

STATE OF OHIO (DAS) CLASSIFICATION SPECIFICATION	<u>CLASSIFICATION SERIES</u> Disability Claims	<u>SERIES NUMBER</u> 1676
	<u>MAJOR AGENCIES</u> Opportunities for Ohioans with Disabilities Only	<u>EFFECTIVE</u> 12/23/2018

SERIES PURPOSE

The purpose of the disability claims occupation is to adjudicate claims for social security disability insurance (SSDI) and supplemental security income (SSI) benefits for initial & reconsideration disability claims.

At the entry level, incumbents perform initial case development activities.

At the lower level, incumbents receive training in & develop, evaluate & adjudicate all initial & reconsideration disability claims.

At the middle levels, incumbents perform additional tasks in specialty areas (e.g., claim continuance or cessation, quality assurance, training, medical operations, policy & procedure development, hearings).

At the supervisory level, incumbents supervise disability claims staff & direct activities of disability claims unit or disability hearings unit.

At the managerial levels, incumbents manage case operations within assigned area of state (i.e., one of six areas) or coordinate & direct designated disability claims adjudication activities within state or plans, executes, controls & evaluates disability hearings for entire state & supervise assigned staff in either option.

<u>CLASS TITLE</u>	<u>CLASS NUMBER</u>	<u>PAY RANGE</u>	<u>EFFECTIVE</u>
Disability Claims Development Analyst	16761	29	12/23/2018

CLASS CONCEPT

The full performance level class works under general supervision & requires considerable knowledge of disability claim development procedures, social security law, structure, procedures & regulations & medical terminology, diseases & disabling conditions in order to provide information in an automated call distribution center & develop case documentation & information for all types of social security disability insurance claims (i.e., review incoming social security disability claims to determine if necessary information is included such as medical treatment sources & vocational history & request additional information if documentation is incomplete).

<u>CLASS TITLE</u>	<u>CLASS NUMBER</u>	<u>PAY RANGE</u>	<u>EFFECTIVE</u>
Disability Claims Adjudicator	16762	30	12/23/2018

CLASS CONCEPT

The developmental level class works under close supervision & requires working knowledge of social security administration rules & guidelines, disability claim development procedures, social security law, structure, procedures & regulations & medical terminology, diseases & disabling conditions in order to receive training & learn to develop, evaluate & adjudicate initial & reconsideration claims for social security disability & supplemental security income disability benefits and, order consultative examinations by medical specialists as needed.

<u>CLASS TITLE</u>	<u>CLASS NUMBER</u>	<u>PAY RANGE</u>	<u>EFFECTIVE</u>
Senior Disability Claims Adjudicator	16763	31	12/23/2018

CLASS CONCEPT

The full performance level class works under general supervision & requires considerable knowledge of social security administration rules & guidelines, disability claim development procedures, social security law, structure, procedures & regulations & medical terminology, diseases & disabling conditions in order to develop, evaluate & adjudicate all claim types for social security disability & supplemental security income disability benefits including re-examination of claims in payment status to determine continuance or cessation of disability benefits.

<u>CLASS TITLE</u>	<u>CLASS NUMBER</u>	<u>PAY RANGE</u>	<u>EFFECTIVE</u>
Disability Claims Specialist	16764	32	12/23/2108

CLASS CONCEPT

The advanced level class works under direction & requires thorough knowledge of social security administration rules & guidelines, disability claim development procedures, social security law, structure, procedures & regulations, medical terminology, diseases & disabling conditions & when applicable to assigned area, employee training & development or hearing process & procedures in order to perform specialized & technical tasks in one or more specialty areas(e.g. quality assurance, medical operations, disability program specialist, training, policy & procedure development, hearings, or continuing disability investigation unit).

<u>CLASS TITLE</u>	<u>CLASS NUMBER</u>	<u>PAY RANGE</u>	<u>EFFECTIVE</u>
Disability Claims Supervisor	16767	13	12/23/2018

CLASS CONCEPT

The supervisory level class works under general supervision & requires considerable knowledge of agency & social security laws & regulations governing disability claims procedures, process & programs, supervisory & program management principles/techniques &, when applicable to assigned unit, hearing process in order to supervise assigned staff & direct activities of disability evaluation unit or disability hearing unit or quality assurance unit, or to serve as manager to develop & implement policies & procedures to plan, evaluate & monitor assigned bureau program.

<u>CLASS TITLE</u>	<u>CLASS NUMBER</u>	<u>PAY RANGE</u>	<u>EFFECTIVE</u>
Disability Claims Manager	16768	15	12/23/2018

CLASS CONCEPT

The first managerial level class works under general direction & requires thorough knowledge of agency & social security laws & regulations governing disability claims procedures, process & programs, supervisory & program management principles/techniques, budgeting & public relations in order direct operations of social security disability programs in large geographic area of state (e.g., Cleveland area, Cincinnati area, northeast region, northwest region, central Ohio or southeast region), analyzes & manage all aspects of case operations (i.e., line unit functions, cost effectiveness of medical expenditures, program efficiency in terms of quantity/quality evaluation), supervise assigned disability claims supervisors & coordinate activities within large area of state, or manage specific statewide program (e.g., disability claims hearings program, physician &/or staff quality assurance, training, policy & procedures), formulate & implement policy & procedures & supervise assigned disability claims supervisors.

<u>CLASS TITLE</u>	<u>CLASS NUMBER</u>	<u>PAY RANGE</u>	<u>EFFECTIVE</u>
Disability Claims Administrator	16769	16	12/23/2018

CLASS CONCEPT

The second managerial level class works under administrative direction & requires extensive knowledge of agency & social security laws & regulations governing disability claims procedures, process & programs, supervisory & program management principles/techniques, budgeting & when applicable to specialty area, hearing process & procedures in order to coordinate & direct disability claims adjudication activities in one or more geographic areas of state, manages critical caseload factors of production, quality of product & cost effectiveness, timeliness of work flow & oversee disability caseload functions of disability claims manager(s) & supervise assigned staff; or plan, execute, control & evaluate disability hearings program for entire state (i.e., provide executive direction through network of hearing units which provide face-to-face hearings to claimants requesting reconsideration of prior medical cessation determination & supervise assigned staff); or direct central office section with statewide responsibility for major bureau operation (e.g., medical services or bureau management which include budgeting, administrative evaluation & review & support operations & supervise assigned staff in all options.

<u>CLASS TITLE</u>	<u>CLASS NUMBER</u>	<u>B. U.</u>	<u>EFFECTIVE</u>	<u>PAY RANGE</u>
Disability Claims Development Analyst	16760	14	12/23/2018	29

JOB DUTIES IN ORDER OF IMPORTANCE: (These duties are illustrative only. Incumbents may perform some or all of these duties or other job-related duties as assigned.)

Develops case documentation & information for initial & advanced claim types to assist adjudicators with efficient claims processing; develops & assists in obtaining & reviewing case documentation & information for social security disability insurance claims (i.e., reviews social security disability claims to determine if necessary information is included such as medical treatment sources & vocational history & requests additional information if documentation is incomplete) (e.g., based upon claimant's allegation & date of onset, evaluates claim to determine that medical evidence covers the complete period of alleged treatment &/or completeness of vocational history information).

Provides customer service functions and general assistance by corresponding with claimants, authorized representatives, vendor sources to resolve claim issues; communicates with claimants by telephone or letter to clarify & obtain accurate information (e.g. incomplete claim details, treatment for alleged conditions, dates of treatment, vocational history, follow ups &/or any other necessary information); educates claimant regarding course & development of claim; contacts medical & other sources, as needed, to verify mailing address, specialty & dates of treatment; consults variety of references to ensure requests for medical evidence are programmatically accurate.

Compiles records for case folder & electronic worksheet; determines appropriate forms & questionnaires to send to treating physician based on physician's specialty, preference & treatment provided; completes necessary forms to request medical evidence from hospitals & institutions; runs system queries & reviews relevant information; determines need to request information from Social Security Administration's computerized system related to previous claim decisions & consults with unit supervisor.

Refers address changes to supervisor for updates to vendor file & guidebook; prepares weekly report of cases assigned & developed; prepares & processes mail & records. Attends meetings, lectures &/or trainings.

MAJOR WORKER CHARACTERISTICS:

Knowledge of disability claim development procedures*; social security law, structure, procedures & regulations*; vocational rules*; general psychology; natural & physical sciences (e.g., biology, anatomy, physiology); abnormal psychology; psychological testing & measurement*; behavior & human motivation assessment*; personality theories*; sociology; body systems/functions & disorders*; diseases & disabling conditions*; economic & vocational analysis*; clinical & laboratory procedures*; public relations; interviewing techniques. Skill in operation of office equipment, computer applications & related software. Ability to interpret variety of technical material in medical reports & disability claims; use proper research methods in gathering data; handle sensitive inquiries from & contacts with general public; work in cooperation with all levels of government structure, medical community & individuals with disabilities.

(*) Developed after employment.

MINIMUM CLASS QUALIFICATIONS FOR EMPLOYMENT:

Completion of undergraduate or associate core program in human/medical services area (e.g. psychology, sociology, criminology, pre-medicine, special education), public relations, public administration, business administration, communications or closely related field.

-Or equivalent of Minimum Class Qualifications for Employment noted above.

TRAINING AND DEVELOPMENT REQUIRED TO REMAIN IN THE CLASSIFICATION AFTER EMPLOYMENT:

Required to maintain Social Security Administration (i.e. SSA) credentials necessary for continuous access to SSA systems, records & data

UNUSUAL WORKING CONDITIONS:

Telephone interactions with difficult claimants, some of whom may be irate.

<u>CLASS TITLE</u>	<u>CLASS NUMBER</u>	<u>B. U.</u>	<u>EFFECTIVE</u>	<u>PAY RANGE</u>
Disability Claims Adjudicator	16762	14	12/23/2018	30

JOB DUTIES IN ORDER OF IMPORTANCE: (These duties are illustrative only. Incumbents may perform some or all of these duties or other job-related duties as assigned.)

Develops, evaluates & adjudicates all initial & reconsideration claims for social security disability insurance & supplemental security income disability benefits (e.g. identifies & analyzes allegations & issues relating to claimant's medical status, researches & secures medical & vocational evidence & evaluates relevancy, consistency & accuracy of evidence, drafts assessment forms, interviews claimants, physicians, hospitals, medical facilities, local government employees, attorneys, social workers & employers, to obtain pertinent facts & to resolve conflicts); orders consultative examinations by medical specialists as needed); manages, prioritizes & follows work action plans to efficiently & accurately maintain & complete caseloads with a variety of case types & fact patterns.

Assesses severity of impairment and subsequent ability to engage in substantial gainful work activity & residual functional capacity; determines appropriate onset date & other technical factors, compares documentation to government listings to determine eligibility for benefits; reviews & secures confidential & sensitive information to include medical records & consultative examination reports, earnings records, job history; identifies & resolves conflicts in medical, vocational & other evidence, reconciles discrepancies & completes various forms; runs system queries & reviews relevant information; documents findings, keeps accurate records, prepares reports, compiles formal determination related to eligibility for benefits including personalized decision explanation notices (PDENs), & rationales supporting conclusions related to claimant's functional status & benefit eligibility under social security regulations; refers claimants for vocational rehabilitation services if appropriate.

Reviews previously unfavorable claims to ensure all evidence, including newly developed, is considered; affirms or reverses prior determinations.

Provides guidance to disability claims development analysts &/or adjudicative staff; assists with special projects, assignments & program evaluation/assessment; attends meetings, lectures &/or training. Provides status updates in response to congressional inquiries.

MAJOR WORKER CHARACTERISTICS:

Knowledge of disability claim development procedures; social security law, structure, procedures & regulations, program operations manual*, HIPAA*; vocational rules; general psychology; natural & physical sciences (e.g., biology, anatomy, physiology); abnormal psychology; psychological testing & measurement; behavior & human motivation assessment; personality theories; sociology; body systems/functions & disorders*; diseases & disabling conditions*; economic & vocational analysis; clinical & laboratory procedures; human relations; interviewing techniques; adjudicative practices, procedures & methods; relevant court decisions Skill in operation of office equipment, computer applications & related software*, problem solving & decision making, comprehension, interpretation & analysis of technical, medical & vocational data & reports, critical thinking. Ability to interpret variety of complex laws, regulations, guidelines & technical material in social security program, medical reports & disability claims; maintain high level of accuracy while handling a constantly fluctuating workload; multi-task variety of facts & functions with frequent interruptions; identify discrepancies, investigate issues & use proper research methods in gathering data; gather, collate & classify information about data, people or things; work efficiently & accurately, maintain composure & flexibility under pressure, challenging conditions & job related stress; communicate effectively by telephone, e-mail & fax with all levels of government structure, medical professionals, community, attorneys & individuals with disabilities in vulnerable situations &/or in crisis; handle sensitive inquiries from & contacts with general public, work independently.

(*)Developed after employment.

MINIMUM CLASS QUALIFICATIONS FOR EMPLOYMENT:

Completion of undergraduate core program in human/medical services area (e.g. psychology, sociology, criminology, pre-medicine, special education), public relations, public administration, business administration, communications or closely related field.

-Or 24 mos. exp. in adjudication of social security disability benefit claims for another state jurisdiction or federal component of social security administration.

-Or equivalent of Minimum Class Qualifications for Employment noted above.

TRAINING AND DEVELOPMENT REQUIRED TO REMAIN IN THE CLASSIFICATION AFTER EMPLOYMENT:

Required to maintain Social Security Administration (i.e. SSA) credentials necessary for continuous access to SSA systems, records & data

UNUSUAL WORKING CONDITIONS:

Telephone interactions with difficult claimants, some of whom may be irate.

<u>CLASS TITLE</u>	<u>CLASS NUMBER</u>	<u>B. U.</u>	<u>EFFECTIVE</u>	<u>PAY RANGE</u>
Senior Disability Claims Adjudicator	16763	14	12/23/2018	31

JOB DUTIES IN ORDER OF IMPORTANCE: (These duties are illustrative only. Incumbents may perform some or all of these duties or other job-related duties as assigned.)

Performs full scope of claims adjudication to include initial & reconsideration claims for social security disability insurance & supplemental security income disability benefits & continuing disability reviews (i.e. drafts assessment forms, re-examines claims in payment status to determine continuance or cessation of social security disability benefits: reviews relevant vocational & medical factors of claim) (e.g., age of claimant, education, training, work experience, residual impairment); manages, prioritizes & follows work action plans to efficiently & accurately maintain & complete complex caseloads with a variety of case types & fact patterns.

Reviews previously unfavorable claims to insure all evidence, including newly developed, is considered & affirms or reverses prior determination; identifies & analyzes allegations & issues relating to claimant's medical status (e.g. researches & secures medical & vocational evidence & evaluates relevancy, consistency & accuracy of evidence, communicates with claimants, physicians, hospitals, medical facilities, local government employees, attorneys, social workers & employers concerning status of claims & to obtain pertinent facts, independently orders consultative examinations by medical specialists as needed).

Assesses severity of impairment and subsequent ability to engage in substantial gainful work activity & residual functional capacity; determines appropriate onset date & other technical factors, compares documentation to government listings to determine eligibility for benefits; reviews confidential & sensitive information to include medical records & consultative examination reports, identifies & resolves conflicts in medical, vocational & other evidence, reconciles discrepancies & completes various forms; documents findings, keeps accurate records, prepares reports, compiles formal determination related to eligibility for benefits including personalized decision explanation notices (PDENs), & rationales supporting conclusions related to claimant's functional status & benefit eligibility under social security regulations; refers claimants for vocational rehabilitation services if appropriate.

Conducts review & evaluation of reconsideration of continuing disability review cessation, affirms or reverses prior determination; runs system queries & reviews relevant information; provides guidance, mentoring & claim assistance to probationary Disability Claims Adjudicators; completes special claim type assignments based on division priorities (e.g. Anti-Fraud Fast Track, Homeless); assists with program evaluation/assessment; attends meetings, lectures &/or training. Provides status updates in response to congressional inquiries.

MAJOR WORKER CHARACTERISTICS:

Knowledge of disability claim development procedures; social security law, structure, procedures & regulations, program operations manual*, HIPAA* , ; vocational rules; general psychology; natural & physical sciences (e.g., biology, anatomy, physiology); abnormal psychology; psychological testing & measurement; behavior & human motivation assessment; personality theories; sociology; body systems/functions & disorders*; diseases & disabling conditions*; economic & vocational analysis; clinical & laboratory procedures; human relations; interviewing techniques; adjudicative practices, procedures & methods, relevant court decisions Skill in operation of office equipment, computer applications & related software*, problem solving & decision making, comprehension, interpretation & analysis of technical, medical & vocational data & reports, critical thinking. Ability to interpret variety of complex laws, regulations, guidelines & technical material in social security program, medical reports & disability claims; maintain high level of accuracy while handling a constantly fluctuating workload; multi-task variety of facts & functions with frequent interruptions; understand & adapt to changes in policies & procedures; identify discrepancies, investigate issues & use proper research methods in gathering data; gather, collate & classify information about data, people or things; work efficiently & accurately, maintain composure & flexibility under pressure & job related stress; communicate effectively by telephone, e-mail & fax with all levels of government structure, medical professionals, community, attorneys & individuals with disabilities in vulnerable situations &/or in crisis; handle sensitive inquiries from & contacts with general public, work independently; write quasi-legal abstracts, case histories & reviews.

(*)Developed after employment.

MINIMUM CLASS QUALIFICATIONS FOR EMPLOYMENT:

Completion of undergraduate core program in human/medical services area (e.g. psychology, sociology, criminology, pre-medicine, special education), public relations, public administration, business administration, communications or closely related field; 36 mos. exp. in adjudicating disability benefit claims for social security disability insurance program in other state jurisdiction or federal components of social security administration.

-Or 36 mos. exp. as Disability Claims Adjudicator, 16762.

-Or equivalent of Minimum Class Qualifications for Employment noted above.

TRAINING AND DEVELOPMENT REQUIRED TO REMAIN IN THE CLASSIFICATION AFTER EMPLOYMENT:

Required to maintain Social Security Administration (i.e. SSA) credentials necessary for continuous access to SSA systems, records & data

UNUSUAL WORKING CONDITIONS:

Telephone interactions with difficult claimants, some of whom may be irate.

<u>CLASS TITLE</u>	<u>CLASS NUMBER</u>	<u>B. U.</u>	<u>EFFECTIVE</u>	<u>PAY RANGE</u>
Disability Claims Specialist	16764	14	12/23/2018	32

JOB DUTIES IN ORDER OF IMPORTANCE: (These duties are illustrative only. Incumbents may perform some or all of these duties or other job-related duties as assigned.)

Performs specialized & technical tasks in one or more specialty areas, quality assurance (i.e., reviews & analyzes disability insurance claims in regard to development, adjudicative & technical performance & program compliance), disability program specialist (i.e., consults with & advises disability claims adjudicators on evaluation & adjudication issues & technical, medical & vocational matters & instructs adjudicators on difficult or unique problem situations such as evaluating probability & propensity of transferable job skills, re-employment & functional loss as it related to vocational matters), training (i.e., prepares, conducts & revises training sessions relating to social security laws & regulations, medical issues & vocational factors for disability claims adjudicators & provides on-going training for division staff), policy & procedure development (i.e., develops, designs & coordinates all division of disability determination policies & procedures), hearings (i.e., conducts & adjudicates hearings with people &/or their representatives appealing determinations terminating benefits, interviews claimants & witnesses, assesses credibility of same, reviews claims folders & evidence presented at hearing, evaluates testimony & evidence to prepare written report & make determination; notifies claimant of final disability determination following hearing), and Cooperative Disability Investigation Unit (i.e. reviews & researches cases involving potential fraud or similar fault, may refer to & collaborate with Office of the Inspector General for investigation, prepares report of investigation, associates with case file) in accordance with established procedures.

Performs tasks related to assigned area (e.g., prepares monthly reports, reports on special training & studies performed & conducts training for physicians & medical specialists & monitors quality of medical services provided; trains disability claims adjudicators & division staff, provides in-service training for physicians & medical specialists, monitors quality of medical services provided & makes recommendations for program improvement; maintains, updates & monitors training protocols, materials & supplies; assists in analyzing & interpreting program policies & problem situations).

Provides technical assistance to adjudicative staff & supervisors; reviews case actions for service deficiencies & makes recommendations for resolution; oversees & guides disability claims adjudicators; provides information regarding social security disability & appeals process to claimants, representatives &/or general public; performs regular claims adjudication duties, carries normal caseload responsibilities &/or assists in other aspects of division operations when assigned; attends meetings, lectures &/or training. Provides status updates in response to congressional inquiries.

MAJOR WORKER CHARACTERISTICS:

Knowledge of disability claim development procedures; social security law, structure, procedures & regulations, program operations manual*, HIPAA*; vocational rules; general psychology; natural & physical sciences (e.g., biology, anatomy, physiology); abnormal psychology; psychological testing & measurement; behavior & human motivation assessment; personality theories; sociology; body systems/functions & disorders*; diseases & disabling conditions*; economic & vocational analysis; clinical & laboratory procedures; human relations; due process of administrative hearings; rules of evidence; interviewing techniques, disability claims management*, employee training & development*, counseling; adjudicative hearing practices & procedures, methods; relevant court decisions; Skill in operation of office equipment, computer applications & related software*, problem solving & decision making, comprehension, interpretation & analysis of technical, medical & vocational data & reports, critical thinking. Ability to interpret variety of complex laws, regulations, guidelines & technical material in social security program, medical reports & disability claims; maintain high level of accuracy while handling a constantly fluctuating workload; multi-task variety of facts & functions with frequent interruptions; understand & adapt to changes in policies & procedures; identify discrepancies, investigate issues & use proper research methods in gathering data; gather, collate & classify information about data, people or things; work efficiently & accurately, maintain composure & flexibility under pressure & job related stress; communicate effectively face-to-face &/or by telephone, e-mail & fax with all levels of government structure, medical professionals, community, attorneys & individuals with disabilities in vulnerable situations &/or in crisis; handle sensitive inquiries from & contacts with general public, work independently, use statistical analysis; prepare & deliver presentations, write &/or edit technical, medical & vocational information write quasi-legal abstracts, case histories & reviews.

(*)Developed after employment.

MINIMUM CLASS QUALIFICATIONS FOR EMPLOYMENT:

Completion of undergraduate core program in human/medical services area (e.g. psychology, sociology, criminology, pre-medicine, special education), public relations, public administration, business administration, communications or closely related field; 60 mos. exp. in adjudicating disability benefit claims (i.e., to include initial, reconsideration & continuing disability reviews) for social security disability insurance program in other state jurisdiction or federal components of social security administration.

-Or 24 mos. exp. as a Senior Disability Claims Adjudicator, 16763.

-Or equivalent of Minimum Class Qualifications for Employment noted above.

TRAINING AND DEVELOPMENT REQUIRED TO REMAIN IN THE CLASSIFICATION AFTER EMPLOYMENT:

Required to maintain Social Security Administration (i.e. SSA) credentials necessary for continuous access to SSA systems, records & data

UNUSUAL WORKING CONDITIONS:

May require travel. Telephone interactions with difficult claimants, some of whom may be irate.

<u>CLASS TITLE</u>	<u>CLASS NUMBER</u>	<u>B. U.</u>	<u>EFFECTIVE</u>	<u>PAY RANGE</u>
Disability Claims Supervisor	16767	EX	12/23/2018	13

JOB DUTIES IN ORDER OF IMPORTANCE: (These duties are illustrative only. Incumbents may perform some or all of these duties or other job-related duties as assigned.)

Supervises assigned staff (e.g., disability claims adjudicators 1 & 2 &/or 3) & directs activities of disability evaluation unit (i.e., supervises unit in conducting timely & accurate medical/vocational investigations rendering objective decisions on claimant eligibility for social security benefits, reviews unit operations for administrative performance & compliance with federal & state program requirements, monitors case actions, identifies problems & initiates corrective action & gives instruction in program evaluation & review processes), or disability hearings unit (i.e., coordinates activities of professional & support staff engaged in processing disability hearing claims, makes case assignments, oversees scheduling of hearings, reviews work & decisions of hearing officers & monitors performance of hearing officers during hearings), or quality assurance unit (i.e., supervises disability claims specialists in evaluation of claims processing & development of policy & procedures, or serves as manager to develop & implement policies & procedures to plan, evaluate & monitor assigned bureau program (e.g., vendors providing consultative medical & psychological services to bureau in assigned area of state).

Reviews, amends & authorizes consultative examination expenditures for purchase of testing & determines whether such conforms to agency budgetary limits; reviews agency physicians' medical cases & makes evaluation for adherence to program guidelines or evaluates services provided by medical & psychological staff; ensures services are provided in accordance with rules & regulations of social security administration; initiates corrective action as needed; conducts on-site visits; recruits physicians, establishes fee schedules & develops contractual agreements.

Compiles, collates & analyzes program & performance data & current trends & prepares reports on individual staff & unit &/or medical/psychological service provider performance, detailed claim issues, claims development, accuracy & staff training programs, coordinates unit activities with support functions of bureau (e.g., medical administration, social security district offices) & identifies problem areas or trends & recommends corrective action; monitors written decisions to ensure they are in accordance with social security administration regulations, rulings & policies, reviews returns to identify trends & ensures that recommendations of reviewers are addressed, reviews sample of claims for completeness, accuracy & proper identification of sensitive materials, participates in policy & procedure formulation & attends administrative meetings & provides ongoing training to assigned staff; provides assistance, direction & guidance to agency staff regarding area(s) of responsibility.

Performs duties & functions of hearing officer when caseload requires; oversees maintenance of building & equipment; works with other agencies & groups to develop community resources & to assist claimants in documentation of their disability claims; works with regional & federal disability offices to locate missing parts of claim files &/or claimants; conducts presentations regarding bureau procedures, operations & services; assists with recruitment activities.

MAJOR WORKER CHARACTERISTICS:

Knowledge of disability claims unit management; supervisory principles/techniques*; disability claims development procedures; social security laws & regulations; vocational rules; diseases & disabling conditions; employee training & development; public relations. Ability to understand facts & factual concepts of health & pathology; use statistical analysis; proofread technical materials, recognize errors & make corrections; establish friendly atmosphere as supervisor of work unit; prepare & deliver speeches; handle sensitive inquiries from & contacts with officials & general public.

(*)Developed after employment.

MINIMUM CLASS QUALIFICATIONS FOR EMPLOYMENT:

Completion of undergraduate core program in human/medical services area (e.g. psychology, sociology, criminology, pre-medicine, special education), public relations, public administration, business administration, communications or closely related field.; 12 mos. exp. as Disability Claims Specialist, 16764.

-Completion of undergraduate core program in human/medical services area (e.g. psychology, sociology, criminology, pre-medicine, special education), public relations, public administration, business administration, communications or closely related field; 24 mos. exp. as Senior Disability Claims Adjudicator, 16763.

-Completion of undergraduate core program in human/medical services area (e.g. psychology, sociology, criminology, pre-medicine, special education), public relations, public administration, business administration, communications or closely related field; 36 mos. exp. as Disability Claims Adjudicator, 16762.

-Or equivalent of Minimum Class Qualifications for Employment noted above.

TRAINING AND DEVELOPMENT REQUIRED TO REMAIN IN THE CLASSIFICATION AFTER EMPLOYMENT:

Required to maintain Social Security Administration (i.e. SSA) credentials necessary for continuous access to SSA systems, records & data

UNUSUAL WORKING CONDITIONS:

May require travel.

<u>CLASS TITLE</u>	<u>CLASS NUMBER</u>	<u>B. U.</u>	<u>EFFECTIVE</u>	<u>PAY RANGE</u>
Disability Claims Manager	16768	EX	12/23/2018	15

JOB DUTIES IN ORDER OF IMPORTANCE: (These duties are illustrative only. Incumbents may perform some or all of these duties or other job-related duties as assigned.)

Directs operations of social security disability programs in large geographic area of state (e.g., Cleveland area, Cincinnati area, northeast region, northwest region, central Ohio or southeast region), analyzes & manages all aspects of case operations (i.e., line unit functions, cost effectiveness of medical expenditures, & program efficiency in terms of quantity/quality evaluation), supervises disability claims supervisors & coordinates activities within large area of state;

OR

Manages specific statewide program (e.g., disability claims hearings program, physician &/or staff quality assurance, training, policy & procedures), provides managerial oversight to ensure appropriate evaluation & review of assigned program; formulates & implements policy & procedures, ensures quality, provides administrative review, oversight & direction to staff & supervises assigned disability claims supervisors.

Directs work of assigned staff, contracted physicians &/or psychologists to include monitoring productivity & accuracy including statistics, providing feedback to consultants, clarifying policy on claims incorrectly evaluated & identifies training needs; recommends termination of contracted physicians & psychologists when warranted; prepares annual evaluation assessing consultants' performance & recommends specific number of hours for contract renewal; approves & authorizes payment & checks inaccurate reporting of hours worked & failure to fulfill contractual obligations.

Acts as liaison with social security district offices & medical &/or health care facilities in assigned geographic area, or as required by assigned program; provides assistance & training so mutual goals in providing expedient medical evaluation services can be achieved & evaluates proficiency of assigned personnel; recognizes deficiencies & directs corrective action through workshops, in-service training & seminars.

Acts as technical consultant to Chicago regional office of social security administration for disability program design changes & operational policies resulting from federal/state legislation, social security regulatory revisions & court decisions & acts as consultant & resource person to departmental staff, community action organizations & other social services agencies.

Assists finance section & director's office with cost control & effectiveness & budget allocations for medical & vendor services; works in collaboration with other disability claims managers &/or administrative staff on projects & special assignments.

Responds to sensitive inquiries from public officials (e.g., senators; state representatives; news media) regarding agency procedures or program policies & proper interpretation of policies.

MAJOR WORKER CHARACTERISTICS:

Knowledge of social security laws, regulations & programs; disability claim development procedures; disability claim program management; supervisory principles/techniques; diseases & disabling conditions; employee training & development; counseling; public relations; budgeting*. Ability to write instructions, policy directives & programs; promote effective sphere of inter-office relations & communications; represent department at public & private health & social services institutions; write & interpret contractual agreements with non-governmental agencies & institutions; speak authoritatively as representative of director.

(*)Developed after employment.

MINIMUM CLASS QUALIFICATIONS FOR EMPLOYMENT:

Completion of undergraduate core program in human/medical services area (e.g. psychology, sociology, criminology, pre-medicine, special education), public relations, public administration, business administration, communications or closely related field; 3 courses or 9 mos. exp. in public administration (e.g., human resource management, accounting, budgeting, organizational development & analysis, marketing, statistics); 12 mos. exp. as Disability Claims Supervisor, 16767.

-Or 4 yrs. in supervision of public or private medical or disability related program.

-Or equivalent of Minimum Class Qualifications for Employment noted above.

TRAINING AND DEVELOPMENT REQUIRED TO REMAIN IN THE CLASSIFICATION AFTER EMPLOYMENT:

Required to maintain Social Security Administration (i.e. SSA) credentials necessary for continuous access to SSA systems, records & data

UNUSUAL WORKING CONDITIONS:

May require out of state travel.

<u>CLASS TITLE</u>	<u>CLASS NUMBER</u>	<u>B. U.</u>	<u>EFFECTIVE</u>	<u>PAY RANGE</u>
Disability Claims Administrator	16769	EX	12/23/2018	16

JOB DUTIES IN ORDER OF IMPORTANCE: (These duties are illustrative only. Incumbents may perform some or all of these duties or other job-related duties as assigned.)

Coordinates & directs disability claims adjudication activities in one or more geographic areas of state, ensures criteria for documentation, adjudication & decisions of social security disability claims are equitably, efficiently & economically applied to all claimants, analyzes & monitors all aspects of disability insurance adjudication process (i.e., initial filing, development, final disposition, appeals process, continuing entitlement, special workloads & remands); manages critical caseload factors of production, quality of product & cost effectiveness, timeliness of work flow & oversees disability caseload functions of disability claims manager(s) & supervises assigned staff;

OR

plans, executes, controls & evaluates disability hearings program for entire state (i.e., provides executive direction through network of hearing units which provide face-to-face hearings to claimants requesting reconsideration of prior medical cessation determination), interacts with other bureau components to ensure requirements of hearing process are met & coordinates hearing process with social security administration & supervises assigned staff;

OR

directs central office section with statewide responsibility for major bureau operation (e.g., medical services, which may include recruitment of physicians & psychologists &/or direction of medical services & special medical examination & attendant travel programs or bureau management which includes budgeting, administrative evaluation & review & support operations & supervises assigned staff in all options.

conducts on-going assessment of on line unit functions through studies & administrative reports, audits & analyses of operations produced by unit supervisors, area managers &/or program review staff of bureau of disability determination & social security administration. evaluates, formulates, designs & recommends changes to correct program deficiencies; implements approved action through disability claims managers & directs & plans operational changes dictated by law, social security administration &/or judicial process.

recommends areas of in-service training & assists with planning & implementation of training to increase line unit competence & proficiency & coordinates daily unit functions with the bureau's medical services, fiscal section, medical field personnel & staffs of internal & external support.

writes program review & evaluation reports & formulates projections defining agency's level of performance for social security administration regional norms &/or standards & national scale & submits pertinent documentation & results from program audits & evaluations to social security administration; recruits & contracts for medical specialists & staff physicians, negotiates purchasing & leasing contracts for office space, facilities, equipment & services (e.g., telephone, security, duplicating) & appears before congressional research & investigation committees, rehabilitation groups, news media, hospitals & consumer advocate groups; represents program to social security administration & other state officials & coordinates programs for public to communicate goals & effects of hearing process; works in collaboration with other disability claims administrators &/or administrative staff on projects & special assignments.

MAJOR WORKER CHARACTERISTICS:

Knowledge of social security laws & regulations; disability claim development procedures; disability claim program management; manpower planning*; employee training & development; supervisory principles/ techniques; diseases & disabling conditions; budgeting. Ability to deal with many variables & determine specific action; use statistical analysis; write instructions, programs, policies & procedures; establish friendly atmosphere as division chief; understand manuals & verbal instructions technical in nature; prepare meaningful, concise & accurate reports; prepare contracts; handle sensitive inquiries from & contacts with officials & general public.

(*)Developed after employment.

MINIMUM CLASS QUALIFICATIONS FOR EMPLOYMENT:

Completion of undergraduate core program in human/medical services area (e.g. psychology, sociology, criminology, pre-medicine, special education), public relations, public administration, business administration, communications or closely related field. ; 6 courses or 18 mos. exp. in public administration (e.g., human resource management, accounting, budgeting, organizational development & analysis, marketing, statistics); 12 mos. exp. as Disability Claims Manager, 16768.

- Or 24 mos. exp. as Disability Claims Supervisor, 16767.

-Or 5 yrs. exp. in supervision of public or private medical or disability related program.

-Or equivalent of Minimum Class Qualifications for Employment noted above.

TRAINING AND DEVELOPMENT REQUIRED TO REMAIN IN THE CLASSIFICATION AFTER EMPLOYMENT:

Required to maintain Social Security Administration (i.e. SSA) credentials necessary for continuous access to SSA systems, records & data

UNUSUAL WORKING CONDITIONS:

Not applicable.