

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES
CLASS SPECIFICATION

DISABILITY CLAIMS ADJUDICATOR II

POSITION CODE: 12538
Effective: 06/01/2006

DISTINGUISHING FEATURES OF WORK:

Under direction, performs responsible work in adjudicating all types of claims but primarily reconsiderations, "informal remands", and continuing disability reviews determining continuance or cessation of benefits; makes independent judgment decisions having the full delegated authority of the United States Commissioner of Social Security under both Title II and Title XVI of the Social Security Act.

ILLUSTRATIVE EXAMPLES OF WORK:

1. Reviews and analyzes reconsideration claims under both titles determining validity and appropriateness of the case development and subsequent decision resulting from the customer's initial application for benefits; makes special effort to assist the customer by fully understanding the customer's disagreement with the initial decision; assures that customers have a full understanding of what is required to process the reconsideration request.
2. Assures resolution of all case development documentary and judgmental inadequacies, conflicts and discrepancies; reviews documentation of all assumptions made at initial level.
3. Determines technique to be used for securing additional medical information including assistance requests to Social Security District Offices, direct mail, e-mail, telephone contact and/or face-to-face contact with the customer.
4. Performs a comprehensive detailed technical medical review of the customer's allegations of disability, entire case file and pertinent issues utilizing the evidence at hand and considering all material facts.
5. Secures additional medical evidence from prior or newly identified sources necessary to document the decision made relative to the customer's alleged impairment.

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6. Makes field trips to consultative physicians who contract with the Disability Determination Services, attending physicians of customer's, clinics, hospitals, laboratories, workshops and other governmental agencies addressing and resolving administrative problems as delegated and developing and improving public relations.
7. Carries initial, reconsideration, continuing disability, hearing remand and Administrative Law Judge requests in work load; reviews aged cases for appropriateness of techniques assuring every effort has been or is made to render a decision expeditiously and error free.
8. Reviews "informal remand" cases to determine if reconsideration decisions can be reopened considering all factors, including good cause, new and material evidence, and rules of administrative finality; notifies customer and Office of Hearings and Appeals as to type of action taken.
9. Obtains objective medical evidence to substantiate or refute medical opinions that have been advanced in the evidence of record, but have not been substantiated with objective data, and to determine if the disability continues or has ceased; assures protection of Due Process rights of customer's whose benefits are ceased.
10. Assists administrative law judges in validating the medical, technical, vocational and legal sufficiency of cases remanded to the Bureau of Disability Determination Services by the Social Security Appeals Council; arranges for the appearance of consultative physicians at hearings at the request of the administrative law judge.
11. Provides technical guidance to lower level adjudicators in the development and analysis of medical and vocational evidence required in the decision-making process.
12. Recognizes and calls to the attention of the supervisor the need for revision, amplification, or the creation of new policy and procedures.
13. Performs other duties as required or assigned which are reasonably within the scope of the duties enumerated above.

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DESIRABLE REQUIREMENTS:

Education and Experience

Requires a bachelor's degree, with major courses in medical, premedical, legal, prelegal, nursing, psychology, pharmacy, health, biological sciences, physical sciences, business administration, management, or disability claims adjudication.

OR

Requires current valid licensure as a Registered Nurse in the State of Illinois, plus three years of professional registered nursing experience.

In addition to either of the above, requires two years of progressively responsible professional experience as a Disability Claims Adjudicator I.

Knowledges, Skills and Abilities

Requires extensive knowledge of the Social Security Act and Amendments and the organization and operation of the Social Security Administration.

Requires extensive knowledge of the provision of the Social Security Act and Amendments relating to the occupational and legal aspects of disability, opinions and instructions issued in connection with the Disability Program.

Requires extensive knowledge of the Disability Determination Services in Illinois and of the policies, regulations and standards under which the program functions.

Requires extensive knowledge of the Division of Rehabilitation Services, the service it offers and its organization and operation.

Requires extensive knowledge of medical terminology, tests, body systems and/or impairments and understanding of their disabling effects so as to determine the degree of physical and mental limitation resulting from the impairment.

Requires working knowledge of personal computers, keyboard skills, various PC applications, and the SSA/DDS operating systems.

Requires ability to analyze complex factual situations and to clearly and concisely document and organize the data.

Requires ability to apply knowledge of a wide variety of physical and mental conditions, the characteristics and effects of these conditions, quality and types of acceptable evidence to accurately interpret available medical data.

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Requires ability to evaluate legal, medical and occupational aspects of a controversial claim necessary to support a sound determination.

Requires ability to analyze and evaluate significant diagnostic information on difficult factual situations.

Requires ability to exercise considerable judgment in interpreting medical facts presented by a physician and to apply these facts in determining an individual's capacity to engage in gainful occupation.

Requires the ability to consider the impact of pain, fatigue and weakness, etc., on the customer's ability to function and to sustain work-related activities on a regular and continuing basis.

Requires ability to integrate, examine and evaluate medical evidence and to prepare comprehensive disability determinations.

Requires ability to communicate effectively both orally and in writing on a professional level, as well as being sensitive to persons with disabilities.

Requires ability to establish and maintain good working relationships with customers, federal and state officials, lawyers, physicians, hospitals, clinics and other staff.

In addition to having a written and spoken knowledge of the English language, candidates may be required to speak and write a foreign language at a colloquial skill level in carrying out position duties in conjunction with non-English speaking individuals.