

NC Disability Determination Services (NC DDS) is a division of the NC Department of Health and Human Services. We are primarily funded by the federal government’s Social Security Administration (SSA) and we make medical determinations for Social Security and state Medicaid Disability claims. In FY2018, NC DDS adjudicated 168,199 federal and Medicaid disability applications for the state of North Carolina. In addition to adjudicating these customary claims, our agency is capable of assisting in several “special workloads” for targeted claim types applying for benefits. Some examples of these special workloads include State Hospital patients who are transitioning to community living, Military Casualty claims, and SOAR. NC DDS, in our joint collaboration with SOAR, adjudicates SSI/SSDI claims for citizens who are homeless, or at-risk of homelessness, in NC. The average case processing time for a SOAR claim at NC DDS is 89 days and in FY2018 less than 5% of SOAR claims were closed due to Insufficient Evidence. For the 10th year in a row, NC has been named one of the Top Ten states in the nation for our positive SOAR outcomes.

Our goal with this Talking Paper is to share NC DDS expectations in terms of SOAR claims, as well as give a brief insight on our business processes in the adjudication of claims in our agency.

Sequential Evaluation

SSI/SSDI claims are filed at one of 37 Social Security Offices in NC. Applicants and their SOAR Representatives can apply by phone, online, or in person at an SSA Field Office. SOAR Representatives will complete a SSA-1696 Appointment of Representation form and submit this with the application to SSA. Upon submitting a SOAR application to a SSA Field Office, SOAR Representatives should fax the claimant’s name and SSN to DDS to alert them the claim is coming. When the case is transferred to NC DDS, it will be flagged as SOAR and transferred to one of our DDS SOAR Analysts for adjudication.

NC DDS adjudicates claims under the administrative program rules and regulations of the Social Security Administration. A part of this administrative process is called Sequential Evaluation. Sequential Evaluation is a 5-step process used in determining a claimants’ medical eligibility for disability benefits:

- 1. Is the person engaging in Substantial Gainful Activity (SGA)?**
→\$1220/month non-blind, \$2040/month blind for 2019
- 2. Are the person’s impairments severe?**
- 3. Do the person’s impairments meet or equal a listing?**
- 4. Do the person’s impairments preclude the ability to perform their past work?**

5. Do the person's impairments prevent them from performing another type of work?

Additional information about Sequential Evaluation can be found on SSA's website: [Sequential Evaluation](#)

Once a medical determination is made at DDS, all SOAR denial decisions are reviewed by our Quality Assurance team and, if accurate, are sent back to SSA for a final disability decision. Some cases are pulled for a national Quality Review team at random, and final decisions on these claims will be slightly delayed.

If a claim is approved, SSA will be in contact with the claimant and/or SOAR Rep with information regarding the approved Onset Date for benefits, monetary details, payee specifics, etc. If a claim is denied, a letter will be mailed to the claimant and the SOAR Rep with information about the claim and DDS's findings. Access to the electronic claim file can be requested and granted at local SSA Field Offices for SOAR Reps to review the claim findings.

There are 4 levels of appeals in the disability process, should a claim be denied.

1. **Reconsideration – processed at NC DDS and must be filed within 60 days**
2. **Hearing by ALJ**
3. **Review by Appeals Council**
4. **Federal Court Review**

Managing Expectations of SOAR Claims at NC DDS

NC DDS and SOAR have had a successful and mutually beneficial working relationship for almost 10 years serving the homeless population of NC. We care deeply about the goals and mission of the SOAR program. We work diligently to process SOAR claims carefully and accurately while following SSA's programmatic policies and procedures. The SOAR initiative at our agency has grown from one DDS SOAR Analyst to a team of now 10+. Part of this successful partnership is managing expectations in the claims process at DDS. Please see the below points of interest to keep in mind as your SOAR claim is being processed at NC DDS:

- It can take up to 2 weeks for claims to transfer to NC DDS from SSA and then several days to assign your claim to a DDS SOAR Analyst once received at NC DDS. **Please allow at least 3 business days from the receipt of your claim for the 1696 Barcode to be sent to you** prior to calling the DDS SOAR Analyst for status. After 3 business days, you may contact our Disability Call Center at 1-866-542-8113 if you have not yet received a 1696 barcode.

- DDS SOAR Analysts are highly trained, dedicated, and motivated to helping the homeless population. They are working efficiently and thoroughly to request medical records, review Medical Summary Reports, and make accurate decisions. **DDS SOAR Analysts will contact SOAR Reps if additional information is needed. However, frequent status calls on claims can delay processing time of SOAR claims and other important caseloads.** If there are issues in the field that will impact the claimant's application and you need to contact the DDS SOAR Analyst, please keep the call brief. Examples of this include if your client is hospitalized or in jail.
- DDS SOAR Analysts are required by SSA program rules to request ALL medical records listed on an application (or discovered during case processing). **Records submitted via the SSA-1696 SOAR Rep Barcode are not always all-inclusive; therefore, in following SSA policy, further development for medical evidence may be required by DDS SOAR Analysts.**
- Medical Summary Reports (MSR) are a valuable tool that DDS SOAR Analysts utilize while evaluating SOAR claims. **While personal history, such as housing, education, and employment are helpful, we ask that the MSR focus more on objective medical evidence, rather than subjective information.** Policy directs that the MSR is treated as medical evidence, and **NC DDS gives 20 calendar days to receive this form** from SOAR Reps. This allows SOAR Reps time to complete and submit the form, while avoiding unnecessary processing time for DDS SOAR Analysts to hold claims while waiting for the MSR to be submitted.
- When a medical determination is made at DDS and the claim is closed, it is no longer within our jurisdiction. SOAR Reps have the option to formally request access to the electronic claim file through the local SSA office for their review. This can be requested from SSA by phone, mail, or in person. **Please note, DDS SOAR Analysts cannot discuss why a claim was denied with a SOAR Rep.** If you feel an inaccurate decision was made, please review the electronic file at a SSA office and consider filing an appeal application.
- **SOAR Reps are to only call the assigned DDS SOAR Analyst of a claim for any questions or concerns while the case is in process.** If a SOAR Rep disagrees with a decision that DDS has made, it is recommended they follow the appeals process as outlined by SSA policies.

While not all SOAR claims that are processed at NC DDS will result in an allowance determination, our agency is committed that these claims be adjudicated efficiently and accurately with a high degree of quality, compassion, and professionalism. We look forward to our continued relationship with NC SOAR and the opportunity to assist this underserved and vulnerable population.

<https://www.ncdhhs.gov/dds>