

Guide to Qualifying for Disability



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INTRODUCTION

If you're suffering from an injury or ailment that makes it excessively difficult or impossible to work, we want you to know that you're not alone. We wanted to make this guide so that you can easily and readily access the information necessary to begin the process of getting your life back.

Disability insurance is an unfortunate necessity (trust me, we wish that no one would have to go through what you do on a daily basis), and the procedures are complex because of those who attempt to take what's not theirs. However, we've done this many times, and we can help you to figure out whether or not you qualify for disability. Below are the details on the most common ailments which qualify for disability. We hope that this information is helpful! Please note, this guide is only meant for a general overview of the facts. If you need more assistance in applying or learning if you qualify for benefits, speak to a professional. Disability Experts of Florida with over 100 years of combined professional experience will guide you through the process. We will evaluate your specific situation and help clarify your eligibility for benefits. Every person is different!

LEADING CAUSES OF DISABILITY

Perhaps you've been browsing our site and wondering to yourself what qualifies someone to receive Social Security disability benefits. Well, that's more complex a question than it seems at first glance. There are many reasons why someone might be able to receive benefits, as there are many different debilitating diseases, from arthritis to depression to cardiovascular problems. The problem is learning how to qualify for these programs. If you need more detailed lists of the qualifying symptoms, the Social Security Administration's Blue Book is the primary resource for what qualifies.

Let's go over the qualifications quickly. Please understand that this is neither a comprehensive list nor a guarantee that you'll receive benefits. If you think you qualify, you should speak to a qualified professional to ensure that you meet the requirements and help you apply for the benefits.

ARTHRITIS

Many people are surprised to hear that this condition can qualify them for Social Security disability benefits. Arthritis is, in fact, the most common physical ailment that qualifies someone for disability to work. It actually makes perfect sense when you think about it: arthritis affects your ability to move because of damage to the cartilage in your joints.

Arthritis can be the result of an autoimmune response, wear and tear on the joints, a broken bone, or infection. It can be mild, or very severe, especially when it comes to rheumatoid arthritis. The disability here is obvious, as being unable to move rules out all physical labor and a many other forms of labor.

Related to this are other musculoskeletal issues. Bad joints, spinal issues, broken bones that didn't heal correctly, and other problems involving the muscle and skeleton can be debilitating. Walking with a bad hip or a bad spine can be downright painful, and even worse, it can lead to the inability to work.

CANCER

Cancer, too, is a fairly obvious cause of disability. Many forms of cancer are disabling in their progressed stages due to the effects it has on the body, not to mention the effects of cancer treatments on a person's body. The chemotherapy and radiotherapy can sap the body of its strength, and there's no guarantee that after the cancer goes into remission that the person will be able to work at all.

Part of the big concern around this is that medicine has progressed to the point that it has. People are living longer under the new medications, and more and more are surviving cancer—which is great! But it also leaves the survivors with a problem, especially if the cancer took away some of their ability to perform work, which is why it is becoming one of the biggest disabilities.

LEADING CAUSES OF DISABILITY

CARDIOVASCULAR DISEASE AND STROKE

The reasons that these are disabling conditions are fairly clear. Physical labor involves a raised heart rate—unadvisable for anyone who has cardiovascular disease. Overworking an ill heart can lead to severe health complications, such as a fatal heart attack, which is why it is on the SSA's list. Stroke, too, can disable a person from working because of its ability to damage the brain. Both of these issues constitute one of the major causes of disability as well as one of the major medical care costs in the United States.

MENTAL HEALTH ISSUES

It's not just physical disabilities that keep people from working. Depression and bipolar disorder can be as debilitating as many physical conditions (sometimes more debilitating). Depression and bipolar disorder both affect the ability of a worker to fully understand and comply with the demands and needs of their employers, which is a major part of work. This makes mental health issues just as worthy of qualification for Social Security Disability Insurance (SSDI) as physical health issues.

NERVOUS SYSTEM DISORDERS

Diseases such as Alzheimer's disease, Parkinson's disease, ALS (Lou Gehrig's Disease), Epilepsy, and Multiple Sclerosis can all cause issues with working, as they're all diseases that involve the malfunction or degeneration of the nervous system—all of which affect motor skills, reaction time, or mental clarity (possibly even two or all three in conjunction). If one can't think or move without the risk of harming themselves or others, it is an obvious disability that must be addressed.

DIABETES

Diabetes isn't a condition that one might think of first when it comes to disability benefits. Its ability to hinder a worker isn't always obvious. Diabetes can lead to neuropathy and heart disease. Furthermore, individuals with diabetes require a greater degree of medical care. Because of its ability to cause major health problems and an inability to perform certain jobs, diabetes does qualify some for SSDI.

ACCIDENTS

Accidents can create an inability to move or work, which obviously qualifies someone for disability. Interestingly enough, this is at the bottom of the list because it's one of the least common causes. It accounts for less than 10% of disability cases, which may sound strange to most people that aren't on disability.

Again, this list isn't even close to comprehensive, but these are some of the top reasons why a person might be on, or qualify for, disability benefits. While these lists are accurate, there are smaller details and specific symptoms that must be present for you to qualify. If you need assistance with determining your eligibility, contact Disability Experts of Florida and we will be there for you every step of the way.

ARTHRITIS

If you suffer from arthritis, you know of its disabling effects on the human body. From osteoarthritis to rheumatoid arthritis (RA), all of the effects are painful. Did you know that there are over 100 forms of arthritis recognized by medical professionals? Perhaps you didn't know that it is the most common cause of disability in the United States and that more people are on disability insurance because of arthritis than any other disability. That's an alarming statistic! If your arthritis has hampered your work (or stopped you from working entirely), it might be a comforting thought to know that you can, in fact, qualify for disability.

THE DIFFERENCE BETWEEN RA AND OSTEOARTHRITIS

In case you're not familiar with the differences, there are a great many. The reason why there are over 100 forms of arthritis is that there are a variety of causes. For instance, osteoarthritis is the most common form of arthritis. When most people complain of arthritis pain, swelling in their joints, and so forth, they're most likely complaining about osteoarthritis, which is caused by wear and tear on the joints. This is common amongst older people but everyone can be affected by it, so everyone should be wary.



The other major form of arthritis is known as RA. While the symptoms of RA are similar to osteoarthritis (the inflammation of joints that causes pain, swelling, and redness), the reason why it exists is fundamentally different. Osteoarthritis is caused primarily by wear and tear on the joints, whereas RA is primarily an autoimmune disease. If you have RA, your body is attacking itself and destroying its own joints. This is why the severity of RA is much worse than osteoarthritis; your body isn't attempting to fight the degeneration of your joints, it's actually causing it. It's far easier to justify a claim for RA, but again, both types of arthritis (and many other forms of arthritis) can be used to justify a claim.

IS IT ALWAYS A DISABLING DISEASE?

In a word, no. Arthritis is not always disabling. Some have more pain than others, and some have more joint restriction than others due to the form of the disease and the progression of it. There are medications and surgeries that patients can undergo to either remediate or slow the progression of the disease. However, the Social Security Administration (SSA) has written guidelines as to how it classifies what is a disabling form of arthritis.

The SSA's Blue Book lists in detail the criteria needed to be found disabled solely upon medical factors. It provides specific medical findings needed for an award of disability benefits such as deformed joints with chronic pain, stiffness, and limited movement (including abnormal movement). It requires that you have at least one major weight-bearing joint affected by arthritis severe enough to limit your movement or one major joint on your upper body on each side that results in the limited movement.

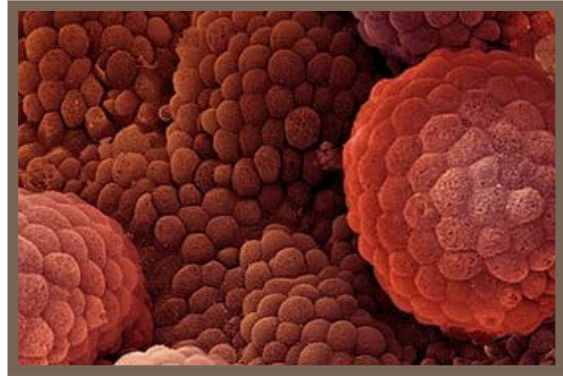
ARTHRITIS

If you suffer from this kind of pain and limited mobility, you may qualify for disability benefits and should speak to a professional about applying for SSDI. Just because this naturally occurring medical condition has disabled your joints doesn't mean that you shouldn't get the support that you need in order to take care of yourself. Don't let arthritis drag you down, and don't let anything else get in the way of your future. It's painful and you might feel embarrassed sometimes, but you shouldn't. Your future is ahead.

If you or a loved one is suffering from cancer, you may be interested in filing for disability benefits for cancer. Whether or not you will be eligible for benefits will depend on several factors of your condition and how they affect your life.

CONDITION MUST PREVENT YOU FROM WORKING

To be eligible for disability benefits for cancer, the condition must prevent you or be expected to prevent you from working for at least 12 consecutive months. The SSA (Social Security Administration) will want to know if you are currently working, if you can no longer do the work you used to do, and if there is any other work that you can do instead. To be eligible for disability benefits for cancer, the condition must prevent you from being able to work on a full time basis.



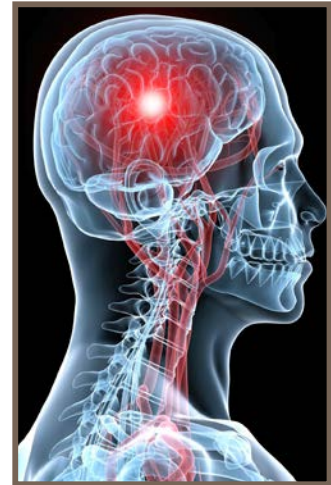
CONDITION MUST BE APPROVED AND LONG-TERM

To be eligible for disability benefits for cancer, your condition must be on the SSA's list of approved conditions for disability benefits. The condition must also be considered long-term, meaning it will last at least 12 months or will end in death. Some cancers respond well to treatment, allowing you to return to work in less than 12 months, which may prevent you from being eligible for disability benefits for cancer. If the cancer is removed with surgery and does not return or spread to other parts of the body, this will also likely make you ineligible for disability benefits for cancer.

If you or one of your loved ones has ever had a stroke, you know just how unpredictable the condition is. Depending on a number of factors, such as the severity of your stroke and your general health, you might only have minor, treatable symptoms, or you could end up being permanently disabled after a single occurrence. Damage caused by a stroke is so unpredictable that there's a three-month deferral on all Social Security Disability Insurance (SSDI) claims for stroke because there's simply no good way to know what damage has been done and what a person will and won't be able to do without long-term observation. With that said, it's good to know that getting SSDI is possible for those who have had a stroke and meet certain conditions.

WHAT IS A STROKE?

A stroke is a sudden shortage of blood flow to the brain. There are two major types of stroke: ischemic and hemorrhagic stroke. Ischemic stroke is pretty familiar, as it involves the blockage of an artery in the brain, either caused by a clot forming in a very narrow passageway (known as a thrombotic stroke) or from a piece of a clot breaking off, finding its way to the brain, and blocking a passageway (known as an embolic stroke, or an embolism). Hemorrhagic strokes are when a blood vessel bursts in the brain. Both of these can lead to certain parts of the brain not receiving the blood they need to work effectively.



The symptoms are fairly easy to detect if you know what you're looking for: a sudden headache, possibly severe, that worsens when you shift around or cough. You may also notice a sudden change in mood, alertness, or ability to perform actions of any kind. It's important to get to the hospital quickly, as treating a stroke in time can prevent disabling damage. Some of the disabling damage that stroke can cause include a permanent loss of mobility, muscle spasms, loss of feeling, and so forth.

To receive disability, the condition must go beyond a certain level of damage. As per the SSA Blue Book, you must have either the inability to communicate effectively (either by way of speaking or other forms of communication) or the inability to effectively move two of your limbs to perform working actions or to stand. These conditions must be present three months after the stroke or the SSA will defer the consideration of your condition until after that period. This is because, as has been explained before, the condition is not necessarily permanently debilitating. Unexpected recovery is not unheard of, so the SSA imposes a delay to ensure that the condition is long-term.

Strokes can also cause secondary effects that could allow you to qualify for disability. If you lose your vision due to a stroke, you may qualify because of that. However, this is still under the three-month waiting period because your condition may improve. The blindness that you might experience because of stroke is called hemianopia, or the loss of sight in half of each eye's visual field. Mental clarity and other physical problems can result from the issues outlined here, so be sure to know what's going on with your body, especially after the three month period.

Finally, it is important to remember that stroke is not the end of the world. People have lived and will continue to live perfectly wonderful lives afterwards. We certainly hope that if you've had a stroke, you will continue to improve and that you won't be permanently disabled—we know that the transition and loss of ability can be a pain to deal with and adjust to, so we hope that, if you or a loved one experiences a stroke, the recovery is swift.

HEART ATTACK

If you've recently had a heart attack, you know of the dangers and the fear surrounding this catastrophic event. The pains in your arm, the hospital stay, and the surgery are but a small part of the issue. You worry about your family and your job. It's not easy. However, a lot of people go on living very normal and healthy lives after a heart attack—which is a very good thing! However, a heart attack can end up disabling some people, which keeps them from working. The injuries that you can sustain (not to mention recovery from any heart surgery you might need) can leave you disabled for years to come.

We'd like to say this before we continue: you cannot receive SSDI for a heart attack alone. By itself, a heart attack is not considered a disabling condition and has no listing in the Social Security Administration (SSA)'s Blue Book. However, there are ways to receive benefits if the heart attack has caused permanent damage.



HEART DISEASE

Heart disease, listed as a disabling condition in the Blue Book, is a major health issue of which myocardial infarctions (heart attacks) are a symptom. If you experience one or multiple heart attacks, you may qualify for disability benefits. However, the requirements to receive benefits are quite stringent. You must show limitations in an exercise tolerance test or have three separate ischemic episodes (related to heart attacks) in which a revascularization (bypass) is performed or needs to be but cannot be.

Another way you can qualify for disability with heart disease is by proving coronary artery disease. You'll need evidence showing that you have at least one of these symptoms:

- Narrowing of a non-bypassed left main coronary artery by at least half.
- Narrowing of another non-bypassed coronary artery by at least 70%.
- Narrowing by at least half of a long segment (longer than a centimeter) of a non-bypassed coronary artery.
- Narrowing by at least half of two non-bypassed coronary arteries.
- Narrowing of a bypass graft vessel by at least 70%.

These symptoms must be in conjunction with very serious limitations on your ability to begin, perform, or complete daily activities.

RECURRENT ARRHYTHMIAS

It's not just myocardial infarction that you need to worry about here. Cardiac arrest (often mistaken for a heart attack) is a different form of heart issue that results from arrhythmias. An arrhythmia is an abnormal rhythm in your heartbeat. Here is a list of a few things that can cause arrhythmia:

- Coronary Artery Disease
- Cardiomyopathy
- Valve disorders
- Electrolyte imbalances in your blood
- High blood pressure
- Complications from heart surgery
- Injury from a heart attack (myocardial infarction)
- Other medical conditions

You'll notice in this list that injuries sustained from a heart attack, heart disease, and heart surgery (all common in people who've had heart attacks) make the list of reasons why someone might experience cardiac arrest.

The Blue Book has rules here, as well. The arrhythmia must not be caused by electrolyte abnormalities or any other reversible cause. The arrhythmia must also consist of uncontrolled and recurrent instances of "cardiac syncope or near syncope" (loss of consciousness, also known as fainting) while taking medication to combat those syncopes. It must also be documented through an ECG that is "coincident" with the fainting.

The SSA is particularly strict on heart issues, perhaps due to their prevalence in the United States. However, while a heart attack itself might not qualify you for disability, you may qualify based off the conditions that caused the attack or the injuries you sustain after one.

If you happen to suffer from clinical depression, there are a lot of questions that you already have, such as:

- How can I cope with the illness?
- What are my treatment options?
- What are the side effects from the drugs that I might be prescribed?

One of the things you might not want to think about is how your conditions will affect your professional life. While some people are more than able to function and work while they're suffering from depression, many are unable to work. Perhaps you feel unable to work because of the severity of your feelings and a lack of drive, or perhaps you have difficulty remembering what others tell you.

If you're in that predicament, perhaps you've questioned whether or not you can receive Social Security Disability Insurance (SSDI) benefits for your ailment. You might feel that you are unable to do the work so long as you're feeling this way, and you don't know how you're going to pay the bills because of that (which might feed into how you're feeling, too—a vicious cycle that leaves you feeling more and more helpless). The answer to that question is not simple, but there is some hope: depending on the severity of your depression, you might qualify for SSDI benefits.



SSDI AND DEPRESSION

Thankfully, there is help for depression. Under the guidelines of the SSA, mental conditions are often considered every bit as disabling as physical conditions are. This is good news: if a doctor agrees with you in how you feel about your depression, you are entitled to receive SSDI benefits. However, you must meet the standards that the SSA sets to be considered, and they consider conditions such as depression on a case-by-case basis.

The SSA has two specific criteria that they evaluate in reviewing an application for benefits: the recent work test and the duration of work test. The nitty-gritty details are all available on the SSA website, but generally the test is that you've worked for at least half of the period considered before you apply. For instance, if you apply for benefits when you turn 31, you must have worked for five years out of the ten between 21 and 31. If you apply when you're 24, you must have worked for one and a half years out of the three between 21 (the earliest age they consider) and your current age. There is also the duration of work test, which is far simpler: they set an amount of years you must have worked (total, not in a certain period). The table is also available on the SSA website.

DEALING WITH DEPRESSION

There are multiple forms of the illness, but the two that most are familiar with is Recurrent Major Depressive Episodes and Bipolar Disorder. Both of these (if severe enough) may qualify the afflicted person for disability, as the diagnosis manual discusses their effects on the mind and how they can disable someone from working. Oftentimes, the medication is not much better than the illness itself, which is why it may work. It doesn't always apply, but if you feel your depression is severe enough, the option is most definitely out there.

Regardless of any other consideration, if you're just feeling "blue," then disability might not be for you. However, if you're dealing with recurrent depressive episodes that are severe enough to limit your ability to focus or have been diagnosed with bipolar disorder, then you might want to consider filing for disability. Not only is filing for disability a good option if you're feeling like your depression won't end, but it might help ease the financial worries on your mind. Don't stress yourself too much about justifying your illness to anyone; the doctors are trained to see these things and they're there to help. Just go and do what's best for you.

Agoraphobia is, at its worst, a very disabling problem. Being unable to be outside of your home because your mind runs wild with panic at the very thought can make it difficult to perform basic tasks such as shopping, let alone going to work. You might have asked at some point, can I get disability for my agoraphobia? In short, the answer is yes, you can get disability for agoraphobia, so long as you meet the SSA's established criteria as laid out in the Blue Book.

WHAT IS AGORAPHOBIA?

Agoraphobia itself has been classically known as the “fear of public places.” The meaning of the phrase in the classical Greek is “fear of the marketplace,” which reinforces that belief. However, current research shows that the prevailing theory about agoraphobia is that it is directly related to panic attacks and anxiety disorders. Simply put, the fear is not about the public place so much as it is the fear of the panic attacks those public places can induce.



That's a big difference, as far as the Social Security Administration (SSA) is concerned. A fear can be overcome with classical conditioning and exposure—and that's great. However, when the fear is about a disabling condition—which is a perfectly natural response—then it becomes something far different. The fear of suffering a panic attack in a public place combines two problems: the inability to go where other people are because of the condition and the fear of suffering from the condition.

PANIC ATTACKS

Panic attacks are terrifying events. First time sufferers often call 911 because they think that they're having a heart attack. Suffering from one can result in someone fighting if contained and frantically attempting to leave the area where the panic attack began. Doctors have found that panic attacks are caused by the sympathetic nervous system, making it a physical disorder rather than a purely mental one.

QUALIFYING FOR DISABILITY

Here's the good news: both panic attacks and agoraphobia are classified in the SSA Blue Book under anxiety disorders. This is a good thing for you because it means that there's a certain set of criteria you can meet to qualify for disability.

The criteria may be simple, but the feelings that the conditions cause aren't. To meet the SSA's guidelines regarding agoraphobia, you must have one symptom out of their first column and either one symptom out of their second column or possess the third column's symptom. (All of the terminology is taken from the SSA's Blue Book.) They are:

COLUMN A

- Medically documented findings of:
 - Persistent anxiety accompanied by three out of four of these symptoms:
 - Motor tension
 - Autonomic hyperactivity
 - Apprehensive expectation
 - Vigilance and scanning
- **A persistent irrational fear of a specific object, activity, or situation which results in a compelling desire to avoid those things.**
- **Recurrent severe panic attacks manifested by a sudden unpredictable onset of intense apprehension, fear, terror and sense of impending doom occurring on the average of at least once a week.**
- Recurrent obsessions or compulsions which are a source of marked distress.
- Recurrent and intrusive recollections of a traumatic experience, which are a source of marked distress.

COLUMN B

- Resulting in at least two of the following:
 - **Marked restriction of activities of daily living.**
 - **Marked restriction in maintaining social functioning.**
 - Marked difficulties in maintaining concentration, persistence, or pace.
 - Repeated episodes of decompensation, each of extended duration.

COLUMN C

- **Resulting in complete inability to function independently outside the area of one's home.**

AGORAPHOBIA

These conditions might seem extensive, and they are. Bolded above are the conditions that you will need to meet in order to pass the SSA's requirements for Social Security Disability Insurance and Supplemental Security Income (SSDI and SSI, respectively). Disability Experts of Florida will assist you through the application process and help you secure your disability income. We're here to help you!

If you or a loved one suffers from Obsessive Compulsive Disorder, or OCD, you are all too familiar with the extreme symptoms that this disorder causes. You or your loved one know the double-checking and triple-checking of a locked door, or the growing cost of money spent on vast amounts of soap or hand sanitizer. While those affected with OCD usually recognize the excessive behavior, it can still grow to interfere with everyday life. If you find that you or your loved one's symptoms severely hinder or interfere with your ability to work, you may qualify for benefits, so long as the condition meets the requirements.

WHAT IS OCD?

Not to be confused with Obsessive Compulsive Personality Disorder (OCPD), Obsessive Compulsive Disorder (OCD) is an anxiety disorder in which individuals suffer from unwanted and repeated thoughts, feelings, ideas, or sensations that drive them to do something specific. The repetition of thoughts is the obsession and the behavior is compulsory. There is no known prevention.

APPLYING FOR BENEFITS

To apply for benefits with OCD, you or your loved one will need evidence showing that you suffer from obsessions or compulsions which were not caused by medical illness or drug use that creates major distress or interferes with your everyday life. Examples of types of obsessions and compulsions include, but are not limited to:

- Checking and rechecking actions (such as turning out the lights and locking the door).
- Excessive counting.
- Excessive fear of germs.

Most individuals suffering from OCD shows symptoms by age 30 and improve with treatment. OCD can cause long-term complications, however. An example of this is the compulsion of hand-washing, which could lead to dry, cracked, or damaged skin. OCD usually does not lead to another disease.

HOW YOU QUALIFY

Anxiety-related disorders, as defined in the Social Security Administration's (SSA) Blue Book, are "disorders [where] anxiety is either the predominant disturbance or it is experienced if the individual attempts to master symptoms; for example, confronting the dreaded object or situation in a phobic disorder or compulsions in obsessive compulsive disorders."

OBSESSIVE-COMPULSIVE DISORDER

To qualify for benefits for OCD, you must meet the requirements listed in the Blue Book. The Social Security Administration lists the requirements in a single set of three: A, B, and C. The condition is that to receive benefits, you or your loved one must meet the requirements of either A and B, or A and C. The requirements are as follows:

COLUMN A

- Medically documented findings of at least one of the following:
 - Motor tension.
 - Autonomic hyperactivity.
 - Apprehensive expectation.
 - Vigilance and scanning.
 - A persistent, irrational fear of a specific object, activity, or situation which results in a compelling desire to avoid the specific object, activity, or situation OR
 - Recurrent severe panic attacks manifested by a sudden unpredictable onset of intense apprehension, fear, terror, and a sense of impending doom occurring on the average of at least once a week; OR
 - Recurrent obsessions or compulsions which are a source of marked distress; on the average of once a week, OR
 - Recurrent and intrusive recollections of a traumatic experience, which are a source of marked distress.

COLUMN B

- At least two of the following:
 - Marked restriction of activities of daily living.
 - Marked difficulties in maintaining social functioning.
 - Marked difficulties in maintaining concentration, persistence, or page.
 - Repeated episodes of decompensation, each of extended duration.

COLUMN C

- Resulting in a complete inability to function independently outside of the area of one's home.

If you have back pain, you know that it's a major problem that can be incredibly painful. The hurt it causes can stop you from doing the things that you love as well as the things that allow you to live comfortably. You might be wondering if you can qualify for disability benefits because of your injury. Well, the disorders you're experiencing (or the injuries you've sustained) have a specific set of criteria—which is different for each of the qualified disorders.

WHAT ARE THE QUALIFICATIONS?

The qualifications for SSDI as per the Social Security Administration's Blue Book are fairly straightforward. You must have symptoms showing a compromised nerve root spinal cord. Officially, the Blue Book lists three specific disorders: nerve root compression itself (usually due to a herniated disc), spinal arachnoiditis, or lumbar spinal stenosis. While other disorders and pain can occur (which may still qualify you if it equates to these symptoms), these are the specific conditions that the SSA recognizes and have codified.



WHAT IS NERVE ROOT COMPRESSION?

Nerve root compression (also known as radiculopathy) is a pinched nerve in your back that leads to pain, tingling or burning, inability to effectively control your muscles, and sciatica. While the first three symptoms are common to most spinal disorders, the sciatica is unique to nerve root compression. It involves pain of various forms related to the sciatic nerve, which is in the area around the buttocks and legs, and usually affects the legs and feet.

To qualify you for SSDI, your symptoms must include pain, limited motion in your spine, muscle weakness and related sensory or reflex loss. If the nerve root compression involves your lower back, you must also test positive on a straight-leg raising test (both seated and lying flat).

The straight-leg raising test is used to check for herniated discs or other issues with the lower back. It's performed while you are either sitting or lying down. The doctor raises your legs and looks for certain reflexive reactions and pain while he or she raises your legs. If the reaction occurs within a certain range of angles, you test positive.

WHAT IS ARACHNOIDITIS?

The arachnoid is a membrane in your spine that protects your central nervous system's nerves. Arachnoiditis is an inflammation of that membrane caused by viruses, bacteria, chemicals, spinal injuries, chronic compression of the nerves in your spine, or complications from previous back surgery.

This inflammation can cause the nerves to stick together and create indescribable levels of pain. The problem with this condition is that an MRI doesn't always show the severity of the pain that you're suffering. What might look mild on a scan could cause very severe pain, especially if your nerves are sticking together.

To qualify for SSDI with this condition, certain criteria must be met. You must have an officially confirmed diagnosis, whether by biopsy or by MRI, and you must have either burning pains or painful dysesthesia (abnormal sensations) which make you change position more than once every two hours.

WHAT IS LUMBAR SPINAL STENOSIS?

Lumbar spinal stenosis is the narrowing of the spinal canal. This narrowing creates a restriction that can create neurological problems as well as paraesthesia (the pins and needles feeling you get when your limbs "fall asleep"), loss of motor control, numbness, and pain.

Lumbar stenosis can compress nerve roots, creating one of the other qualifying conditions for SSDI and exhibiting the same symptoms (sciatica, pain, limited motor control, and muscle weakness). To qualify for SSDI, your stenosis must be accompanied by a condition called pseudoclaudication, which possesses similar symptoms to sciatica but has a different cause.

WHAT SHOULD I DO?

If you're having problems, go see your doctor immediately. The complexities of these conditions means that without a qualified medical specialist, you won't understand the nature and extent of your condition. The overlap between the disorders and the conditions that injury can cause is so great that without radiography and specialized medical attention, you might never figure out what the problem really is.

Additionally, while there are only a few conditions that are automatically qualified for SSDI, any other conditions that cause the same symptoms can qualify you for SSDI. Getting medical help is a good start towards finding out if you qualify. If after seeing a doctor you feel as though you should be receiving SSDI benefits, call a professional that has experience with these kind of claims. The process here can become complicated, getting help from an experienced advocate is crucial. Disability Experts of Florida has more than 100 years of combined experience helping individuals just like you.

If you have fibromyalgia and work for a living, you might be wondering if you should be. The pain can be insufferable and the “fibro fog” can be debilitating. Does your job function require you to not have these feelings, and what can you do if you need to still be working? If you can still work, what needs to be done to help fix your problems so that you can work comfortably? If you can't, can you get disability benefits? These are but a few of the many questions related to fibromyalgia.

WORKING WITH FIBROMYALGIA

Fibromyalgia is a terrible disease. It can cause excruciating pain as well as causing fatigue and a sort of “mental fog” which can interfere with the ability to complete basic tasks. Depression is also a common side effect of the disease because it can create a sense of hopelessness. Depression and anxiety can reduce job performance, and if what you do involves moving and lifting, the stress on your body can create even more pain.



If your pain is mild (or if you are particularly determined), you may want to continue working, and that's great! Optimism and perseverance are key to overcoming many ordeals. Even so, you should know that fibromyalgia is still a disability—and that means that the Americans with Disabilities Act protects you.

So long as the accommodations you need don't impair the operations of a company, the ADA states that your employer must make accommodations for your disability. Are you sensitive to the air conditioner? If it's possible, they'll move you away from the vents (or turn them away from you). Need to be close to a bathroom or exit? They'll put you there. Do you need a written record of your job duties to refer to when you're not at your best? They have to do that too.

WHAT IF I'M NOT WELL ENOUGH TO WORK?

The downside to fibromyalgia is that sometimes the pain and fatigue you feel is just too much to bear. If you're involved in a critical position that could require you to be alert for your own safety (or others' safety as well), risking the fog might not be an option. If you're to lift heavy weights or move around all day and that causes you to need days of rest, perhaps it's time to hang up the uniform. If that's the case, that's okay too—take your rest, you deserve it. The SSA feels the same way about it: fibromyalgia, if it's severe enough to limit your ability to work, qualifies for Social Security Disability Insurance (SSDI).

THERE'S A FIVE STEP PROCESS TO A FIBROMYALGIA CLAIM:

- They'll determine if you're working: the SSA checks if you're making less than \$1,040 a month, which is what they constitute as "substantial gainful activity."
- They will examine the severity of the disease: the disease must be severe enough to either limit your work or prohibit it entirely. If you can't move around without significant pain, communicate effectively, understand your job function, respond appropriately, or be flexible with varying job situations, your function is limited.
- They'll find a classification for you: Fibromyalgia is not listed in the SSA's Blue Book, so it must be equated to another disease for consideration. Your symptoms must line up with the established medical listing of the disease to be considered, and must be severe enough to warrant disability benefits.
- They'll check your work history against your symptoms. They'll look for your ability (or inability) to do the work that you used to do.
- They'll review your current situation. The SSA will check to see if you can do any other kind of work. The criteria for this will vary based age as well as your educational background.

Ultimately, you should make the decision that makes you the happiest. If you feel the need to be working and you're able to do so, there are medications that can assist and you can continue to enjoy a very productive career—and good for you if you can! If you determine that you're unable to work, that's fine too—just because you're not able to "work" doesn't mean that you can't lead a fulfilling life. Just don't attempt to stretch yourself too thin if the pain is too much. Either way, remember: do what is best for you.

ALS (LOU GEHRIG'S DISEASE)

If you've been diagnosed with amyotrophic lateral sclerosis (ALS), know that there are resources out there to help you. To say that ALS is not an easy disease to live with is an understatement. The pain and suffering that it can cause you and your family is immense, as does any degenerative disease.

While ALS can feel like a death sentence, it is important to never give up hope. Many of the victims of ALS are able to lead fulfilling lives despite this degenerative condition, and there are treatments that can slow the progression of the disease.



WHAT ALS IS

ALS (Lou Gehrig's Disease) is, in essence, a degenerative disease of the nervous system in which the voluntarily controlled muscles, and the nerves connected to those muscles, degenerate. At first, the symptoms of ALS might not seem severe. However, as the muscles continue to degenerate and atrophy, everyday actions become more and more difficult to achieve. Walking, stepping down from a curb, looking around, and even breathing all become painful struggles. Each one of these actions are voluntary muscular movement, which is what ALS affects.

To make matters worse, there is no cure for this disease. There are drugs on the market that temporarily limit the effects and slow the degeneration of the muscles and nerves, but there is no cure for the disease yet. The degeneration will continue throughout your lifetime until it becomes severe enough to prevent you from breathing.

WHAT DOES THIS MEAN FOR MY WELL BEING?

Businesses require labor. That's just the hard truth of life. However, as you're already aware, the Social Security Administration (SSA) gives money to those who qualify for it because they are unable to work. Being diagnosed with ALS is almost an instant qualification for Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI). The SSA's Blue Book lists no additional qualifications outside of a diagnosis by a medical professional to qualify for SSI and SSDI. In addition, you can also apply for expedited approval. This means that your case could be decided within a couple of weeks instead of months.

With SSDI, you are not able to receive benefits until five months after your disability emerges. However, with SSI you can start receiving benefits immediately. This means that upon approval of your case, you can begin to receive benefits immediately.

ALS (LOU GEHRIG'S DISEASE)

Part of why the battle is easier for ALS is that it's not as common a disease and is so incredibly debilitating that it merits instant and immediate qualification for disability—as it should. The fact that this disease is both incurable and fatal means that it is the worst kind of condition, and should be treated with the utmost level of respect. That is exactly what ALS sufferers get from the SSA and what they should expect from the public at large.

If you have ALS, our sympathies go out to you. We're here to help in whatever way that we can. If you need help with your disability claim, sifting through the paperwork, or just need more information, feel free to call us.

If you suffer from epilepsy or know someone who does, you're aware of the issues and the pain that it brings to families and friends of those who suffer from this condition. At any moment, the person suffering could have a seizure and lose focus, awareness, or even control of their bodies. The effects are both terrifying and emotionally painful, as the loss of awareness can bring about confusion about what occurred (or, in the case of a simple partial seizure, the awareness of the twitching and jerking of a limb can be shocking to both observers and the person who is suffering.) If you suffer from these symptoms and you find that the unpredictability and severity of your seizures are too much to allow you to work, you might find it comforting to know that you're not alone, and that there is hope: disability insurance is available to those who suffer from epilepsy, so long as the condition meets the requirements set out for it.



WHAT IS EPILEPSY?

Epilepsy is a brain disorder caused by changes to the brain tissue that makes the brain become easily over-excited, which in turn creates seizures. People who have epilepsy know full well the powerful effects of this condition. The seizures are debilitating (some more than others) and create a general sense of fear in the person who is suffering from the disorder.

It is important to know that epilepsy is in the Social Security Administration's (SSA) Blue Book as a qualified disorder. However, to qualify you must have:

- Seizures once a month or more that are not controlled by three months' medication or therapy.
- Daytime seizures involving loss of consciousness or convulsions OR nighttime episodes that have residual debilitating effects during the daytime.

These are the qualifications for the forms of epilepsy that involve major seizures. However, if you have non-convulsive episodes, you may also qualify. The requirements for this are close to the same:

- Seizures once a month or more that are not controlled by three months' medication or therapy.
- Alteration of awareness, loss of consciousness, or transient postictal manifestations (aftereffects of the seizure such as nausea, confusion, headaches, and so forth) that affect your everyday function.

These are terrible conditions to have to suffer under. Whether the episodes are convulsive or non-convulsive, seizures create a lack of focus and an inability to perform regular actions. This is dangerous to both you and your employer if you suffer from the disease.

AURAS AND OTHER SYMPTOMS

You may also find that you notice an “aura” (a feeling that forewarns you that you’re about to have a seizure). This must be documented in the diagnosis for the SSA as well as any bodily control issues, such as tongue bites, injuries resulting from the seizures, or a loss of bowel control. The SSA must be aware of all aspects of the condition for them to render any form of aid, and every detail helps.

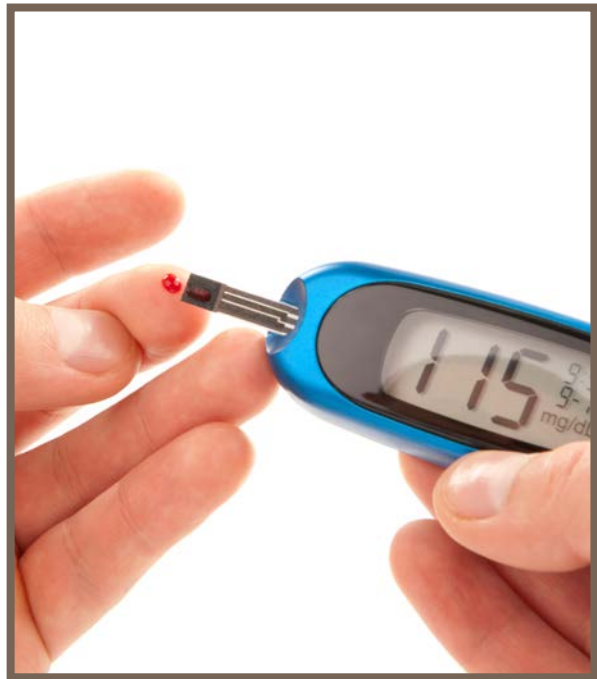
As we’ve said before, it’s a scary prospect to be diagnosed with epilepsy. Despite this, a lot of people live normal, wonderful lives even after being diagnosed with epilepsy. Be aware that the condition can definitely leave you unable to do the work that you need to do to survive.

DIABETES

If you have diabetes, you know that it's a condition that requires constant attention—especially if you have Type 1 (or juvenile-onset) diabetes. From watching your glucose levels, administering insulin and eating only at certain times to regulate blood sugar, diabetes is something that is always on the minds of those who suffer from it. Add to that the stress of working—including working somewhere that has long gaps between breaks—and diabetes can certainly feel disabling. You might be wondering whether you can get disability insurance if you have the condition.

Unfortunately, for diabetes itself, the answer is no. The condition does make working incredibly difficult in terms of scheduling and medicating yourself at inconvenient times, but by itself it usually isn't enough to qualify you for disability insurance. There are certain conditions that must be met to fulfill these requirements, one of which is the severity of the condition. The disease must disable you from doing what your job requires.

Before you write it off entirely, remember that diabetes may make other conditions worse, and there are conditions that it causes that might make you disabled. You may know that diabetes can cause retinopathy (vision issues), neuropathy (nerve damage) in your limbs, or ketoacidosis. These are three of the major complications that can cause the SSA to consider you as being disabled.



RETINOPATHY

Retinopathy, in simple terms, is the breakdown of the retina, eventually leading to blindness. Diabetes is a major cause for the disease (diabetic retinopathy is its own condition), and is one of the major reasons behind disability insurance coverage for diabetics. When the retina breaks down, vision gradually decreases. While this may be okay for a while (most people don't even know what is happening until it is too late), blindness will occur—which is a disabling condition underneath the diagnosis of diabetes.

NEUROPATHY

This is the breakdown of the nerves in the extremities. This can be caused by high blood sugar (in the case of poor blood sugar monitoring) and decreased blood flow. An early sign of the disease is burning or tingling in your limbs, particularly your legs and feet. As a result, you may not be able to feel certain things anymore because of the nerve damage, such as sharp objects, cuts, blisters, and extreme temperatures. The disabling part of this is that you can do damage to yourself and never know it, which can cause you to work an injured limb and make the damage worse.

It's not isolated to the limbs either. You can have nerve damage in places such as your heart (which can cause you to not feel the pain from a heart attack!), digestive system, and bladder. If you have these symptoms, you may qualify for disability insurance.

KETOACIDOSIS

Ketoacidosis is the breakdown of fats in the body because it cannot break down sugars, which produces acids (ketones). This may not sound bad at first, but the liver produces more glucose in response, which the body cannot process because of the lack of insulin. While this is somewhat controllable (by not going without insulin for long), it qualifies you for disability if it occurs more than once every two months. If you can expect to be hospitalized (as ketoacidosis requires hospitalization) once every two months, you can qualify for disability.

If you don't have these symptoms, don't worry yourself too much. You may not be aware that in 2008 in the United States, the Americans with Disabilities Amendments Act (ADAAA) passed, creating new requirements for employers to accommodate ailments such as diabetes. Before, the ADA didn't provide for reasonable accommodations for diabetes. Employers now must make these accommodations. If you have diabetes, but it is not severe enough to qualify for disability insurance, then you can still get the reasonable accommodations that you need to work without risking your health to do so.

Sports can be one of the most dangerous activities that you engage in. Even a non-contact sport such as soccer carries with it the risk for injury. Every hard impact could break a bone or tear a tendon, meaning immense pain for you (not to mention time off of the field). Imagine landing the wrong way on the wrong part, resulting in continuous, terrible pain and limited mobility. You might even become disabled to the point of no longer being able to work, especially if you harm your knee or crack your femur, tibia, pelvis, or at least one tarsal bone in your feet.



DO I QUALIFY?

Well, in short, it's complex. As these types of injuries are fairly common, the Social Security Administration (SSA) offers guidelines as to who can receive benefits for these injuries. For any of the above conditions that we mentioned, you need to have one main symptom: the “inability to ambulate effectively.” Without the ability to move, you're going to qualify for disability. In particular, the knee requires that you have degeneration of the joint regardless of cause. The SSA defines their burden of proof as signs of that inability to ambulate along with imaging of “joint space narrowing, bony destruction, or ankylosis of the” knee.

TORN ACL AND DISABILITY

Sportsmen know that there are more injuries than just torn knees and broken bones. Tearing your anterior cruciate ligament (ACL) can be painful in addition to causing a disabling condition. Without this ligament standing for even short periods of time can be difficult. While the reports vary on whether it's painful or not, the consensus (backed up by science) is that the knee will be very wobbly and you won't be able to stand steadily.

When it comes to disability benefits, this sports injury is a little tougher to navigate. The SSA has a twelve month guideline, in that any disability that they're going to pay out benefits for must be a permanent one—meaning that it will last for a year or longer. Most ACL tears and ruptures don't last that long, thanks to reconstructive surgery and physical therapy. If you're expected to get better this year, then you're not going to be able to get benefits. However, thanks to a special listing for injuries which seems to reference this injury, there are specific guidelines for this. If you have a torn or ruptured ACL and you are not expected to return to full mobility for a year or more, you qualify. If you are expected to recover or have recovered before a full year's time, you will not qualify.

SPORTS INJURIES ARE NO SIMPLE ISSUE

Sports injuries and disability aren't simple in any way, really. Most of the listings in the SSA's Blue Book are listings for other injuries and disabilities that coincide with sports-related injuries. While sports injuries typically aren't entirely disabling in and of themselves, that doesn't mean that they can't be—and that doesn't have to be on the short term, either. If you run constantly on a harder track than you need to, you can degrade your own knees to the point where they're prone to arthritis (or another injury). Be careful out on the track or on the field.

Drug abuse is a terrible thing, whether those drugs are legal or not. Alcohol and nicotine, the two most popular legalized drugs for recreational use, are both incredibly addictive and destructive. Thousands die from cardiovascular complications and alcohol-related accidents each year—and these are legal substances! Amongst the illegal ones, there are innumerable potential health problems. However, there's a bit of hope. If you have an addiction to drugs, alcohol, or some other life threatening addiction, you might qualify for disability benefits.

ABOUT ADDICTION

Addiction is, at its root, a dependence on and continued use of a substance despite its harmful effects. That oversimplifies the condition by a great deal, but it is a useful definition nonetheless. Addiction is what keeps the alcoholic drinking and the smoker smoking. The list could go on, but what it comes down to is a mental or physical one a foreign substance in order to continue functioning.

There is a very large stigma in the population at large about substance addiction, stemming from movements such as Alcoholics Anonymous and other (very beneficial) groups that promote a message of its complete control of an individual. What must be understood when considering disability benefits being paid to addicted individuals

is that the addiction controls the person for as long as the physical or psychological ties exist. If the dependency is physical, it's not as easy as putting down the bottle or needle. That's why the disability listing exists—to assist those whose minds have been destroyed by the addiction. That's why the Social Security Administration (SSA) lists substance addiction under mental disorders.



WHAT QUALIFIES YOU?

This is where things get complicated. Addiction shows itself in many ways, and is unique for each person. Different people may suffer different symptoms. The SSA states that, for their purposes, an addiction consists of “behavioral systems of physical changes associated with the regular use of substances that affect the central nervous system.” They go on to list all of the different issues that substance addiction can cause a person:

- Organic mental disorders
- Depressive syndrome
- Anxiety disorders
- Personality disorders
- Peripheral neuropathies
- Liver damage
- Gastritis
- Pancreatitis
- Seizures

These all have their own evaluation criteria that you must meet to qualify for disability.

This means that the SSA has created a conundrum for those applying for disability: you qualify for disability because of your substance addiction, but you must exhibit all of the symptoms of one of the other disorders as a result of the addiction—meaning that while it’s listed and legitimate, qualifying with an addiction requires you to qualify for a different listing, meaning that it doesn’t technically exist. However, if the addiction results in these symptoms, you might not recognize it without seeing it here. While the SSA has not been particularly helpful here, their listings do have a point—if a slight one.

Addiction is a serious problem. It’s not just for “junkies,” either. People as high profile as Rush Limbaugh and David Duchovny have admitted to various forms of addiction. This is a problem across the country, and you should be as equipped as possible to deal with addiction. Your health is consistently at risk if you’re addicted, and it’s shown to cause all of the above disorders. Get help, and if addiction has caused you to become disabled, then apply for benefits.

CONCLUSION

We hope this guide has helped you. There are more resources out there as well as people you can speak to (like us) about these disabling circumstances.

The message that we'd like to leave you with is that this guide is not meant to discourage you. We know that disability is a terrifying and scary prospect. We've navigated it long enough to know exactly how any form of disability can impact people just like you.

We hope that by providing you with this information, you will be able to make an informed decision, and that you have learned a bit more about what's ailing you or your loved one. People often fear those things we don't understand, so we hope that the knowledge in this guide will promote understanding and compassion even as it prepares you to face the SSA. If you need to speak to anyone concerning your disability claim, be sure to contact us as soon as possible. We'll help you figure it all out! Our contact information is on the next page.


CONTACT US




Where You're A Neighbor...
Not A Number



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