditions, it can be difficult to establish it alone as a disabling impairment. Unsurprisingly, medical records are the most important

Migraines and headache disorders are also commonly included in SSDI claims as either a primary or secondary condition impacting an individual's ability to work. Because

MIGRAINES AND HEADACHE

This includes symptoms impacting the claimant's vision, speech, and motor skills, as well as

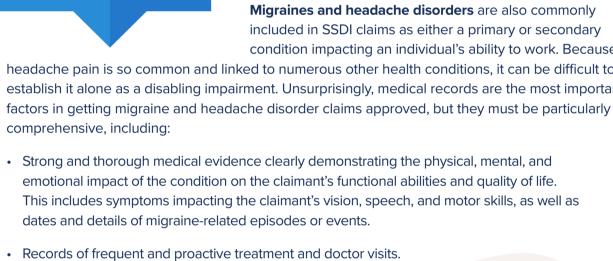
The types of treatment received. · Clear documentation that the claimant has been complaining of pain over an extended period of time.

DISORDERS

one's physical and/or mental ability to do basic work activities. SSA considers all medical

REFLEX SYMPATHETIC DYSTROPHY (RSD) /

Reflex Sympathetic Dystrophy (RSD) / Chronic Regional Pain Syndrome (CRPS) is a less



Click here to read SSA's Social Security Ruling for cases involving Primary Headache Disorders for more insight into how these claims are adjudicated.

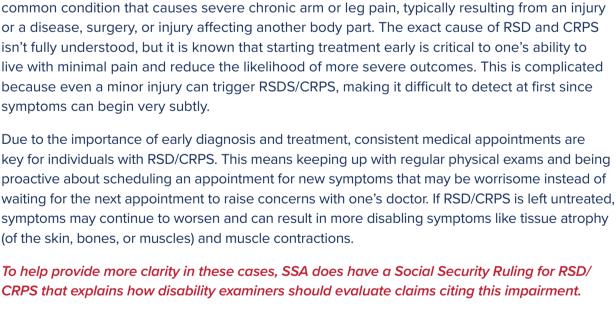
Some severe headache disorders can limit

CHRONIC REGIONAL PAIN

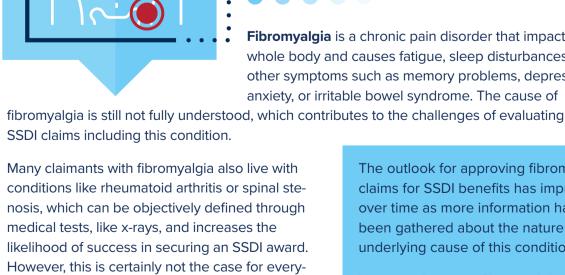
(of the skin, bones, or muscles) and muscle contractions.

SYNDROME (CRPS)

symptoms can begin very subtly.



FIBROMYALGIA



However, this is certainly not the case for everyone suffering from chronic fibromyalgia pain, and therefore, disability examiners may be more reluctant to approve based on the information on file. Social Security disability examiners will want to see evidence that other disorders that could cause the claimant's fibromyalgia symptoms have been excluded. This again highlights the importance of extensive medical testing that

is clearly dated and documented – particularly in the form of lab tests that check blood levels, thyroid function, and more, as well as diagnostic imaging to assess any possible arthritis or other inflammatory factors.

To help provide more clarity in these cases, SSA does have a Social Security Ruling for RSD/ CRPS that explains how disability examiners should evaluate claims citing this impairment.

> Fibromyalgia is a chronic pain disorder that impacts the whole body and causes fatigue, sleep disturbances, and other symptoms such as memory problems, depression,

anxiety, or irritable bowel syndrome. The cause of

presents quite differently from one person to another, historically, additional conditions have needed to be involved for claimants to have much hope for success in securing an SSDI approval.

The outlook for approving fibromyalgia

claims for SSDI benefits has improved

been gathered about the nature and

over time as more information has

underlying cause of this condition.

However, because fibromyalgia

Click here to review the Social Security Ruling about fibromyalgia claim evaluation.

In summary, the SSDI claim adjudication process is a complex one, and the evaluation of pain levels can be especially subjective. SSDI applicants can improve the likelihood of receiving a favorable claim decision by keeping up with medical appointments and any recommended treatments and therapies.

ABSENCE SERVICES GROUP

INSURANCE