Whereas, Many disability insurance products contain language and provisions such as “own occupation” and “own specialty” that may not be consistently defined and whose definitions are not readily available in marketing and policy paperwork; and

Whereas, The Department of Labor (DOL) developed the Dictionary of Occupational Titles (DOT), the main source of occupational information, in 1938; however, the DOL stopped updating the DOT in 1991;¹ and

Whereas, The DOL and Social Security Administration (SSA) are developing a new Occupational Information System (OIS),² which will replace the DOT as the primary source of occupational information that SSA staff and private insurers commonly use in the disability adjudication process; and

Whereas, This pandemic has led to many physicians contracting COVID-19 with health care workers and their families, representing up to one-sixth of hospitalized COVID-19 patients³; and

Whereas, Up to one-third of those infected with COVID-19 will develop Long COVID,⁴,⁵ which can last for a year or more;⁶ and

Whereas, Many with Long COVID cannot return to work on a full time basis⁷ requiring reliance on long-term disability insurance to supplement income; and

Whereas, While the DOT contains discrete and well-established descriptions of the physical demands of occupations, it does not provide sufficiently specific information on associated mental and cognitive requirements; and

Whereas, Working with the US Bureau of Labor Statistics allows the SSA the unique opportunity to consider including descriptions of the mental and cognitive requirements of work in the new OIS; and

Whereas, In the absence of more specific definitions in the disability insurance application, many long-term disability insurers use a “national economy” standard to establish a job description; and

Whereas, Application of such a national standard may lead to long-term disability denials and financial hardship for physicians; therefore be it

Resolved that the AMA House of Delegates:

1. Update the physician job description for disability insurance to reflect the mental and cognitive requirements of work.
2. Work with the US Bureau of Labor Statistics to include descriptions of mental and cognitive requirements in the new OIS.
3. In the absence of more specific definitions in the disability insurance application, use a “national economy” standard to establish a job description.
RESOLVED, That our American Medical Association study the most effective approach to developing specialty-specific job descriptions that reflect the true physical and cognitive demands of each given specialty for use in the Occupational Information System under development by the Social Security Administration so as to ensure that physician disability policies are robust and protective if a coverage trigger occurs. (Directive to Take Action)

Fiscal Note: Not yet determined

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References: