WIDOW(ER)'S DISABILITY BENEFITS



United States of America Railroad Retirement Board

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Section 1 – Application Forms

To receive the disability benefits described in this booklet, you must file an application form. This section will explain the forms you need for the disability benefit for which you are filing.

Disability Annuity

To receive monthly disability annuity payments, Form AA-17b, Application for Determination of Widow(er)'s Disability, must be filed along with Form AA-17, Application for Widow(er)'s Annuity. Form G-251, Vocational Report, is also required if you have ever worked.

If you have filed for a disability annuity, you are automatically considered for early Medicare.

Early Medicare Coverage

If you already receive a monthly railroad retirement annuity payment, you may file Form AA-17b for early Medicare coverage. Normally, you would do this if:

- you are disabled and applied for, or are already receiving, regular monthly annuity payments based on age or caring for a child of the employee, or
- you receive monthly disability annuity payments but you did not previously qualify for early Medicare coverage when your annuity began.

See Part III for more information on early Medicare coverage.

Section 2 - Medical Evidence

When you apply for any type of disability benefit, it is your responsibility to prove to the Railroad Retirement Board (RRB) that you are *permanently disabled* (see Part V, Item 5, for the definition of *permanently disabled*). You must provide or tell us about any evidence which may show that you are disabled.

How to Furnish Evidence

You may furnish medical evidence in 3 ways:

- 1. We will give you a report form for your personal physician to complete. In this way, we can get information about your condition from the medical source who knows you best.
- 2. We will ask you to sign an authorization to release to the RRB any hospital, clinic, or employer records about your condition.

- 3. We may ask you to be examined at the RRB's expense if more evidence is needed to:
 - obtain more detailed or specialized medical findings about your condition, or
 - resolve conflicts or differences in the evidence already in file.

Acceptable Sources of Medical Evidence

The following are some of the acceptable sources of medical evidence.

- Licensed physicians
- Licensed osteopaths
- Licensed or certified psychologists
- Licensed optometrists
- Persons authorized to send copies or summaries of the medical records of hospitals, clinics, sanitariums, medical institutions or health care facilities

Other Sources of Information

Sometimes other sources can provide information important to making a decision about your ability to work, such as:

- public and private social welfare agencies;
- other practitioners (for example, naturopaths, chiropractors, audiologists, etc.); or
- non-medical observations (for example, from a vocational consultant).

Failure to Submit Evidence

It is in your best interest to fully cooperate if medical or other evidence is needed so that the decision on your claim will be made as quickly as possible and be based on the best information available.

If you fail to submit medical evidence that is needed and requested, a decision will be made based on the evidence available.

If you fail or refuse without good cause to report for an examination scheduled and paid for by the RRB, it may be decided that you are not disabled.

Section 3 – After You Return Your Application

After the RRB receives your completed application and all the needed evidence, we will decide if you are entitled to disability benefits.

If we decide you cannot receive disability benefits, the RRB will send you a notice explaining why we made that decision and what you can do if you disagree with our decision.

If you can receive disability benefits, you will receive a notice that shows the amount of your monthly payments and other information about your benefits.

Sometimes we cannot make a decision on your application without additional information. If this is the case, you will be contacted by an RRB representative by telephone or mail. You may be asked to send us additional forms, proofs, or statements that are needed. You may also be asked to report for a medical examination.

Unless you receive a request for additional information, we will notify you of our decision about your application in 4 months or less. If you do not hear from us within that time, contact the nearest RRB office.

Section 4 – Periodic Review of Disability

Your case may be periodically reviewed to determine if your condition is still severe enough to prevent you from working. This is necessary to see if your disability annuity or early Medicare coverage should continue.

When your case is reviewed, we may ask you for information and evidence or to report for a medical examination.

Section 5 - Information and Assistance

Any time you need information and assistance, you may contact the nearest office of the RRB. In addition to the personal attention you will receive, special booklets and printed material are available. To locate the nearest RRB office, visit our Web site at http://www.rrb.gov or call our toll-free Help Line at 1-800-808-0772.

Part II - About Your Disability Annuity

Section 6 – Eligibility Requirements for a Disability Annuity

This section describes the special requirements you must meet in order to receive a disability annuity.

In addition to meeting the general annuity requirements described in booklet RB-17, *Survivor Annuities*, you must be:

- at least age 50, but less than age 60, and
- permanently disabled for all *regular work* before the end of your *prescribed* period (see Part V for the definitions of regular work and prescribed period).

Note: If you are age 60 or older, you may be entitled to a regular widow(er)'s annuity.

Section 7 - When Your Disability Annuity Can Begin

You may select the date you wish your disability annuity payments to begin.

The date you select can be either:

- the earliest date permitted by law, or
- another date that may be more advantageous to you.

General Rule

Generally, the earliest annuity beginning date permitted by law is the *later* of:

- the first day of the month in which the employee died; or
- the first day of the 12th month before the month in which the Railroad Retirement Board (RRB) received your annuity application; or
- the first day of the month you attain age 50; or
- the first day of the month you are no longer entitled to annuity payments based on caring for a child of the employee; or
- the first day of the month following the disability waiting period.

<u>Disability Annuity Waiting Period</u> - A waiting period must be completed before your annuity can begin. The waiting period ends the last day of the 5th full month after the month we determine your disability began.

Previous Disability Annuity Rule

If you previously received a disability annuity which ended within 7 years of the month we determine your current disability began, the earliest annuity beginning date permitted by law is the *later* of:

- the first day of the month in which the employee died; or
- the first day of the 12th month before the month in which the RRB received your application; or
- the first day of the month you are no longer entitled to annuity payments based on caring for a child of the employee; or
- the first day of the month we determine you again became disabled.

Section 8 – How Work Can Affect Your Disability Annuity Payments

Before Age 60

If you perform work after your disability annuity begins and while you are still under age 60, full monthly payments will continue until it is determined that your disability has ended and you are no longer entitled to a disability annuity. However, your annuity is not payable for <u>any</u> month in which you work for a railroad employer, and you must return your annuity payment for that month to the RRB.

Your work and earnings will be evaluated to see if you are able to do *regular work* (see Part V, Item 7, for the definition of *regular work*). Also, any work performed after your disability annuity begins may raise a question about *medical recovery* (see Part V, Item 3, for the definition of *medical recovery*), *regardless of the amount of your earnings*. If this happens, you will be asked to provide additional information about your medical condition and we may request you to report for a medical examination.

After Age 60

If you perform work after age 60, your annuity is subject to the same earnings restrictions that apply to an aged widow(er)'s annuity. Your annuity payments may be withheld for any month during a year in which you are under *full retirement age* and estimate your earnings to exceed the annual exempt amount described in Form G-77, How Earnings Affect Payment of Survivor Annuities. In addition, your annuity is not payable for any month in which you work for a railroad employer, and you must return your annuity payment for that month to the RRB.

Section 9 – Conviction for a Criminal Offense Can Affect Your Annuity

The amount of your annuity may be affected if you are imprisoned or confined due to a conviction for a criminal offense.

See Part V, Item 1, for the definition of confinement.

Section 10 - When Your Disability Annuity Could End

At Age 60

At age 60, your entitlement to a disability annuity ends and your entitlement to an aged widow(er)'s annuity begins. This means that your entitlement to annuity payments is no longer affected by the restrictions that apply to disability annuitants as discussed in this booklet. However, your annuity is still subject to the restrictions for aged widow(er) annuitants discussed in booklet RB-17, *Survivor Annuities*. If you do not have a copy of that booklet, you should request one.

Before Age 60

Entitlement to disability annuity payments ends effective with the earlier of:

- the last day of the month before the month in which your death occurs, or
- the last day of the 2nd month after the month in which disability ends.

Your disability ends if:

- you *medically recover* so that you are able to work (see Part V, Item 3, for the definition of *medical recovery*), or
- you return to work and hold a job, whether or not there has been any substantial improvement in your condition. Note: You may, however, qualify for a trial work period (see Part V, Item 8, for the definition of Trial Work Period).

Section 11 – Types of Medicare Coverage

This part provides general information about early Medicare coverage. For a more complete explanation of the Medicare program, please refer to booklet RB-20, *Medicare for Railroad Workers and Their Families*.

Medicare is the Federal health insurance program for people age 65 or older and certain disabled people. One part of Medicare (Part A) provides hospital insurance benefits. Another part (Part B) provides supplementary medical insurance.

Hospital insurance helps pay for:

- Inpatient hospital care
- Inpatient care in a skilled nursing facility
- Home health care and hospice care

Supplementary medical insurance helps pay for:

- Doctor's services
- Outpatient hospital services
- Durable medical equipment
- A number of other medical services and supplies that are not covered by hospital insurance

Section 12 – Eligibility Requirements for Early Medicare

To be eligible for Medicare coverage before age 65, a disabled widow(er) annuitant must:

- be at least age 50, and
- permanently disabled before the end of the *prescribed period* (see Part V, Item 6, for the definition of *prescribed period*).

An individual with permanent kidney failure (chronic renal disease) is eligible at any age. However, the Social Security Administration must be contacted for this coverage.

There are also special rules that apply for an individual diagnosed with Amyotrophic Lateral Sclerosis (ALS or Lou Gehrig's Disease).

Section 13 - When Your Early Medicare Can Begin

Your Medicare coverage will begin on the later of:

- the first day of the 25th month you are entitled to receive annuity payments, or
- the first day of the 30th calendar month after your disability began.

Section 14 - When Your Early Medicare Could End

Medical Recovery

If it is determined that your condition has improved and that you are medically *able* to work, your Medicare coverage will end (see Part V, Item 3, for the definition of *medical recovery*). This is true whether or not you have actually worked. When this happens, your early Medicare coverage ends with the *later* of:

- the last day of the 2nd month after the month in which medical recovery occurs, or
- the last day of the month after the month in which you were notified in writing that your disability ended.

Work

If you are working, or have worked since your coverage began, your early Medicare coverage may end. This is true even though your medical condition may not have improved. Unless medical recovery occurs first, your early Medicare coverage ends with the *earlier* of:

- the last day of the 90th month after it is determined you performed *regular* work (see Part V, Item 7, for the definition of *regular work*), or
- the last day of the month in which death occurs.

Section 15 - Enrollment for Medicare

As soon as you are determined to be eligible for Medicare, you will automatically be enrolled for hospital insurance coverage (Part A). You pay nothing for this coverage. You will also be automatically enrolled for supplemental medical insurance coverage (Part B). You will have to pay a monthly premium for Part B. If you receive an annuity, the premium will usually be deducted from your monthly payments. If you choose not to receive Part B coverage, you must notify the Railroad Retirement Board.

Section 16 – Events You Must Report

This section describes the different events that may affect your disability benefits. You should be aware of these different events and notify us immediately if any of them apply to you.

The events you should report can affect:

- the amount of your monthly payment; or
- the total amount that can be paid to you during the year; or
- whether you can continue to be paid at all; or
- whether your Medicare coverage can continue.

Keep this booklet handy and refer to this part occasionally to see if you need to report any event to the Railroad Retirement Board (RRB).

The following events must be promptly reported to the RRB:

- If you work for any employer, railroad or nonrailroad, or perform any selfemployment work.
- If your condition improves, or your doctor tells you that you are able to work.
- If you are confined in a jail, prison, or other penal institution or correctional facility due to a conviction for a criminal offense.

These events must be reported in addition to any other events you must report described in booklet RB-17, *Survivor Annuities*.

Section 17 – How to Report an Event

If, at any time after you have completed your application, you find that one of the conditions explained in this booklet applies to you, you should immediately notify the RRB in writing. The notice should be sent to the RRB office at the address shown on the receipt for your application. However, if you wish, you may also call or visit that office.

When you report an event, be sure to include the following in your letter:

 Your railroad retirement claim number shown at the top of your application receipt.

Part IV – Events That Can Affect Your Disability Benefits

- Your name (or the widow(er)'s name if you are reporting an event for her or him).
- The railroad employee's name.
- A clear explanation of the event you are reporting.
- The exact date (month, day, year) the event occurred.

If you are reporting work, it is important that you also furnish the following:

- The kind of work you are doing.
- The name and address of your employer.
- How much you expect to earn each month.
- The period of time you expect to work.
- How many hours per week you work.

Section 18 – Special Railroad Retirement Board Terms Defined

The following are definitions of certain terms used throughout this booklet.

1. Confinement – To be imprisoned or under a sentence of confinement means confinement to a jail, prison or other penal institution or correctional facility. This includes any facility which is under the control and jurisdiction of a penal system, or any facility in which a person may be confined. This also includes hospitals, institutions, and half-way houses which are used as a place of confinement. A person under a sentence of confinement to any of these facilities is considered confined even though he or she may go outside the facility to work, attend school, or for some other reason.

Note: A prisoner who is released on parole or because the sentence has ended or has been suspended or overturned is no longer considered to be confined or imprisoned.

- 2. Imprisonment See Item 1, Confinement.
- 3. **Medical Recovery** A person has medically recovered from a disability if, based on medical evidence or demonstration by the individual, it is determined that the individual is able to return to regular work or work in the individual's regular occupation or in a similar occupation.

Also see Item 7, Regular Work.

- 4. **Permanent Medical Condition** A permanent medical condition is a medically determinable mental or physical condition or impairment which has lasted, or is expected to last, for at least 12 months, or is expected to result in death.
- 5. **Permanently Disabled** To be permanently disabled, you must have a permanent medical condition that prevents you from working (see Item 4, *Permanent Medical Condition*).

Several unrelated conditions that are not considered severely disabling in themselves can be combined and considered together to see if, in this way, they prevent work.

You are considered unable to work if your condition prevents you from performing basic work activities. These activities are those physical and/or mental abilities and aptitudes required to do most jobs, such as:

- walking, standing, sitting, lifting, pulling, pushing, reaching, carrying or handling;
- seeing, hearing, and speaking;

- understanding, carrying out and remembering simple instructions;
- using judgment;
- responding appropriately to supervision, co-workers, and usual work situations; and
- dealing with changes in the work setting.

You will not be considered permanently disabled if you fail to follow treatment prescribed by your doctor that may restore your ability to work. However, you will not be penalized if the reason you did not follow prescribed treatment is acceptable to the Railroad Retirement Board (RRB).

6. **Prescribed Period** – The prescribed period restricts the period of time a widow(er) may be eligible for disability benefits.

The period begins with the *later* of:

- the month the employee died; or
- the last month the widow(er) was entitled to annuity payments based on disability; or
- the last month the widow(er) was entitled to annuity payments based on caring for a child of the employee.

The period ends with the earlier of:

- the month before the month the widow(er) attains age 60, or
- the close of the 84th month (7 years) following the month in which the period began.
- 7. **Regular Work** Regular work means the regular performance, in the usual and customary manner, of the substantial and material duties of any regular and gainful employment, which is substantial and not trifling, with any employer.
- 8. **Trial Work Period** If you work after your disability benefits begin, you may receive a trial work period during which you may test your ability to work without penalty. A trial work period may last 9 months (not necessarily consecutive). The trial work period can be extended in some cases. After the trial work period, we will decide whether you are still disabled.

You may not qualify for a trial work period if you have medically recovered (also see Item 3, *Medical Recovery*).

All of the rules for determining if you qualify for a trial work period are not covered in this booklet due to their complexity. If you have any questions about them, contact the nearest field office of the RRB.

Nondiscrimination on the Basis of Disability

Under Section 504 of the Rehabilitation Act of 1973 and Railroad Retirement Board (RRB) regulations, no qualified person may be discriminated against on the basis of disability. RRB programs and activities must be accessible to all qualified applicants and beneficiaries, including those who are vision- or hearing-impaired. Disabled persons needing assistance (including auxiliary aids or program information in accessible formats) should contact the nearest RRB office. Complaints of alleged discrimination by the RRB on the basis of disability must be filed in writing within 90 days with the:

Director of Administration Railroad Retirement Board 844 North Rush Street Chicago, Illinois 60611-2092

Questions about individual rights under this regulation may be directed to the RRB's Director of Equal Opportunity at the same address.

Fraud and Abuse Hot Line

Call the toll-free Fraud and Abuse Hot Line if you have reason to believe that someone is receiving railroad retirement or unemployment-sickness benefits to which (s)he is not entitled; that persons responsible for the financial affairs of minors or incompetent beneficiaries are misappropriating benefits; or that a doctor, hospital or other provider of health care services is performing unnecessary or inappropriate services or is billing Medicare for services not received. You may also use the Hot Line to report any suspected misconduct by a Railroad Retirement Board (RRB) employee. The Hot Line has been installed by the RRB's Inspector General to receive any evidence of fraud or abuse of the RRB's benefit programs.

Call (toll-free) 1-800-772-4258. Or you may send your complaints in writing to the Railroad Retirement Board, OIG, Hot Line Officer, 844 North Rush Street, Chicago, Illinois 60611-2092.

Please do not call the Hot Line with questions about eligibility requirements, delayed claims, or similar problems. Such matters should be directed to the nearest RRB field office.