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FILED MAY 3 1993

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IN THE UNITED STATES DISTRICT COURT  
FOR THE EASTERN DISTRICT OF PENNSYLVANIA

BRIAN ZEBLEY, et al.

Plaintiffs,

v.

DONNA E. SHALALA,  
Secretary of Health  
and Human Services,

Defendant.

Civil No. 83-3314

STIPULATION AND ORDER

WHEREAS, the parties wish amicably, fully, and finally to resolve all disputes that have been or could have been asserted in this action, including, in particular, claims with respect to the application of 20 C.F.R. §§ 416.924 and 416.994c ("the Supplemental Security Income (SSI) childhood disability regulation"), the decision of the Supreme Court in Sullivan v. Zebley, 493 U.S. 521 (1990), or the implementation of the Stipulation and Order entered on March 14, 1991; NOW, THEREFORE,

IT IS HEREBY STIPULATED AND AGREED, by and between the parties, that:

1. The Social Security Administration (SSA) will attempt to notify every class member who had a readjudication claim, as

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\*Donna E. Shalala succeeded Louis W. Sullivan, M.D., as Secretary of Health and Human Services on January 22, 1993. Pursuant to Rule 25(d)(1) of the Federal Rules of Civil Procedure, Donna E. Shalala should be substituted, therefore, for Louis W. Sullivan, M.D., as the defendant in this suit. No further action need be taken to continue this suit by reason of the last sentence of section 205(g) of the Social Security Act, 42 U.S.C. §405(g).

hereinafter defined, of the availability of a redetermination of such claim, in accordance with the provisions of this Stipulation And Order.

2. A "**readjudication** claim" is a class claim that:

a. Was denied by the State Disability Determination Services (State DDS) upon readjudication pursuant to Paragraph VII of the Stipulation and Order entered on March 14, 1991, in this action: and

b. Also meets each of the following criteria:

(1) It was issued by a State DDS with a return rate for childhood disability denials of 10 percent or higher during any of the following periods: February 11, 1991 - September 30, 1991; October 1, 1991 - March 31, 1992; April 1, 1992 - September 30, 1992; **or** September 1, 1992 - November 30, 1992;

(2) It was not appealed to the State DDS reconsideration level:

(3) It was not reviewed by **SSA** under any quality review process: and

(4) It was not based on a finding of a not severe impairment.

3. **SSA** shall, within 120 days after the entry of this Order, send a notice, substantially in the form appended hereto as Attachment A, by first class mail to the last known address of each class member described in Paragraph 1 above setting forth the following terms and conditions:

a. SSA will redetermine the denial of the readjudication claim if the class member complies with the provisions of subparagraphs b and c below:

b. To obtain a redetermination hereunder, the class member must request a redetermination by returning the **pre-**addressed form letter in the postage-paid envelope enclosed with the notice or by contacting a Social Security Office:

c. The request for a redetermination must be mailed by the class member or be made in person at a Social Security Office within 60 days after presumptive receipt of the notice pursuant to 20 C.F.R. § 416.1401; and

d. If the class member fails timely to request a redetermination in compliance herewith, the class member shall not be entitled to a redetermination hereunder unless the class member shows good cause under 20 C.F.R. § 416.1411.

e. SSA will notify class counsel of the sending of the notices set forth herein 14 days prior thereto.

4. A redetermination of the readjudication claim shall consist of a review, pursuant to the standards set forth in the SSI childhood disability regulation and implementing instructions, by the State DDS of the evidence of record upon which the readjudication claim was based. If the State DDS cannot redetermine the readjudication claim based on the evidence of record, the State DDS will attempt to obtain other necessary evidence relevant to the time period being redetermined.

a. If the redetermination results in a finding of

disability, the readjudication claim and all subsequent claims, denied in whole or in part prior to the date of the redetermination, will be reopened, and evidence of the class member's disability from the period of the prior final determination to the present, or date of a more recent allowance, will be evaluated and a new initial determination will be issued.

b. If the redetermination results in a finding that the class member was not disabled, the class member may request a review of that decision at the reconsideration level of the State DDS. A copy of the redetermination initial denial notice is attached hereto as Attachment B.

(1) If such redetermination decision is issued by a State DDS that has a return rate of 10 percent or higher for childhood denial cases for the most recent six-month period ending either March 31, 1993 or June 30, 1993, SSA will reassign the reconsideration level review of the redetermination denial to a State DDS that has a return rate below 10 percent for that period, provided, however, that such reassignments shall be determined by SSA based upon workload considerations and subject to consultation with the affected States.

(2) If the reconsideration review results in a finding that the class member is not disabled, that decision shall be final and there shall be no further administrative or judicial appeal of the readjudication claim or the redetermination. A copy of the redetermination reconsideration denial notice is attached hereto as Attachment C.

(3) If the reconsideration **review** results in a finding of disability, the readjudication claim and all subsequent claims, denied in whole or in part prior to the date of the reconsideration, will be reopened, and evidence of the class member's disability from the period of the prior final determination to the present, or date of a more recent allowance, will be evaluated and a new initial determination will be issued.

5. SSA will conduct a special review of denied childhood disability claims for the purpose of monitoring the accuracy of adjudications of childhood disability claims by certain State **DDSs**.

a. The special review will be conducted by the Disability Quality Branches (DQB) and Regional Office medical consultant staff of SSA.

b. The special review shall be conducted monthly of 1,000 denied childhood disability claims selected by SSA from those States identified as having a return rate of 10 percent or higher in childhood denial cases for the period July-December, 1993.

c. In April 1993, and again in July 1993, the special review will be redirected by SSA to those states having a return rate of 10 percent or higher for childhood denial cases for the most recent six-month period.

d. To the extent reasonably practicable, the claims subject to special review shall be apportioned subject to the following conditions:

(1) The number of claims from any state to be included in the **monthly** 1,000 special reviews will be doubled in the event that the state also has an allowance rate below 50 percent for childhood disability claims during the preceding **six-**month period;

(2) Fifteen percent (15%) of the aggregate claims reviewed hereunder will be claims that were denied based upon a finding that the claimant did not have a severe impairment.

e. The special review provided herein will be conducted until September 30, 1993, at which time SSA will confer with class counsel concerning its plans to conduct additional special reviews, if any. This does not constitute a commitment by SSA to conduct additional special reviews beyond September 30, 1993.

6. A subsample of the childhood cases reviewed by the **DQBs** pursuant to Paragraph 5 will be forwarded to SSA central headquarters for consistency review (CR). The CR will be conducted by personnel from the Office of Disability and Office of Program and Integrity Review in SSA central headquarters.

7. SSA will send monthly reports to class counsel setting forth the results of the DQB special reviews and CR reviews conducted during the prior month, including the number of denials reviewed in each state, the step in the sequential evaluation process at which the cases were denied and the number of denials reviewed in which SSA disagreed with the **DDSs**.

8. SSA will conduct training for all State **DDSs** in which the denial return rate for childhood disability cases is 10 percent or higher for the six-month period beginning July 1, 1992, and for which training has not been conducted since September 1, 1992. Such training shall be completed by September **30**, 1993.

a. Class counsel will be notified in advance of such training, and they, or their designated co-counsel, may attend in the capacity of observers.

b. SSA shall undertake an analysis of error trends identified by quality reviews and the special reviews to be conducted hereunder and shall direct training for each state subject to this provision based on that analysis.

(1) SSA will make reasonable efforts to prepare a national **analysis based** on existing data and training conducted since September 1, 1992, for dissemination to all SSA Regional Offices, **DDSs**, and the Office of Hearings and Appeals, within 30 days of this Order.

(2) Within 30 days following each quarter in which training sessions are conducted, a summary of the issues addressed and content of the training provided will be prepared for dissemination to all SSA Regional Offices, **DDSs**, and the Office of Hearings and Appeals.

9. SSA will provide to class counsel lists of the states referred to in Paragraphs 4(b)(1), 5(b)-(c), and 8, above, after the lists have been compiled.

10. The plaintiff class and all class members are hereby barred and enjoined forever from:

a. Prosecuting any claims or causes of action which have been or could have been asserted to date by reason of, or with respect to, or in connection with, or which arise out of, or which relate to any of the matters alleged in Plaintiffs' Motion For Enforcement of Supreme Court Mandate, or arise out of the application of the SSI childhood disability regulation, or the implementation of the decision of the Supreme Court in Sullivan v. Zebley, 493 U.S. 521 (1990), or which are currently known to class counsel and relate to or arise out of the implementation of the Stipulation and Order entered on March 14, 1991; and

b. Seeking judicial relief that would have the effect, directly or indirectly, of requiring that class claims or readjudication claims be reopened, redetermined, readjudicated, or otherwise reviewed in any manner by SSA, except as provided in Paragraph **VII.C.** of the Stipulation and Order entered on March 14, 1991.

11. The plaintiff class and all class members hereby discharge and release the defendant named in this action, and her administrators or successors, and any department, agency or establishment of the United States and any officers, employees, agents or successors of any such department, agency or establishment from:

a. Any and all claims and causes of action which

have been or could have been asserted to date in this action, by **reason of, or with respect to, or in connection with, or which** arise out of, or which relate to any of the matters alleged in Plaintiffs' Motion For Enforcement of Supreme Court Mandate, or **which relate to or arise out of the application of the SSI** childhood disability regulation, or the implementation of the decision of the Supreme Court in Sullivan v. Zeblev, 493 U.S. 521 (1990), or which are currently known to class counsel and relate to or arise out of the implementation of the Stipulation and Order entered on March 14, 1991; and

b. Claims for judicial relief that would have the **effect, directly or indirectly, of requiring that class claims or** readjudication claims be reopened, redetermined, readjudicated, or otherwise reviewed in any manner by SSA, except as provided in Paragraph **VII.C.** of the Stipulation and Order entered on March 14, 1991.

12. Nothing herein affects the rights, if any, of a class member:

a. Arising under Paragraph **VII.D** of the Stipulation and Order filed on March 14, 1991; or

b. To assert a challenge to a revision of the **"new** regulation" as defined in Paragraph II of the Stipulation and Order filed on March 14, 1991.

13. This Stipulation and Order is not and shall not be construed as an admission by the defendant of the truth of any allegation or the validity of any claim asserted in this action

or of the defendant's liability therein, nor is it a concession or an admission of any fault or omission in any act or failure to act, or in any statement, communication, report, instruction, rule, regulation or other document or computer data, record or program made or maintained by the defendant, nor shall this Settlement Order, nor any papers related to this Settlement Order, nor any of the terms hereof be offered or received in evidence or in any way referred to in any civil, criminal or administrative action or proceeding other than such proceedings that arise under or may be necessary to consummate or enforce this Stipulation and Order, nor shall it be construed by anyone for any purpose whatsoever as an admission or presumption of any wrongdoing on the part of the defendant.

14. This Stipulation and Order replaces and supersedes the Stipulation and Order entered in this case on February 4, 1991, and Paragraph **VIII.D.** of the Stipulation and Order entered on March 14, 1991, to the extent, if any, that the cited terms of either Stipulation and Order remain effective.

15. Plaintiffs' Motion For Enforcement of Supreme Court Mandate with Proposed Order and Memorandum of Law in support thereof and plaintiffs' First (amended) and Second Sets of Interrogatories and Requests for Production of Documents are hereby withdrawn.

16. With respect to the individual named movants in Plaintiffs' Motion to Enforce Supreme Court Mandate:

- a. The Office of Hearings and Appeals of the

Social Security Administration will make a reasonable-effort:

1. To issue a decision by an Administrative Law Judge (**ALJ**) within 60 days after the entry of this stipulation and Order on the childhood disability claims of Jonathan **O'Neill** (Social Security number 573-67-3613) and Angeline **O'Neill** (Social Security number 585-31-8292); and

2. To schedule a hearing before an **ALJ** within 45 days after the entry of this Stipulation and Order on the childhood disability claim of Christopher King (Social Security number 452-65-8866).

b. Within 60 days after the entry of this Stipulation and Order, a reconsideration determination will be issued in the childhood disability claim of Kenneth **Twyman** (Social Security number 414-06-4468).

Respectfully submitted,

STUART E. SCHIFFER  
Acting Assistant Attorney General

MICHAEL J. ROTKO  
United States Attorney

BRIAN G. KENNEDY



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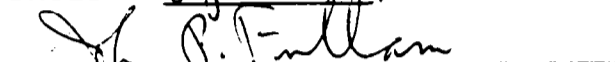


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their class

SO ORDERED:

DATED: April 30, 1993

  
JOHN P. FULLAM  
United States District Judge

ENTERED 5-4-93

CLERK-OF COURT

Date:

Social Security Number

**IMPORTANT NEWS FOR CHILDREN DENIED SSI**

As a result of a Supreme Court decision in the case of **Sullivan v. Zebley** the Social Security Administration began using new, expanded rules to decide whether a child is disabled. Although we found you not disabled when we used these rules and you did not appeal that decision, we now are offering to look at your claim again.

**If You Want Us To Review Your Claim**

All you need to do is to fill out the enclosed reply form, put it in the **enclosed** postage-free return envelope and mail **it to** us. You have 60 days from the day you receive this letter to respond. If you wait more than 60 days to return the reply form, you will have to show a good reason for the delay.

When we finish reviewing your claim again, we will send you a letter about our decision. If we need additional information, we will contact you.

**If You Now Get Money From Social Security**

Even if you now get money from Social Security, we may still owe you more. Return the reply form to ask us to review your case.

**If You Have Any Questions**

If you have any questions, you may contact your local Social Security office. The address and telephone number are:

In addition, the attorneys who represented children in the **Zebley** case have offered to provide free advice to children who may need help with their claims. Their toll-free number is 1-800-523-0000.

Enclosures:  
Reply form  
Envelope

Attachment A

Date:

Social Security Number:

Childhood Redetermination  
(Initial Denial)

We have reviewed your claim again as you asked and have found that our previous determination was correct.

We reviewed all of the medical and other evidence in your file to determine whether our prior denial was correct under the rules we now use as a result of a Supreme Court decision, Sullivan v. Zebley.

YOU **HAVE THE RIGHT TO APPEAL** IF YOU **STILL BELIEVE YOU WERE DISABLED**

If you still **believe** you were disabled, you have the **right to appeal** by requesting reconsideration. No other review will be available.

- o Requesting reconsideration is **easy** to do.
- o You have 60 days after you get this letter to ask for a reconsideration.
- o You must have a good reason for waiting more than 60 days.
- o To request reconsideration, you must fill out a form called "Request for Reconsideration" (**SSA-561**). To get this form contact one of our offices. We can help you fill out this form.
- o A different person from the one who made the first decision will review your case.

If You **Want** Help With Your Reconsideration **Request**

You can have a friend, lawyer or someone else help you with your appeal. There are also some lawyers who **do** not charge unless you **win** your reconsideration. Your local Social Security office has a list of groups that can help you with your reconsideration request.

If you get someone to help you, you should let us know. If you hire someone, we must approve the fee before he or she can collect it.

Appealing Instead Of Filing A **New** Application

You have a right to file a new application at any time, but filing a new application is **not** the same as requesting reconsideration of this decision. You could lose many months of back benefits if you file a new application instead of requesting reconsideration. Therefore, if you disagree with this decision, you should ask for **an** appeal within 60 days.

Attachment B

**If You Have Any Questions**

If you have **any** questions, you may call us at **1-800-772-1213**. We can answer most questions over the phone. You can also write or visit any Social Security office. The office that **serves** your area is located at:

If you do call or visit an, office, please have this letter with you. It will help us answer your questions. Also, if you plan to visit an office, you may call ahead to make an appointment. This will help us serve you more quickly when you arrive at the office.

In addition, the attorneys who represented children in the Zebley case have offered to provide free advice to children who may need help with their claims. Their toll-free number is 1-800-523-0000.,

Date:

Social Security Number:

Childhood Redetermination  
(Reconsideration Denial)

We recently reviewed your childhood redetermination claim again and found you were not disabled. You asked for a reconsideration and your claim was independently reviewed by the (fill-in State) State agency. The evidence in your case was thoroughly evaluated. We found that the previous determination denying your claim was correct under the law.

Because this special review was offered to you in addition to our normal review process, no further appeal is available to you on this claim.

Right To **File New** Application

If at any time in the future you believe you are disabled or your condition gets **worse**, you can contact us immediately about filing a new application. If you file a new application, we cannot make payment for any month before the month in which you **apply**.

If **You** Have Any Questions

**If** you have any questions, you may call at 1-800-772-1213. We can answer most questions over the phone. You can also write or visit **any Social Security** office. The office that serves your area is located at:

If you do call or visit an office, please have this letter with you. It will help us answer your questions. Also, if you plan to visit an office, you may call ahead to make an appointment. This will help us serve you more quickly when you arrive at the office.

Attachment C

Date:

Claim Number:  
(Zebley Readjudication Denial)

We recently expanded our disability rules for children because of a Supreme Court decision, Sullivan v. Zebley. When we denied (your or child's name) Supplemental Security Income claim, we were using the old rules. Under the old rules we did not look at whether **(your, his/her)** health problems limit (you, him/her) from doing things other children the same age normally can do.

When we again reviewed (your, his/her) claim using our new rules, we decided that (you, he/she) (were/was) not disabled.

We have enclosed a page which explains the reasons for the decision we made on this claim.

**YOU HAVE THE RIGHT TO APPEAL IF YOU STILL BELIEVE YOU WERE DISABLED**

If you still believe you were disabled, you have the right to appeal. A different person from the one who made the first decision will review your case. We will also consider any new facts you have.

- o Appealing is easy to do.
- o You have 60 days after you get this letter to ask for an appeal.
- o You must have a good reason for waiting more than 60 days to ask for an appeal.
- o To appeal, you must fill out a form called "**Request for Reconsideration**". To **get this form (SSA-561)**, contact one of our offices. We can help you fill out this form.

If You Want **Help** With Your Appeal

you can have a friend, lawyer or someone else help you with your appeal. There are also some lawyers who do not charge unless you win your appeal. Your local Social Security office has a list of groups that can help you with your appeal.

If you get someone to help you, you should let us know. 'If you hire someone, we must approve the fee before he or she can collect it.

### Appealing Instead Of Filing A **New** Application

You have the right to file a new application at any time, but filing a new application is not the same as appealing this decision. You could lose many months of back benefits **if you** file a **new** application instead of filing an appeal. Therefore, if you disagree with this decision, you should ask for an appeal within 60 days.

### Who Decided Your **Case**

Doctors and other trained staff looked at your case and made the decision. They work for your State but used our rules. We are enclosing more information about the disability requirements.

### **New** Application

If you agree that you are not disabled now, but your condition gets worse in the future, please contact us immediately about filing a new application. If you file a new application, we cannot make payment for any-month before the month in which you apply.

### **Other Social Security** Benefits

The application you filed for SSI was also a claim for Social Security benefits. We looked into whether you qualify for Social Security and found that you do not. If you disagree, you have the right to appeal.

### Additional Information About 881 Disability

For you to be considered disabled for SSI payments, you must meet certain rules.

o If you are age 18 or older:  
Your health problems must last, or be expected to last, for at least 12 months in **a row**. Your health problems must also keep you from doing any kind of substantial gainful work. This kind of work is described below.

o **A** child under age 18 must have:  
Health problems that last, or are expected to last, for at least 12 months in a row.

AND

Health problems that are as severe as **those** that would keep an adult from working at any kind of substantial gainful work. This means that the health problems must limit *the child from* doing things other children the same age normally can do to the extent required under our rules;

OR

Your eyesight must be no better than **20/200** in the better eye with the use of a correcting lens or your visual field must be restricted to 20 degrees or less.

**Other Important Information**

Please remember that there are many types **of** disability programs, both government and private, which often use different rules. **A** person may be receiving benefits under another program and still not be entitled under our rules. This may be true in your case.

**Information About Substantial Gainful Work**

Generally, substantial gainful **work** is physical or mental work you are paid to do. Work can be Substantial even if it is part-time. We consider the nature of your job duties, the skills and experience you need to do the job, and how much you actually earn. Usually, we consider work to be substantial and gainful if monthly earnings, after allowable deductions, average over \$500 per month (\$300 before January 1, 1990). If you are self-employed, we may give more consideration to the kind and value **of** your work, including, your part in the management of the **business**, than to your income alone.

Your work -may be different than before your disability began. It may not be as hard to do and your pay may be less. However, we may still consider your work to be substantial and **gainful** under our rules.

**If You Have Any Questions**

If you have any questions, you may call us **at 1-800-772-1213**. We can answer most questions over the phone. You can also write or visit any Social Security office. The office that serves your area is located at:

If you do call or visit an **office**, please have **this** letter with you. It will help us answer your questions. Also, **if** you plan to visit an office, you may call ahead to **make** an appointment. This will help us serve you more quickly when you arrive at the office.

Enclosure  
SSA Pub No. 05-11008

Date:

Social Security Number:

Reconsideration Filed:  
(Readjudication **Recons**)

We recently reviewed your childhood Supplemental Security Income claim as a result of a Supreme Court decision, Sullivan v. Zeblev, and found you were not disabled. You asked for a reconsideration and your claim was independently reviewed by the (fill-in State) State agency. The evidence in your case was thoroughly evaluated; this includes the medical evidence and the additional information received since the original decision. We found that the previous determination denying your claim was correct under the law. We have enclosed a page which explains the reasons for the decision we made on this **claim**.

YOU **HAVE THE RIGHT** TO APPEAL IF YOU **STILL BELIEVE** YOU WERE **DISABLED**

If you believe that the reconsideration determination is not correct, you may request a hearing before an administrative law judge of the Office of Hearings and Appeals. If you want a hearing, you must request this not later than 60 days from the date you receive this notice. You may make your request through any Social Security office. Read the enclosed leaflet and the reverse side of this notice for a full explanation of your right to appeal.

Appealing Instead of Piling A **New** Application

You have the right to file a new application at any time, but filing a new application **is** not the same as appealing this **decision**. You might lose benefits if you file a new application **instead** of filing an appeal. Therefore, if you disagree with **this** decision you should ask for an appeal within 60 days.

If You **Have Any** Questions

If you have any questions, you may call us at 1-800-772-1213. We can answer most questions over the phone. You can also write or visit any Social Security office. The office that serves your area is located at:

If you do call or visit an office, please have this letter with you. It will help us answer your questions. Also, if you plan to visit an office, you may call ahead to make an appointment. This will help us serve you more quickly when you arrive at the office;

**Enclosure:**

SSA Pub No. 70 10281

SST CHILDHOOD DISABILITY DENIALS  
 'NEW' AND 'READJUDICATED' CASES  
 ISSUED BY A DDS WITH A RETURN RATE  
 OF TEN PERCENT OR HIGHER AND  
 NOT APPEALED TO THE RECON LEVEL AND  
 NOT REVIEWED UNDER SSA QUALITY REVIEW  
 DURING THE PERIOD 03/91 THROUGH 11/92 AND  
 NOT BASED ON A FINDING OF NON-SEVERE  
 BY REGION AND STATE

STATE -a---	NEW ---	READJ -----	TOTAL -----
BOSTON			
CONNECTICUT	160	90	250
MAINE	118	68	186
MASSACHUSETTS	261	101	362
RHODE ISLAND	60	19	79
TOTAL FOR BOSTON	599	278	877
NEW YORK			
NEWJERSEY	590	221	811
NEW YORK	1,524	764	2,288
TOTAL FOR NEW YORK	2,114	985	3,099
PHILADELPHIA			
DELAWARE	58	39	97
DISTRICT OF COLUMBIA	209	134	343
MARYLAND	1,546	641	2,187
PENNSYLVANIA	2,275	1,269	3,544
VIRGINIA	1,628	861	2,489
WEST VIRGINIA	341	314	6 5 5
TOTAL FOR PHILADELPHIA	6,057	3,258	9,315
ATLANTA			
FLORIDA	3,696	1,434	5,130
GEORGIA	1,939	1,806	3,745
KENTUCKY	603	389	992
MISSISSIPPI	954	241	1,195
NORTH CAROLINA	2,438	1,223	3,661
SOUTH CAROLINA	320	163	483
TENNESSEE	693	219	912
TOTAL FOR ATLANTA	10,643	5,475	16,118

SST CHILDHOOD DISABILITY DENIALS  
 'NEW' AND 'READJUDICATED' CASES  
 ISSUED BY A DDS WITH A RETURN RATE  
 OF TEN PERCENT OR HIGHER AND  
 NOT APPEALED TO THE RECON LEVEL AND  
 NOT REVIEWED UNDER SSA QUALITY REVIEW  
 DURING THE PERIOD 03/91 THROUGH 11/92 AND  
 NOT BASED ON A FINDING OF NON-SEVERE  
 BY REGION AND STATE

STATE -----	NEW ---	READJ -----	TOTAL -----
CHICAGO			
ILLINOIS	2,054	708	2,762
INDIANA	391	162	553
MICHIGAN	1,276	425	1,701
MINNESOTA	384	185	569
OHIO	1,137	430	1,567
WISCONSIN	353	67	420
TOTAL FOR CHICAGO	5,595	1,977	7,572
D A L L A S			
ARKANSAS	808	353	1,161
LOUISIANA	2,574	1,070	3,644
NEW MEXICO	356	302	658
OKLAHOMA	229	77	306
TEXAS	3,128	1,388	4,516
TOTAL FOR DALLAS	7,095	3,190	10,285
KANSAS CITY			
IOWA	1,377	657	2,034
KANSAS	738	346	1,084
MISSOURI	4,338	1,593	5,931
NEBRASKA	312	232	544
TOTAL FOR KANSAS CITY	6,765	2,828	9,593
DENVER			
COLORADO	408	211	619
MONTANA	135	73	208
NORTH DAKOTA	29	18	47
SOUTH DAKOTA	55	31	86
UTAH	139	71	210
WYOMING	26	18	44
TOTAL FOR DENVER	792	422	1,214

**SSI CHILDHOOD DISABILITY DENIALS**  
**- 'NEW' MD 'READJUDICATED' CASES**  
 ISSUED BY ADDS WITH A RETURN RATE  
 OF TEN PERCENT OR HIGHER AND  
 NOT APPEALED TO THE RECON LEVEL AND  
 NOT REVIEWED UNDER SSA QUALITY REVIEW  
 DURING THE PERIOD 03/91 THROUGH 11/92 AND  
 NOT BASED ON A FINDING OF NON-SEVERE  
 BY REGION AND STATE

<u>STATE</u> -----	<u>NEW</u> ---	<u>READJ</u> -----	<u>TOTAL</u> -----
<b>SAN FRANCISCO</b>			
ARIZONA	343	221	564
CALIFORNIA	4,057	2,274	6,331
HAWAII	49	35	84
NEVADA	56	30	86
<b>TOTAL FOR SAN FRANCISCO</b>	<b>4,505</b>	<b>2,560</b>	<b>7,065</b>
<b>SEATTLE</b>			
ALASKA	22	23	45
IDAHO	274	142	416
OREGON	478	292	770
WASHINGTON	651	512	1,163
<b>TOTAL FOR SEATTLE</b>	<b>1,425</b>	<b>969</b>	<b>2,394</b>
<b>TOTAL</b>	<b>45,590</b>	<b>21,942</b>	<b>67,532</b>

DATE PREPARED: 04/93

SSI CHILDHOOD DISABILITY DENIALS  
 'NEW' AND 'REJUDICATED' CASES  
 ISSUED BY A DDS WITH A RETURN RATE  
 OF TEN PERCENT OR HIGHER AND  
 NOT APPEALED TO THE RECON LEVEL AND  
 NOT REVIEWED UNDER SSA QUALITY REVIEW  
 DURING THE PERIOD 03/91 THROUGH 11/92 AND  
 NOT BASED ON A FINDING OF NON-SEVERE  
 BY REGION AND STATE

STATE -a---	NEW ---	READJ a----	TOTAL ----w
BOSTON			
CONNECTICUT	160	90	250
MAINE	118	68	186
MASSACHUSETTS	261	101	362
RHODE ISLAND	60	19	79
TOTAL FOR BOSTON	599	278	877
NEW YORK			
NEWJERSEY	590	221	811
NEW YORK	1,524	764	2,288
TOTAL FOR NEW YORK	2,114	985	3,099
PHILADELPHIA			
DELAWARE	58	39	97
DISTRICT OF COLUMBIA	209	134	343
MARYLAND	1,546	641	2,187
PENNSYLVANIA	2,275	1,269	3,544
VIRGINIA	1,628	861	2,489
WEST VIRGINIA	341	314	6 5 5
TOTAL FOR PHILADELPHIA	6,057	3,258	9,315
ATLANTA			
FLORIDA	3,696	1,434	5,130
GEORGIA	1,939	1,806	3,745
KENTUCKY	603	389	992
MISSISSIPPI	954	241	1,195
NORTH CAROLINA	2,438	1,223	3,661
SOUTH CAROLINA	320	163	483
TENNESSEE	693	219	912
TOTAL FOR ATLANTA	10,643	5,475	16,118

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STATE -----	NEW ---	READJ m-e--	TOTAL -----w
CHICAGO			
ILLINOIS	2,054	708	2,762
INDIANA	391	162	553
MICHIGAN	1,276	425	1,701
MINNESOTA	384	185	569
OHIO	1,137	430	1,567
WISCONSIN	353	67	420
TOTAL FOR CHICAGO	5,595	1,977	7,572
DALLAS			
ARKANSAS	808	353	1,161
LOUISIANA	2,574	1,070	3,644
NEW MEXICO	356	302	658
OKLAHOMA	229	77	306
TEXAS	3,128	1,388	4,516
TOTAL FOR DALLAS	7,095	3,190	10,285
KANSAS CITY			
IOWA	1,377	657	2,034
KANSAS	738	346	1,084
MISSOURI	4,338	1,593	5,931
NEBRASKA	312	232	544
TOTAL FOR KANSAS CITY	6,765	2,828	9,593
DENVER			
COLORADO	408	211	619
MONTANA	135	73	208
NORTH DAKOTA	29	18	47
SOUTH DAKOTA	55	31	86
UTAH	139	71	210
WYOMING	26	18	44
TOTAL FOR DENVER	792	422	1,214

SSI CHILDHOOD DISABILITY DENIALS  
 'NEW' MD 'READJUDICATED' CASES  
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STATE -----	NEW ---	READJ -----	TOTAL -----
SAN FRANCISCO			
ARIZONA	343	221	564
CALIFORNIA	4,057	2,274	6,331
HAWAII	49	35	04
NEVADA	56	30	86
TOTAL FOR SAN FRANCISCO	4,505	2,560	7,065
SEATTLE			
ALASKA	22	23	45
I D A H O	274	142	416
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TOTAL, FOR SEATTLE	1,425	969	2,394
<b>TOTAL</b>	45,590	21,942	67,532

DATE PREPARED: 04/93



Refer to:

Office of the General Counsel  
Baltimore MD 21235

(410) 965-3181

APR 29 1993

Jonathan M. Stein, Esq.  
Community Legal Services, Inc.  
1324 Locust Street  
Philadelphia, Pa. 19107-5697

Dear Mr. Stein:

Childhood disability claimants whose claims have been denied for the first time under the new childhood disability regulation, which was published in the Federal Register on February 11, 1991, are not members of the Zeblev class. Nevertheless, the Social Security Administration intends to offer the relief provided in the **proposed Stipulation and Order** in Zeblev, if approved by the district court, to childhood disability claimants **whose** claims were denied under the new childhood regulation and who otherwise meet the criteria of paragraph 2(b) of the proposed Stipulation and Order. The granting of relief by the Social Security Administration to these childhood disability claimants is voluntary on the part of the Agency and should not be construed as an acknowledgement or admission by the Social Security Administration that they are within the scope of the Zeblev court's jurisdiction or that they have any legal rights under any of the Stipulation and Order entered in this case.

Within 45 days after the entry of the proposed Stipulation and Order by the **district** court, the Social Security Administration will make a reasonable effort to schedule a hearing before an Administrative Law Judge on the childhood disability claim of Anthony Price (Social Security Number 395-90-3069) or otherwise act on Mr. Price's request for a hearing.

Sincerely,

A. George Lowe

Deputy Associate General Counsel  
for Disability Litigation