## Edited Content Extracted from: sections 305-309.docx

PART III. BENEFITS (third chunk)

SUB-PART C: DISABILITY INSURANCE

Section 305. Disability Insurance

• A person, who is disabled and, at the time of the onset of the disability, was both fully and currently insured or was permanently insured, shall be entitled to a monthly insurance benefit. The benefit shall begin at the month in which the person became so entitled and end with the month before the month in which the disabled person dies or recovers from the disability, whichever occurs first, subject to the earnings test in §330.

Section 306: Disability Defined

- (a) The term "disability" shall mean the following:
- Inability to engage in any substantial gainful employment or activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or which has lasted, or can be expected to last for a continuous period of not less than twelve (12) months.
- (b) A child under the age of eighteen (18), or under the age of twenty-two (22) if a bona fide student, will be considered disabled if he or she has a medically determinable physical or mental impairment or combination of impairments that causes marked and severe functional limitations or can be expected to cause death or that has lasted or can be expected to last for a continuous period of not less than twelve (12) months.

Section 307: Medically Determinable Impairment

In order to receive disability benefits, a person must have a physical or mental medically determinable impairment. Each person who files a claim for disability is responsible for providing medical evidence from acceptable medical sources showing that he or she has determinable impairment(s) and the severity of the impairment(s). A physical or mental medically determinable impairment is an impairment that results from an anatomical, physiological, or psychological abnormality which can be shown by medically acceptable clinical and laboratory techniques. A physical or mental impairment must be established by medical evidence consisting of signs, symptoms, diagnosis, tests, findings, laboratory work. Statements made by an individual claiming the disability may be offered as support of a medically determinable impairment but shall not be conclusive by themselves.

Section 308: Acceptable Medical Sources for Evidence

Acceptable medical sources include but are not limited to the following:

Licensed physicians (medical or osteopathic doctors);

- · Licensed or certified psychologists;
- · Licensed optometrists;
- · Licensed podiatrists;
- Qualified speech-language pathologists;
- Treating sources such as hospitals or health facilities; or
- Other sources such as schools, care givers, social workers, naturopaths, chiropractors, and audiologists.

Section 309: Disability Determination

The Administration shall make a determination of disability based on medical evidence provided by the claimant through a process known as "sequential evaluation". For adults, the procedure requires sequential review of the claimant's current work activity, the severity of his or her impairment(s), the claimant's residual functional capacity, his or her past work experience, and his or her age, education, and work experience. For children, the process requires sequential review of the child's current work activity (if any), the severity of his or her impairment(s), and an assessment of whether his or her impairment(s) result in marked and severe functional limitations. If an adult or child is found to be disabled or not disabled at any point in the evaluation, the evaluation shall immediately cease.

[Source 41 PNC § 711 and § 712(d) & U.S. SSA]