

## Disability Determination Explanation

This Disability Determination Explanation is for the DI claim(s) at the Initial level.

### Claimant Information

#### Claimant Information

Claimant Gender: **Male**  
 Self Reported Height: **68 inches**  
 Self Reported Weight: **175.0 lbs**

Current Age: **49 years 5 months (Younger Individual)**

AOD: **10/26/2015**

Age at AOD: **43 years 2 months (Younger Individual)**

Special Indications: **Homeless, Representative**

#### DI Claim Information

Initial Filing Date: **04/01/2021**

Age at Initial Filing Date: **48 years 7 months (Younger Individual)**

#### Allegations of Impairments

The individual filed for initial claim for disability on 04/01/2021 due to the following illnesses, injuries, or conditions: **angers easily and racing thoughts**

The individual alleges inability to function and/or work as of: **10/26/2015**

### Technical Issues

#### Prior Filings

Decision / Determination Date	Decision Claim Level	Claim Type	Filing Type	Initial Filing Date	Protective Filing Date	AC Remand Date
06/27/2019	DENY	Appeals Council	DI	Electronic	10/26/2015	

Does the individual have prior filings? **Yes**

Does Collateral Estoppel apply? **No**

Is the individual working? **No**

Alleged Onset Date (AOD): **10/26/2015**

Has the individual performed work after the Alleged Onset Date (AOD)? **No**

Has any period(s) of work been determined to be an unsuccessful work attempt, or involved subsidies/special conditions, impairment-related work expenses, or other technical issue(s)? **No**

Does the DDS need to correct the POD? **No**

POD Provided by FO: **DI 04/01/2021**

### Evidence of Record

#### Evidence Received

DMA Received Date	Source	Doc Name	Case Level	Evidence Found
11/09/2021	Nyasha Petway	Atty/Rep Submit Evidence	Initial	Medical Evidence
11/08/2021	AMARA WELLNESS SERVICES	MER	Initial	Medical Evidence
11/06/2021		3002 ROC	Initial	Non-Medical Evidence
10/12/2021	ATRIUM HEALTH	MER	Initial	Medical Evidence
10/07/2021	AMARA WELLNESS SERVICES	MER	Initial	Medical Evidence
10/01/2021	Nyasha Petway	3380-Fret Rpt-Adlt 3rd Prty	Initial	Medical Evidence
10/01/2021	Nyasha Petway	Atty/Rep Submit Evidence	Initial	No Records/Not Patient
10/01/2021	Nyasha Petway	3380-Fret Rpt-Adlt 3rd Prty	Initial	Non-Medical Evidence
10/01/2021	Nyasha Petway	Atty/Rep Submit Evidence	Initial	Non-Medical Evidence
10/01/2021	Nyasha Petway	Atty/Rep Submit Evidence	Initial	Non-Medical Evidence
09/28/2021		3369-Work Hr	Initial	No Records/Not Patient
09/23/2021		3369-Work Hr	Initial	Non-Medical Evidence

#### Medical Advisor 416 Evaluation

No Medical Advisor 416 Evaluations have been associated with this claim.

#### Findings of Fact and Analysis of Evidence

##### Analysis

DI of 49YO alleging angers easily and racing thoughts.

12/21/20 Amara Wellness: Dx- Bipolar d/o, current episode manic w/o psychotic features, moderate. Cocaine dep, in remission

01/11/21 Amara Wellness: Dx- Bipolar d/o, current episode manic w/o psychotic features, moderate. Cocaine dep, in remission

06/23/21 Amara Wellness: Dx- Bipolar d/o, current episode manic w/o psychotic features, moderate. Cocaine dep, in remission  
Start Abilify, Seroquel, Remeron, Vistaril.

09/02/21 Amara Wellness: Dx- Bipolar d/o, current episode manic w/o psychotic features, moderate. Cocaine dep, in remission

11/04/21 Amara Wellness:

MSE- Exam of [REDACTED] reveals no serious mental status abnormalities. Appearance, dress, and grooming are unremarkable and age appropriate. Exhibits neither depression nor mood elevation. nml speech. No SI/HI/AVH. Behavior stable. no signs of cognitive difficulty, based on vocabulary and fund of knowledge. Memory is intact for recent and remote events. fully oriented. There are no signs of anxiety. A normal attention span is in evidence and there are no signs of hyperactivity. Judgment and insight appear intact.

Dx- Bipolar d/o, current episode manic w/o psychotic features, moderate. Cocaine dep, in remission.

ADL from SOAR- Takes meds as Rx. Difficulty interacting w/other. Resides in supportive housing. Can follow instruction. Can do personal care.

No 416-Medical Evaluations have been associated with this claim.

### Adult Medically Determinable Impairments (MDI) and Severity

Does the individual have one or more medically determinable impairments? **Yes**

#### Adult Medically Determinable Impairments (MDI)

Body System	Impairment Diagnosis	Priority	Severity
12 - Mental disorders	2962 - Depressive, Bipolar and Related Disorders	Primary	Severe
12 - Mental disorders	3003 - Anxiety and Obsessive-Compulsive Disorders	Secondary	Severe
12 - Mental disorders	3040 - Substance Addiction Disorders (Drugs)	Other	Severe

#### PRT1 - Psychiatric Review Technique (PRT) [1 of 1]

Evaluation Period: **Current Evaluation**

#### "A" Criteria of the Listings

Listing	Selection	Criteria
12.04	<input type="checkbox"/>	A medically determinable impairment is present that does not precisely satisfy the criteria
12.06	<input type="checkbox"/>	A medically determinable impairment is present that does not precisely satisfy the criteria
12.08	<input type="checkbox"/>	A medically determinable impairment is present that does not precisely satisfy the criteria

#### "B" Criteria of the Listings

Select the following "B" Criteria listings to be rated **12.04, 12.06, 12.08**

Mental Limitation	Selection
Understand, remember, or apply information	<input type="checkbox"/> Mild
Interact with others	<input type="checkbox"/> Moderate
Concentrate, persist, or maintain pace	<input type="checkbox"/> Moderate
Adapt or manage oneself	<input type="checkbox"/> Moderate

#### "C" Criteria of the Listings

Selection	Criteria
<input type="checkbox"/>	Evidence does not establish the presence of "C" Criteria.

PRT Additional Explanation:

**Additional Explanation:**

see MRFC

**These findings complete the medical portion of the disability determination.**

MC/PC Signature: **Jennifer Fulmer, Ph.D**

Medical Specialty Code: **38 Psychology**

Date Signed: 02/08/2022

Adult Listings Considered

Listing	Description	Subsection	PRT Assessment
12.04	Depressive, Bipolar and Related Disorders		PRT1
12.06	Anxiety and Obsessive-Compulsive Disorders		PRT1
12.08	Personality and Impulse-Control Disorders		PRT1

Adult Medical Disposition

RFC Assessment Necessary

Assessment of Policy IssuesSymptoms Evaluation

Claimant's Symptoms

Understanding and memory related symptoms  
 Sustained concentration and persistence related symptoms  
 Social interaction related symptoms  
 Ability to adapt related symptoms

Can one or more of the individual's medically determinable impairment(s) (MDI(s)) reasonably be expected to produce the individual's pain or other symptoms?

Yes

Are the individual's statements about the intensity, persistence, and functionally limiting effects of the symptoms substantiated by the objective medical evidence alone?

No

What is your assessment of the consistency of the individual's statements regarding symptoms considering the total medical and non-medical evidence in file?

Partially consistent

Explain the assessment of consistency regarding symptom related limitations.

Client alleges: **angers easily and racing thoughts**. MER notes client is following current medical regimen for ongoing treatment of his symptoms. Most recent QV noted the following:

1/04/21 Amara Wellness:

MSE- Exam of [REDACTED] reveals no serious mental status abnormalities. Appearance, dress, and grooming are unremarkable and age appropriate. Exhibits neither depression nor mood elevation, nml speech. No S/H/H/V/H. Behavior stable, no signs of cognitive difficulty, based on vocabulary and fund of knowledge. Memory is intact for recent and remote events, fully oriented. There are no signs of anxiety. A normal attention span is in evidence and there are no signs of hyperactivity. Judgment and insight appear intact.

Dx- Bipolar d/c, current episode manic w/o psychotic features, moderate. Cocaine dep, in remission.

ADL from SOAR- Takes meds as Rx. Difficulty interacting w/other. Resides in supportive housing. Can follow instruction. Can do personal care.

Based on objective and functional evidence in file, claimant's statements are partially consistent & supported by the MER and the claimant's maximum sustainable capacity would not preclude the ability to complete SRRT's in a low-stress, low-production environment with limited social contact.

Evaluate and Reconcile Medical Opinions

There is no indication that there is a medical opinion from any medical source.

Residual Functional Capacity

No RFCs are associated with this claim.

Mental Residual Functional Capacity

**MRFC1 - Mental Residual Functional Capacity (1 of 1)**Evaluation Period: **Current Evaluation**

The questions below help determine the individual's ability to perform sustained work activities. However, the actual mental residual functional capacity assessment is recorded in the narrative discussion(s), which describes how the evidence supports each conclusion. This discussion(s) is documented in the explanatory text boxes following each category of limitation (i.e., understanding and memory, sustained concentration and persistence, social interaction and adaptation). Any other assessment information deemed appropriate may be recorded in the MRFC - Additional Explanation text box.

Does the individual have understanding and memory limitations? **Yes**

Understanding and Memory Limitation	Rating
The ability to remember situations and work-like procedures	Not Significantly Limited
The ability to understand and remember very short and simple instructions	Not Significantly Limited
The ability to understand and remember detailed instructions	Moderately Limited

Explain in narrative form the presence and degree of specific understanding and memory capacities and/or limitations.

**Client can complete 3 step instructions while following current medical regimen**Does the individual have sustained concentration and persistence limitations? **Yes**

Sustained Concentration and Persistence Limitation	Rating
The ability to carry out very short and simple instructions	Not Significantly Limited
The ability to carry out detailed instructions	Moderately Limited
The ability to maintain attention and concentration for extended periods	Moderately Limited
The ability to perform activities within a schedule, maintain regular attendance, and be punctual within customary tolerances	Not Significantly Limited
The ability to sustain an ordinary routine without special supervision	Not Significantly Limited
The ability to work in coordination with or in proximity to others without being distracted by them	Not Significantly Limited
The ability to make simple work-related decisions	Not Significantly Limited
The ability to complete a normal workday and workweek without interruptions from psychologically based symptoms and to perform at a consistent pace without an unreasonable number and length of rest periods	Moderately Limited

Explain in narrative form the sustained concentration and persistence capacities and/or limitations.

**Client can maintain concentration, persistence and pace within a low-production work environment while following current medical regimen**Does the individual have social interaction limitations? **Yes**

Social Interaction Limitation	Rating
The ability to interact appropriately with the general public	Moderately Limited
The ability to ask simple questions or request assistance	Not Significantly Limited
The ability to accept instructions and respond appropriately to criticism from supervisors	Not Significantly Limited
The ability to get along with coworkers or peers without distracting them or exhibiting behavioral extremes	Not Significantly Limited
The ability to maintain socially appropriate behavior and to adhere to basic standards of neatness and cleanliness	Not Significantly Limited

Explain in narrative form the social interaction capacities and/or limitations.

**Client may have difficulty interacting with others on a consistent basis while following current medical regimen**

Does the individual have adaptation limitations? **Yes**

Adaptation Limitation	Rating
The ability to respond appropriately to changes in the work setting	Moderately Limited
The ability to be aware of normal hazards and take appropriate precautions	Not Significantly Limited
The ability to travel in unfamiliar places or use public transportation	Not Significantly Limited
The ability to set realistic goals or make plans independently of others	Not Significantly Limited

Explain in narrative form the adaptation capacities and/or limitations.

**Client can adjust to routine changes within a low-stress work environment while following current medical regimen**

MRFC Additional Explanation

Client alleged anger issues, bipolar d/o, and racing thoughts. MER noted client is taking meds as Rx.

Recent OV noted the following:

11/04/21 Amara Wellness:

MSE- Exam of [REDACTED] reveals no serious mental status abnormalities. Appearance, dress, and grooming are unremarkable and age appropriate. Exhibits neither depression nor mood elevation. nmi speech. No SIH/AVH. Behavior stable. no signs of cognitive difficulty, based on vocabulary and fund of knowledge. Memory is intact for recent and remote events. fully oriented. There are no signs of anxiety. A normal attention span is in evidence and there are no signs of hyperactivity. Judgment and insight appear intact.

**Dx- Bipolar d/o, current episode manic w/o psychotic features, moderate. Cocaine dep, in remission**

ADL from SOAR- Takes meds as Rx. Difficulty interacting w/other. Resides in supportive housing. Can follow instruction. Can do personal care.

Based on objective and functional evidence in file, claimant's statements are partially consistent & supported by the MER and the claimant's maximum sustainable capacity would not preclude the ability to complete SRRT's in a low-stress, low-production environment with limited social contact.

PC Review: Client is a 49-year-old male who alleged he has never worked. He has an 8th grade education, no special ed classes. Client filed for Disability previously in 2015 alleging Bipolar and Mood D/O. For that filing, client reported an employment hx of over 25 jobs due to arguing with people, being late, and not getting along with people. He also reported a criminal hx of between 25-30 arrests, mostly misdemeanors and felonies. He also reported the onset of multiple medical issues about 10 years ago including IBS, intestinal colitis, diverticulitis, and urology problems. He had recently broken his collar bone in a mountain bike accident. Dx: Unspecified Personality D/O with cluster B features; Panic D/O; Intermittent Explosive D/O. The claim went to the ALJ on 9/24/2018 where the client was limited to SRRT's in a low pressure work setting, with occasional interaction with supervisors and coworkers. For the current filing, client attended an initial psych evaluation on 1/16/2020 for med mgt. He was referred by Monarch. He reported problems with anger and agitation. He also described symptoms of an elevated mood since he was 6 years old, with hospitalizations starting in adolescence. He also has a hx of substance abuse but currently does not use. Dx: Bipolar D/O, moderate; Cocaine Dependence in remission. Client continued med mgt. Med compliance was sporadic but when on meds he did well. Most recently, on 11/4/2021, client reported med compliance, was living in his own apartment, and doing well with his recent "stimulus check" (due to COVID). Examination revealed no serious mental status abnormalities. Client's SOAR manager provided a medical summary report (undated). She indicated that client's

difficulties included special ed and ID. This is not fully supported by the MER, as school records reveal WISC scores of: Verbal=77, Performance=88, FSIQ=82 (10/30/1987). At that time, however, behavioral problems were noted with classification of "Certified Emotionally Behaviorally Handicapped." As such, the objective and functional evidence supports the mental capacity for SRRT's in a stable, low-stress setting with limited demands for production and social interaction. -JRF

These findings complete the medical portion of the disability determination.

MC/PC Signature: Jennifer Fulmer, Ph.D

Medical Specialty Code: 38 Psychology

Date Signed: 02/08/2022

#### Assessment of Vocational Factors - Individual's Ability to Perform Past Relevant Work

##### Expedited Vocational Assessment (EVA)

A finding about the capacity for PRW has not been made. However, this information is not material because all potentially applicable Medical-Vocational Guidelines would direct a finding of "not disabled" given the individual's age, education, and RFC. Therefore, the individual can adjust to other work.

All Past Work:

Relevant	Job Title	Start Date	End Date	DGT Information	SVP	Strength
No Results						

#### Application of Medical-Vocational Rules: Other Work

Is the individual limited to unskilled work because of the impairments? **Yes**

Based on the seven strength factors of the physical RFC (lifting/carrying, standing, walking, sitting, pushing, and pulling), the individual demonstrates the maximum sustained work capability of the following: **Other**

Explain your assessment of the individual's maximum sustained work capability.

**MDI are solely nonexertional.**

The highest grade of school completed by the individual is: **8th Grade**

Indicate the rule used to direct a determination or as a framework.

**204.00 - Heavy/Very Heavy | Any | Any | Any**

Select how the rule is applied

**Rule used as a Framework**

Select documentation method: **Cite occupations**

Cite three occupations in which there are a significant number of jobs that exist in the national economy

- **361.687-014 Classifier**
- **361.687-026 Shaker, Wearing Apparel**
- **361.587-010 Flatwork Trier**

#### Determination

##### Determination for the DI claim(s) at the Initial Level

Based on the documented findings, select the determination: **Not Disabled**

Is there medical evidence of DAA?

**There is no evidence of any substance abuse disorder/DAA issue.**

Alleged Onset Date: **10/26/2015**

##### DI Claim / 273727376

Indicate which of the following Acquiescence Rulings are applicable: **None of the ARs considered apply to this claim**

Regulation Basis Code: **N32-20CFR416.920(g) CLAIMANT AGE 18 OR OLDER**

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**Signatures**

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**Adult Overall Medical Disposition Signature**

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MC/PC Signature: Jennifer Fulmer, Ph.D

Medical Specialty Code: 38 Psychology

Date Signed: 02/08/2022

**Disability Examiner Signature**

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Disability Examiner Signature: Shawn McLeod

Date Signed: 02/08/2022