



Highlights of [GAO-04-495](#), a report to congressional committees

Why GAO Did This Study

Advocates for patients with inflammatory bowel disease (IBD) believe that the Social Security Administration's (SSA) process for determining eligibility for Disability Insurance (DI) may treat some claimants unfairly. As a result, claimants with IBD believe they are likely to be denied benefits at the initial decision and reconsideration levels, making it necessary for them to appeal to SSA's hearings level to have their claims allowed. This congressionally mandated study focuses on (1) how SSA evaluates claims involving IBD to establish disability under Title II of the Social Security Act and (2) what unique challenges claimants with IBD encounter when applying for DI benefits, and what actions, if any, SSA has taken to address these challenges.

What GAO Recommends

To help ensure that all claimants are informed of and provide SSA with information needed to assess fairly how impairments limit claimants' ability to work, GAO recommends that SSA emphasize the types and importance of information claimants must submit for their claim. SSA agreed with GAO's recommendations, but thought that some perspectives GAO provided on evaluating IBD claims were not relevant, and that GAO's characterization of one finding went too far. In response, GAO clarified its treatment of these issues.

www.gao.gov/cgi-bin/getrpt?GAO-04-495.

To view the full product, including the scope and methodology, click on the link above. For more information, contact Robert Robertson at (202) 512-7215 or robertsonr@gao.gov.

SOCIAL SECURITY DISABILITY INSURANCE

SSA Actions Could Enhance Assistance to Claimants with Inflammatory Bowel Disease and Other Impairments

What GAO Found

SSA evaluates DI claims involving IBD just as it does all claims, using a five-step sequential evaluation process to determine whether: (1) the individual is working and earning an amount exceeding established thresholds, (2) the impairment or combination of impairments significantly limits a person's physical or mental ability to perform basic work activities, (3) the individual's impairment meets or equals a pre-established list of the medical criteria for impairments considered severe enough to prevent an individual from earning wages above the established threshold, (4) the claimant can return to previous work based on what the individual can still do in a work setting despite physical or mental limitations, or his or her "residual functional capacity," and (5) the claimant can do any work in the economy. As claims move through the five-step process, their assessment requires additional evidence and increasingly complex judgments on the part of adjudicators. For example, at step three, claimants with IBD who are diagnosed with Crohn's disease would meet the medical criteria if their weight fell below the minimum on SSA's weight table. In contrast, to determine the residual functional capacity of claimants with IBD at steps four and five, SSA adjudicators must assess claimants' mental and physical capacity and make judgments regarding allegations of pain and fatigue. Adjudicators at the initial, reconsideration, and hearings levels use the same five-step process, although differences exist between the levels that may affect decisions. For example, claimants may be represented by an attorney or nonattorney at the hearings level.

While claimants with IBD are somewhat less likely to be allowed DI benefits than claimants with other impairments, their experiences applying for disability benefits are not unique, and SSA has efforts under way that may address some claimant concerns. When we analyzed DI decisions in 2003 by decision-making levels, we found that claimants with IBD, like many others, experienced lower allowance rates at the initial and reconsideration levels compared to the hearings level, although the difference between the levels was more pronounced for claimants with IBD. Lower allowance rates at the initial levels and higher allowance rates at the hearings level may reflect challenges that claimants with IBD share with many other claimants in applying for disability benefits. For example, both claimants with IBD and other claimants are unlikely to be allowed at step five of the process at the initial levels but not at the hearings level. SSA is pursuing efforts that may address some claimant concerns. For example, the agency is currently updating the medical criteria used for many impairments, including IBD, and is proposing changes to its decision-making process that may improve consistency between decision-making levels. SSA is also trying to improve claimants' understanding of the disability claims evaluation process, but lacks assurance that the majority of claimants who file in person or over the phone understand and provide information critical to SSA's assessment of their claims as part of steps four and five of the process.