

the
NADE
ADVOCATE



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Conference Issue

**SSA's Ann Robert
 Addressed Conference Attendees**

by Jennifer Nottingham, Ohio DDS

ANN ROBERT, THE ACTING ASSOCIATE Commissioner for the Office of Disability Determinations spoke at the 2013 NADE National Training Conference. She was previously the Illinois DDS Director and NADE member. She began by thanking NADE for working with SSA, the National Council of Disability Determinations Directors, and legislators to improve our disability program. She gave a brief overview of important issues and areas of focus for the Disability Determination Services.



Training and quality will continue to be an area of importance over this coming year. While the DDSs have done a good job with quality, we can always strive to elevate our quality. Various SSA components have been working to identify trends and areas where training efforts can be focused for improved quality. Her office has created a quality plan. The plan includes having quality data readily available in one location, to include resources such as Request for Program Consultations, FAQs, and policy links. The plan also includes increased communication between the regional quality offices. Additionally she would like to see a grassroots quality approach from feedback at the DDS level on areas where training is needed.

The status of Disability Case Processing System (DCPS) was discussed. Idaho was the first beta site and closed its first DCPS claim on 2/27/13. In June, Illinois moved into production and closed its first claim in July. Missouri, Nebraska and New York are next to move into production. DCPS is still in the early stages but it will be moving quickly. It is expected that DCPS will help with national consistency. DDS Administrators saw a DCPS demonstration on a recent call. Subject matter experts from the DDS level will continue to be consulted for input. Ann encourages people to check out the ODD website to keep posted on DCPS updates.

Health Information Technology (Health IT) continues to make steady progress. SSA continues to work with Kaiser Permanente and plans to complete the roll out with their facilities in this calendar year. ODD is currently addressing

policies regarding obtaining mental health records. Health IT MER averages a response time of 15 days faster than regular MER. Health IT provides a consistent format across medical records. SSA automatically pays for Health IT MER at a flat rate of \$15 per successful transaction, eliminating the need for DDSs to process the MER payments.

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President's Message

HELLO, MY NAME IS JENNIFER NOTTINGHAM and I am honored to represent you as the NADE president over this coming year. For those of you who do not know me, I have been at the Ohio DDS since 2001. I have been a disability claims adjudicator and unit supervisor. I joined NADE in 2002 and have been an active member since that time. Over the years, I have been able to serve as the Ohio chapter secretary and president. I have also have had the opportunity to serve as the Great Lakes Regional President and as the Regional Director. My experience and involvement in NADE have greatly helped me to enhance my knowledge and understanding of the disability program. I am grateful to my predecessors, Todd Deshong and Tom Ward for mentoring me over the last couple of years.



The 2013 NADE National Training Conference was held in Oklahoma City, Oklahoma, with great success. The conference was loaded with excellent speakers and I would like to commend the Oklahoma conference planning committee and the NADE past-president, Todd Deshong, for their efforts in hosting such an informative conference.

The theme of the conference was "NADE is Golden" since NADE is celebrating 50 years as an organization. This is a great accomplishment as NADE has been a strong voice for disability professionals over the past 50 years. With the sequestration and budget cuts, the impact upon the DDS workload will be immense. We are facing daunting times, but this will not be the first time that NADE has faced formidable challenges over the past 50 years. Through the dedication of our membership, we will be able to overcome these challenging times.

The Social Security Disability program is the focus of many discussions on Capitol Hill. NADE acts as the voice of those involved in the decision making program. NADE will work closely with the Social Security Administration and the National Council of Disability Determination Directors to advocate for our needs. Our membership input will be helpful in improving the disability process. Your NADE leaders will use your feedback in correspondence with the Social Security Administration and in our meetings with key stakeholders and legislators.

At the 2012 NADE National Training Conference held in Columbus, Ohio, the membership held a vote of confidence to pursue changing the tax status from a 501c6 to a 501c3. For those able to attend this year's national conference, we had the pleasure of having our tax attorney, Jeri Towler, present at the general assembly meeting to help explain the process and answer questions. This will be a long process that will require action at the local chapter level as well as the national level.

The NADE board seeks to make sure this process is transparent and to help guide the states and regions through the needed actions. Since we are forming a new legal entity and must be compliant with tax laws, NADE must create new Bylaws to govern

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The **NADE Advocate** is the official publication of the National Association of Disability Examiners.

It provides a forum for responsible comments concerning the disability process. Official NADE positions are found in the comments by the NADE President and NADE Position Papers.

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Letters to the Editor are welcomed and may be selected for inclusion in future issues. Please forward ideas for future **Advocate** topics to the editor or your Regional Publications Representative.

The next issue will be **Winter 2013.**

All correspondence should be directed through your Regional Representative or the NADE Communications Director by **December 15, 2013.**

us. A draft of the bylaws is available on the NADE website. This is not the final document as there are points that will need to be changed to best suit our organization. I have asked the regional directors and those in attendance at the conference to take back this information to the local chapters. I encourage you to review the documents we post on the NADE website regarding this process and to provide feedback or ask questions to your regional director. The point person for the tax status changes will be the NADE past-president, Todd Deshong.

I am committed to helping this organization grow. Please share your ideas with the NADE board. It is through our membership that our voice can be heard.

Sincerely,
Jennifer Nottingham
Jennifer Nottingham
NADE President
2013-2014
NADE.President@gmail.com

Ann Robert, continued from page 1

ODD is looking at other technologies, such as sharing the automated State Agency Work Sampling (SAWS) program that Ohio currently uses, which eliminates the need to manually collect work sampling information. Another example is the e-authorization process that is now in use for CDRs, childhood claims and reconsideration claims.

Ann discussed the credentialing process that is being completed due to Homeland Security Presidential Directive 12—known as HSPD-12. Alabama and Minnesota have already completed the credentialing and they are looking to move forward in 10 volunteer states. They have not encountered many problems.

Ann discussed the current budgetary challenges. SSA has been one of the few agencies to avoid furloughs during fiscal year 2013. This was mainly due to attrition. SSA will continue to focus on automating processes. My Social Security is a portal environment for people to look up their individual information.

Ann thanked NADE and each member for their commitment to serving people. NADE provides important feedback on critical issues. NADE provides high quality training, mentoring, improves morale and creates a professional atmosphere in the DDS.



New Procedure For Advocate Email Notifications:

In the past, an email notification was sent out to let you know when the new edition of the Advocate was available on the official NADE website, www.nade.org. Due to some issues, this service was suspended. If you would like to be notified when a new edition of the Advocate is online and ready for viewing, please send an email to nade.communications@gmail.com. In your email please include your information, including the email address at which you would like to receive Advocate notifications. The notification can be sent to any email address of your choosing.

Thank you,
Megan Rolloos
NADE Communications Director

Please notify the Communications Director Megan Rolloos of any email address changes when they occur. Questions on distribution may be directed to the Communications Director or your Regional Director.

Conference Coverage

Inspector General O'Carroll on Fraud in America

by R. Todd Deshong, Washington DDS

Once again, the Inspector General of SSA, Patrick P. O'Carroll, provided an excellent and very entertaining presentation to the NADE 2013 National Training Conference (NTC). He congratulated NADE on celebrating its 50th anniversary. He is a true friend of NADE.



Inspector General Patrick P. O'Carroll addresses conference attendees on Fraud in America.

As always, the Inspector General started with something a little different this year. To coincide with his "special announcement", he focused on a psychologist in California that was fraudulently certifying patients as disabled. The IG described the operation that concluded with the doctor confessing to his scheme and the legal ramifications for the doctor. The special announcement will be covered in the upcoming Winter Issue.

In fiscal year 2012, SSA made \$51 billion in SSI payments and more than \$135 billion in DIB benefits. These are both record amounts. In addition, SSA received about 3.2 million initial disability claims and more than 832,000 requests for reconsideration.

The SSA OIG opened more than 3,100 criminal investigations of potential disability program fraud during the first half of fiscal year 2013. The SSA OIG regularly identifies the "timeliness and quality of the disability process" as one of the most significant management challenges facing SSA.

The Inspector General noted that DDS staffing had a direct impact on pending initial claims and as of late July 2013, about 720,000 claims were pending. The Inspector General noted that was not entirely bad, as the agency had been working toward a goal of reducing the pending level, although the goal was 525,000 claims by the beginning of fiscal year 2014. The Agency has admitted that will not happen, but it says it cannot give any updated estimates especially given all the budget uncertainty.

The Inspector General empathized with DDSs as they face high attrition rates, hiring freezes, and furloughs. He stated that he understood that all of these issues affected the disability adjudicators' ability to process the disability workload. He went on to name states that had been most impacted by hiring freezes as well as those who had faced furloughs. He reported that SSA was only able to make "limited critical hires" in fiscal year 2012, and they lost 1,000 DDS employees last fiscal year. He reported that SSA had tried to offset staffing shortages by creating centralized Extended Service Teams (ESTs) to help the states with the highest pending levels process claims. Of note, the conference was held within one such state, Oklahoma. The other EST's are located in the states of Arkansas, Mississippi and Virginia. These are states with a history of high quality and productivity, as well as the ability to train people quickly.

The Inspector General noted that SSA had also increased staffing in the federal disability processing components (DPUs) that supported the DDSs by hiring about 237 employees. The Inspector General noted that this was all part of Social Security's strategy to address increasing initial disability claims receipts, which the OIG continues to review. The Inspector General reported that his office is working with SSA to reduce initial claims backlog. He reported that part of the audit will be assessing the use of ESTs as well as the Federal DPUs.

The Inspector General reported that although budget and staffing issues affect SSA and DDSs efforts to balance service and stewardship, the OIG position has always been that it is just as important to conduct Continuing Disability Reviews (CDRs) when they are due. He reported this was as important as it is to process the initial claims. The Inspector General reported that SSA has relatively low improper payment rates, but its programs are so large, even low percentages mean billions of dollars that could be spent elsewhere. The Inspector General noted that OIG continued to stress the importance of preventing improper payments before they were made and clearly stated that full medical CDRs were particularly effective in reducing overpayments in the disability insurance program. He reported that SSA estimated that every dollar spent on medical CDRs yielded at least \$10 in savings for SSA and Medicare. He reported that SSA conducted about 443,000 medical CDRs in fiscal year 2012, up from 345,000 in 2011. SSA's goal for medical CDRs in this fiscal year (2013) was 435,000, based on available funding. SSA projected a backlog of 1.3 million medical CDRs at the end of this fiscal year.

The Inspector General reported that OIG was pleased to see that SSA was conducting more SSI redeterminations.

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They had 2.6 million targeted for 2013 and 2014. The OIG continues to encourage SSA to utilize more nongovernmental databases to improve the efficiency of resources committed to integrity efforts. Access to financial institutions is a great success story, which means that SSA is able to verify financial records independently to make sure SSI applicants are technically eligible.

The Inspector General reported that in only the first nine months of fiscal year 2013, CDI had already saved a projected \$258 million for SSA programs.



NADE President R. Todd Deshong introduces conference attendees to Inspector General O'Carroll.

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Inspector General Patrick P. O'Carroll discusses the future of SDM.

by R. Todd Deshong, Washington DDS

The Inspector General reported to conference attendees on something that is of great interest to NADE members and that is the Single Decision Maker pilot (SDM). He reported that this tool has helped speed up the disability process. He noted that earlier in August, the OIG issued an audit for SSA to use when it decides to expand or terminate the pilot. The SDM program allows experienced disability adjudicators/examiners to make certain initial determinations without a medical or psychological consultant's signature. In some areas, the pilot eliminated the reconsideration process. SSA intended for SDM to utilize disability examiner and medical consultant resources more effectively and to allow for faster determinations. Since 1999, the SDM pilot has been in place at 20 DDS sites. In all, 34 DDS and Federal Units do not use SDM pilot. In the past 10 years, SSA has extended SDM several times, but the agency has collected little management information to assess the pilot's effectiveness. The audit examined 3,900 initial disability claims from SDM and non-SDM sites. The audit specifically looked at allegations of back disorders and genitourinary disorders. The audit analysis found back disorder SDM claims were processed 26 days sooner than at non-SDM sites; non-SDM sites processed back disorder claims in 100 days as opposed to 74 days at SDM sites. The Inspector General reported that, overall, SDM sites maintained disability determination quality and accuracy. They reported improved service to the public, faster case processing times, better employee morale, and decreased administrative costs because medical consultants were not involved in all claims. The Inspector General also noted that NADE had submitted its thoughts on supporting SDM authority.





Past-President Tom Ward, President Jennifer Nottingham, Past-President Todd Deshong, and President-Elect Jeff Price (right) gather to honor Membership Director Donnie Hayes.

NADE Honors Donnie Hayes

by Jeff Price, President-Elect

In the land that is the birthplace of baseball great Mickey Mantle, NADE honored one of its own All Stars with special recognition during the recently concluded National Conference in Oklahoma City. NADE surprised long-time NADE Board Member Donnie Hayes with special recognition for his many years of service and many contributions to the organization. Donnie retired from the North Carolina DDS on June 30th, ending a career that began in 1979 as a Disability Examiner Trainee and, after stops along the way that included Quality Assurance, Unit Case Consultant and Disability Hearing Officer, ended with his service as Supervisor of the Disability Hearings Unit and member of the NC DDS Executive Management Team.

At the DDS and in NADE, Donnie established a record of service as a true leader dedicated to NADE's mission. A member since 1979, Donnie has served his local Chapter (THADE), the Southeast Region and the National Association in a variety of leadership positions, keeping one thought as his primary goal – to set a standard of service that others would want to strive to equal. Donnie served on the National Board in 2001-2002 as NADE's Constitution & Bylaws Chairperson and he returned to the Board in 2005 as Southeast Regional Director. Donnie served in that capacity until 2009 when he agreed to serve as NADE's Membership Director. Donnie continues to serve in that capacity through present day. In addition to serving as Membership Director, in 2011 he also agreed to accept the responsibility to serve as NADE's Constitution and Bylaws Chairperson, holding both positions jointly.

For his tireless efforts on behalf of the disability program, Donnie has received many awards from NADE, from the NC DDS and from SSA. He will mostly be remembered for the awards he has received for his humanitarian service to the NADE community, to the DDS community and to the worldwide community at large. In striving to help others, Donnie has proven to be the kind of person we all hope we can be. Truly, that is the highest level of respect and admiration that can be said of anyone.

In recognition of Donnie's retirement from the DDS, NADE surprised him with a special plaque that was presented to him during the National Conference in Oklahoma City. Outgoing NADE President Todd DeShong, incoming NADE President Jennifer Nottingham, and Past NADE Presidents Jeff Price and Tom Ward were on hand to participate in the special recognition ceremony. NADE members attending the conference signaled their concurrence with the recognition by giving Donnie a standing ovation. Thanks Donnie, for your many years of valued service to NADE!

Awards

The Charles O. Blalock Award

The **CHARLES O. BLALOCK AWARD** is given in recognition of an individual who has made extended efforts and major contributions toward the organizational advancement of NADE.



Leola Evans accepting the **Charles O. Blalock Award** for **Allison Toy** of South Carolina.

This year's honoree has been a DDS employee since September of 2003, and a member of NADE since March of 2006. She is in her second year as regional NADE membership chair, and serves as secretary for her local chapter. She has previously served as local chapter president, and during her tenure as president, assisted in organizing a regional conference. This nominee has been instrumental in helping ensure that the income from that regional conference has been put to excellent use, through charitable donations and providing assistance to NADE members impacted by natural disasters.

This individual is described as being on the forefront of local chapter fundraising efforts, and consistently makes significant contributions to the organization and implementation of these events, doing anything from hanging promotional signs to dishing up ice cream. These fundraisers have helped provide meals to children who would otherwise go without, support local organizations that provide service animals to the disabled, and even assisted the Make-a-Wish Foundation construct an art studio for a disabled child. In addition to taking a leadership role in these charitable activities, this honoree continues to actively advocate for the benefits of NADE membership to new and established DDS employees, and has given multiple presentations to DDS staff to promote the opportunities for enrichment that NADE membership brings.

In thanks for her extensive service to NADE, in recognition of her her committed service and leadership within NADE, the state organization, the state DDS, and the disabled citizens of her community, and in honor of her ability to always see the potential for positive change even in the most challenging of circumstances, we are pleased to present the **CHARLES O. BLALOCK** award to **ALLISON TOY** of South Carolina.

The NADE Award

The **NADE AWARD** honors and recognizes the disability professional of the year who has made outstanding contributions not only to the service of the claimant, but also has contributed substantially of his time and talent to promote harmonious and more effective working relationships among his immediate professional community.



Fred D. Ferguson of North Carolina was unable to attend the conference but submitted a picture, accepting the **NADE Award**.

The 2013 recipient of the NADE award began his career with the DDS as a Disability Determination Specialist Trainee in 1997, and has been working as a Quality Assurance Analyst since 2002. In his role as a Quality Assurance Analyst, he is well-versed in policies and procedures, and uses QA process as an educational tool, providing constructive feedback and consistently praising the positive work done by other examiners. He also takes on duties that exceed those expected of a QA Analyst, including assisting with recruiting trips to college campuses, assisting the training department with ongoing staff education, and actively promoting and ensuring training in the critical points and principles of Process Unification.

This honoree is his office's go-to person for childhood disability claims, and his extensive research and knowledge of the policies and regulations pertaining to these claims has led to his recognition as an expert on the subject. He is frequently called upon to provide advice to adjudicative staff during case development, and has taken the initiative to compile statistical data related to childhood claims processing in order to identify potential training and development needs. He has also applied this sort of attention to detail and analytical ability to failure to cooperate claims, providing insights which

led to changes in how these claims are processed. He has participated in the roll-out of eCAT, ongoing training in strategies for effective communication with claimants, and mentorship and leadership to trainees as they transition into case processing units.

In addition to his commitment to accurate and quality work, this individual is committed to personal service to his coworkers. He has been an active member of his office's Wellness Committee, which advocates for the health and wellbeing of staff. He has served as the Chairperson for the Employee Appreciation committee in 2012, organizing events and activities to promote morale within the office, and has volunteered his services as Master of Ceremonies for a DDS talent show. He is an active NADE member because he recognizes the value of belonging to an organization that represents and advocates for the art and science of disability evaluation and the professionals who perform these evaluations. He has assumed leadership roles within the local NADE chapter, and has remained committed to supporting the efforts of the national leadership of NADE in their work to enhance public recognition of the role of the disability professional.

Given his exceptional performance, his commitment to professionalism, his dedication to service, and his active role in encouraging others to share in his exceptional commitment and dedication, we are proud to present the **NADE AWARD** to **FRED D. FERGUSON** of North Carolina.

The Director's Award

The **DIRECTORS AWARD** honors and recognizes an outstanding member of the support staff who demonstrates work performance efficiency and characteristics which contribute to the operation of the unit and the morale of coworkers.

This year's honoree began her DDS career in 10/1992. As a highly efficient and consistently helpful employee, she was promoted to the CE unit in 11/1998 and has since been promoted to a Billing Specialist II. She consistently demonstrates a positive attitude, strong work ethic, and a commitment to timeliness in her work. She has forged strong working relationships with many CE providers due to her positive outlook, friendliness, and good will, and frequently receives compliments from these providers for being such a pleasure to work with. Her exemplary performance has led to her serving as a trainer for those promoted to Billing Specialist positions.

In addition to her assigned duties, she contributes to the office staff by serving on numerous committees and workgroups over the years. She works diligently on office committees which handle the Christmas party, birthday luncheons, and disability professional's week. These activities are integral to the office to help boost morale and maintain strong inter-office relationships. Her creative and caring personality is well suited for this role. More recently her vast experience in the CE unit has been put to use in developing a state-wide CE scheduling process. As the state moved towards a new process of scheduling exams across all offices, her knowledge base and skill set were invaluable in brainstorming & gathering new ideas. During frequent conference calls, ideas & thoughts would be discussed, often with varying opinions, but our nominee always exuded professionalism and thoughtfulness. As a result of the new process, the 5 office CE Units can now provide back-up for each other which help with timely decisions across the state. This new process would not have gone as smoothly without her immeasurable contributions and leadership.

This individual has also been an active participant in NADE since 1994. She has enthusiastically assisted in membership drives, state conferences and team member for Relay for Life. She has held several positions including Board Member at Large 2008-2011, Correspondence member 2006-2007, and Secretary and Treasurer many times over the years. Her success is further demonstrated by the receipt of several awards including the Regional Commissioner Citation in 2002, VR Mission Champion in 2005 & 2009, and MADE Director's Award in 2001 & 2004. Any time a NADE project is developing, this nominee is always present offering assistance, whether it's handling the Registration table, collecting the money for a fundraiser, or soliciting for guest speakers to educate members.

In recognition of this recipient's commitment to the NADE and her state agency and promotion of efficient and exemplary work in both, we are pleased to present the **DIRECTOR'S AWARD** to **SHERRY SISSOM** of Missouri.



Sherry Sissom of Missouri was unable to attend the conference but submitted a picture, accepting the **Director's Award**.

Awards

The Earl B. Thomas Award

The **EARL B. THOMAS AWARD** is presented annually in the name of a charter member of NADE who actively supported NADE as an association of disability professionals.



Mary Gabriel of Oregon was unable to attend the conference but submitted a picture.

This year's honoree supports and participates in every activity presented by her active chapter, encouraging others with her warm, welcoming, and funny personality and willingness to represent her chapter and NADE in a passionate, inviting way. She dedicates time and space to all training offerings and fundraising activities, and has worked closely with the local Chapter President to develop regular training opportunities designed to enhance staff understanding of complicated medical conditions. She promotes NADE membership at every opportunity, and can be seen wearing her chapter's Tshirt at all of their most popular membership promotions. She has ensured that training time is provided in lieu of other paid leave for all National Conferences, and has worked hard to obtain funding to send local members to National Conferences. She regularly communicates her support and encouragement of the staff, and has been featured in the chapter newsletter as a prominent and exemplary member of NADE.

We are pleased to present this year's **EARL B. THOMAS AWARD** to **MARY GABRIEL** of Oregon.

The Frank Barclay Award

The **FRANK BARCLAY AWARD** recognizes an individual who has demonstrated exceptional ability to personally, or through the development and promotion of programs, motivate and challenge personal in a disability program and/or in their personal and professional growth.



Marjorie E. Garcia of Oregon was unable to attend the conference but submitted a picture.

The recipient of this year's award is her chapter's current president as well as the 2012-2013 term president elect. She has previously been a member of the West Virginia chapter, and served on the WVADE board in 2007 – 2008. She served on the 2009 NADE National Conference Planning committee, and worked as the facilitator and emcee for the panel on Generational Differences in The Workplace in at the 2009 Pacific Regional Conference. Her local chapter selects conference delegates based on their level of active participation within the chapter, and this individual has been chosen to serve as her chapter's delegate to multiple national and regional conferences.

This honoree has served as the chair for her local chapter's committee for Leadership and Professional Development, working to promote opportunities for staff to be successful in their professional and leadership endeavors. In this role, she has organized and presented training in interpersonal communications with peers and with claimants, promoted continuing educational opportunities, and brought in speakers to educate staff in the attributes that are looked for in career candidates. She has helped coordinate efforts with local non-profit organizations to improve the quality of service given to vulnerable claimants, including the homeless and the mentally ill. She has actively promoted improved efficiency and reduced expenses by giving presentation on avoiding unnecessary CEs by utilizing alternative sources of medical evidence.

We are proud to honor **MARJORIE E. GARCIA** of Oregon's exemplary promotion of the disability program, her local chapter, and the advancement and professional growth of her peers with the **FRANK BARCLAY AWARD**.

**NADE wishes to thank
the following Basic Corporate Member
Iron Data Atlanta, GA**

Awards

The John Gordon Award

The **JOHN GORDON AWARD** is presented to a supervisor in the disability program to honor and recognize superior performance in a supervisory capacity.



Anita Nichols of North Carolina was unable to attend the conference but submitted a picture, accepting the **John Gordon Award**.

This honoree has been a Case Processing Unit supervisor for over 2 years. She excels at taking a hands off approach when possible, but is able to get involved in a diplomatic and supportive way when her help is needed. She has good judgment, excellent priorities, and makes everyone feel welcome in her unit, where she is engaged in the needs and concerns of her unit members. Struggling examiners have been successful in her unit thanks to her support, including positive feedback and personal attention. She encourages examiners' personal and professional growth, listening and providing feedback and support as needed. She uses excellent judgment in her review of cases, and makes constructive suggestions without being demeaning.

This individual promotes healthy morale within her unit by participating in the organization of unit functions to celebrate milestones and achievements. New members are welcomed, members' successes are recognized, and members' birthdays, weddings, and other events are celebrated. She encourages team building activities, and communicates openly with her team members, allowing them to voice their frustrations and ensuring that their concerns are heard and their contributions are valued.

effectively. This individual maintains excellent working relationships with other members of the agency, and is well-respected and admired for her dedication, effective management style, and exceptional customer service. She is an inspiration to her unit members, and encourages them toward excellence with her support and guidance.

Her unit has consistently low caseloads and excellent QA ratings, thanks to her ability to anticipate and address problems before they arise. Her unit has been able to support the Agency in meeting its goals by taking on additional workloads and managing backlogs

In thanks for her outstanding leadership and dedication, we are pleased to present the **JOHN GORDON AWARD** to **ANITA NICHOLS** of North Carolina.

Marty Blum Rookie Of The Year Award

The **MARTY BLUM ROOKIE OF THE YEAR AWARD** is given annually in honor and recognition of a disability professional who has made a significant contribution on a local, regional, or national level, and who has been a member of NADE for less than 2 years at time of nomination.



Donna Bradshaw accepting the **Rookie Of The Year Award** for **Mieka Powell**.

The 2013 recipient of this honor has been a disability professional since 6/2006, and has been a NADE member since 3/2012. In that time, she has assisted in the planning and organization of chapter activities including National Disability Professionals Week events, training events, membership drives, and fundraisers. She has independently organized fundraising events, and has served as President Elect and President of her chapter, with a commitment to continue in this leadership role through 2015. Her attention to detail and organization has increased the productivity of chapter meetings, and involvement and attendance has increased as a result. She has mentored new employees, worked to plan and organize holiday events with the office, helps plan and orchestrate "Bring Your Child to Work" Day activities, and participated in the development and implementation of a QA "kudos" bulletin, designed to highlight the outstanding work and accomplishments seen in end-of-line reviews.

We are proud to honor **MIEKA POWELL** of Missouri with the **2013 MARTY BLUM ROOKIE OF THE YEAR** award.

Awards

The President's Award

The **PRESIDENT'S AWARD** is given in recognition of an outstanding NADE chapter which has enhanced interactions among its professional and community partnerships through outstanding achievement in program innovations and exemplary outreach to community service.



Pacific Regional Director Meggen Gladue accepting the President' Award for the Oregon Association Of Disability Examiners

The chapter receiving this year's President's award is an active chapter that maintains a goal of increasing awareness and understanding of the disability process. Their energies are directed toward improving morale within the DDS and engaging in outreach through charitable activities. In the past year alone, they:

- Had a Halloween Costume contest, which both encouraged fun in the office and served as a fundraiser for the local county's Domestic Violence Shelter for Women and Children
- Sponsored "Wear Pink Day" in breast cancer awareness month, accepting donations for pink bracelets and donating proceeds to the Susan B. Komen Foundation
- Donated 2650 lbs of food to the local food bank through their annual food drive
- Sponsored a photo contest, which improved morale through participation as well as beautification of their work site, and also served as a fundraiser which allowed the donation of an additional 535lbs of food
- Actively promoted awareness during Organ Donation Month, including a presentation from a multiple-organ transplant recipient

The chapter also sponsors monthly free coffee days, provides in-house training in medical and psychological conditions as well as professional development topics, and, as part of their annual National Disability Professionals Week activities, hosts a picnic and chili cook-off and pet food drive for their local humane shelter.

Despite being active on the home front, the local chapter also lends the talent of their members to both regional boards, and national committees. The chapter is dedicated to professionalism and quality in adjudication, and works to promote these ideals through training and service. It is because of this work that we are pleased to honor the excellent efforts of the **OREGON ASSOCIATION OF DISABILITY EXAMINERS** with the **2013 PRESIDENT'S AWARD**.

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Our membership base includes members that represent a broad perspective of interests regarding the Social Security and Supplemental Security Income (SSI) disability programs.

Conference Coverage

Autism: A Perspective on the Spectrum

by Jennifer Maxson, Ohio DDS

DR. DIANA MOBLEY FROM THE Autism Society began the Wednesday afternoon session with an insightful and informative lecture on autism. Those with autism have deficits in the following areas: communication, social relationships, flexibility/adaptability, and executive functioning. She gave several examples of each category. In terms of communication, the individual lacks the appreciation of non-verbal social cues and tends to be overly concrete. Examples of deficits in social relationships include an inability to cope with social anxiety and to comprehend the concept of personal space. Flexibility/adaptability problems include seeing the world simply in black and white without an appreciation for any gray areas and a lack of tolerance for deviations in their routine. Finally, executive functioning problems such as failure to manage time and failure to initiate actions also affect those with autism.

Dr. Mobley then moved on to discuss the challenges of determining if someone with autism is able to live independently vs. having a guardian. She mentioned areas such as money management, self-advocacy skills, managing personal hygiene, and maintaining personal safety as benchmarks for independent living. Of particular importance to the DDS are the specific employment limitations these folks face. The list is lengthy and includes sensory challenges, inability to work as part of a team, difficulty completing tasks on time, lack of problem solving skills, and a deficiency in tolerating routine and/or mundane work tasks. She emphasized that often, individuals with autism can successfully complete a task of interest but have great difficulty when the task does not interest them. For example, she mentioned a client who could play video games for hours but "didn't have time" to take out the trash.

As we evaluate claims with autism as an allegation it is important to remember that the challenges these claimants face are vast and numerous. We must consider how this condition affects all aspects of their lives before we render a determination.



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Conference Coverage

**"Does My Mechanical Heart
Need An Oil Change?"***by Bonnie Young, Missouri DDS, St. Louis*

DOUG HORSTMANSHOF, MD (who goes by Dr. Doug) gave an informative presentation on heart failure at this year's National NADE Training Conference in Oklahoma City. There are two categories of heart failure: Diastolic, which includes diabetes and hypertension, and systolic, which includes coronary artery disease, MI, and hypertension. With diastolic heart failure, there is first a stiffening of the heart that occurs, followed by a weakening of the heart. Systolic heart failure is more a valvular disease, and it can be congenital or viral.

Heart failure is a wicked, nasty disease. It is a collection of symptoms (or syndrome) that can result from any structural or functional cardiac disorder that impairs the ability of the ventricle to fill with or eject blood. Symptoms of heart failure include shortness of breath, fluid retention (edema), and fatigue. Heart failure is just not "heart disease." It can affect other body systems, with the cycle ultimately ending in death. There has been improvement over the years with the treatment for heart failure. Well over a million people were discharged after being treated for heart failure from the hospital in 2006, which is up from 877,000 in 1996. 10% of males age 70 will develop heart failure, while 7-8% of females age 70 will develop heart failure. 20% of those age 90 will develop heart failure. Of 2,400 patients who had one hospitalization for heart failure, 21% were still alive 5 years later. By the time heart failure has progressed to the need for hospitalization, the patient is at a critical point.

Heart failure can be treated, but you must first identify the reversible causes, such as coronary artery disease, a thyroid problem, or iron storage. The goal of treatment is to provide the most number of days of the best quality of life possible while taking as little risk as necessary to achieve this. Dr. Doug presented his treatment model as a "heart failure toolbox". The treatment was divided into four different "drawers" in the toolbox. These were lifestyle, medications, electrical therapies and "fancy stuff", such as transplants.

Non-pharmacologic interventions can be found in the lifestyle drawer. These are things such as reducing salt intake, moderating fluid intake, discontinuing harmful habits (alcohol, tobacco), physical activity, taking daily weights, and screening for depression and sleep apnea. In the medications drawer, you will find such things as digitalis and diuretics. These help improve a patient's symptoms, but not the survival rate.

Electrical therapies can help improve the quality of life. A defibrillator is used when a patient has an ejection fraction which persists at less than 35%, and has a NYHA Class of II or III. The patient can have a reasonable expectation of a good quality life for at least a year. Pacemaker/ICD is used when the ejection fraction is 35% and the patient is a NYHA class of III or IV. The clinical course of heart failure is unpredictable. The last stage of heart failure is wasting syndrome where the patient has severe exercise intolerance.

The last "drawer" of treatment contains heart transplants and LVADs. At this stage, the patient is NYHA Class IV. Before one takes the course of this type of advance therapy, there are 3 questions the patient must ask him/herself: 1) Is it time to do this? 2) Is it right for me? 3) What is my personalized chance of success? An LVAD (Left Ventricular Assist Device) is a bridge to a heart transplant. The Heart Mate II is an LVAD model that is available. The longest living surviving patient who has undergone this type of treatment has lived an additional eight years. The patient's NYHA functional class did improve after placement of this device. If a patient does decide to proceed with a heart transplant, and if they survive the first year following the transplant, there is an 80% survival rate. Dr. Doug ended his presentation saying that heart failure is a lethal, progressive, debilitating disease that often results in disability.

*Doug Horstmanshof, MD***Certification Updates**

Newly Certified		
Sharon E. Bland-Brade	Michigan	Aug 2016
Recently Recertified		
Patricia Chaplin	Missouri	Aug 2016

Conference Coverage



MS: A Medical Consultant and Physician Analysis

by Laura Stewart, Kansas DDS

National Training Conference attendees were honored to have presentations by Dr. Gabriel Pardo, a neurologist and ophthalmologist, and Dr. Mungul, a medical consultant at the DDS, about Multiple Sclerosis (MS). 2.1 million people have MS worldwide and there are 200 new cases diagnosed per week.

The disease is predominantly diagnosed in females, at a ratio of 3:1. The average age at diagnosis is 30 years old and it's the most common neurological diagnosis in young adults. MS is chronic and immune-mediated with variable course and different types. There are four clinical types: Relapsing/Remitting which comprises 80-85% of patients, Primary Progressive which is more mild, and the course worsens but there is no history of acute event; Secondary Progressive which has a relapsing/remitting course but leads to progressive disease; and Progressive Relapsing which accounts for less than 5% of patients and starts as primary progressive and then there's a relapse. MS is caused when your T cells are exposed to something that causes an abnormal immune response, causing the T cells to attack nerve cells and myelin. At the first acute event, patients have an average of 10-15 brain lesions and have been having problems but they weren't recognized. Symptoms include: sensory problems, motor difficulty, optic neuritis, diplopia, vertigo, ataxia, cognitive deficits, pain, sexual dysfunction, spasticity, and fatigue, which is the most common complaint.

Dr. Mungal, along with being a medical consultant for DDS, also has MS. She discussed symptoms to understand and look for in our claimants. Patients can have problems with loss of sensation, which makes things such as holding a glass or walking very difficult. Fatigue isn't simply being tired, but it may be the need for long breaks or naps after simple activities. Fevers or heat will cause the course to exacerbate which can make summer the worst time for patients. One of the biggest problems for MS patients is they never know how they will feel from day to day. One day they could be doing fine but the next day they may not be able to do much. Along with the physical and cognitive aspects, having MS can be an emotional roller-coaster which should also be taken into consideration when adjudicating claims. She reminded us to review the MS POMS guide: DI 24580.015.

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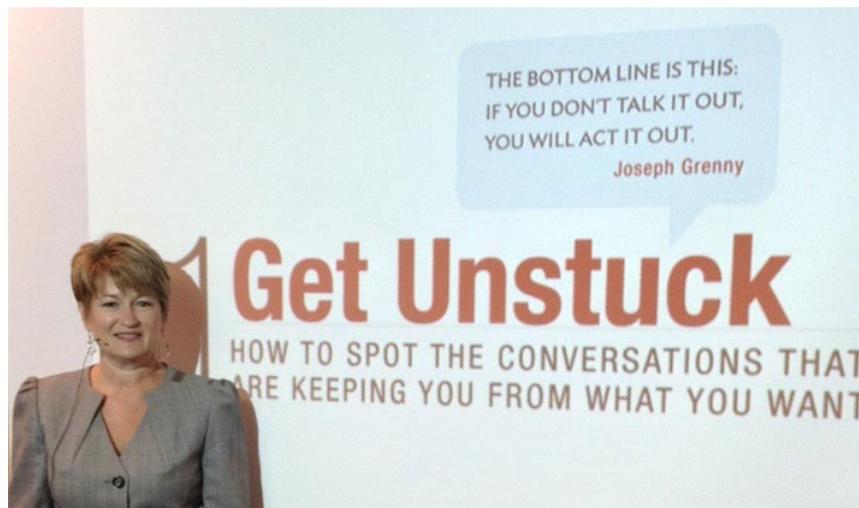
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Conference Coverage

Crucial Conversations: How to Get Unstuck

by Karen Beyer, OlyWADE (Olympia Washington)

DAY 2 OF THE NADE 2013 National Conference included an informative presentation titled, "Did I Say What You Think I Said?: Critical Interactions/Communication," that was presented by Nancy Hurst, a Human Resource Programs Manager with the Oklahoma Department of Rehabilitation. Ms. Hurst provided the NADE membership with information regarding how to get the results you want by holding Crucial Conversations. The Law of Crucial Conversations is, "Anytime you find yourself stuck, there's a crucial conversation you're either not holding or not holding well."



Holding a crucial conversation allows you to get what you want to happen to actually happen. If results and relationships are suffering, you need to initiate a crucial conversation, and to do so you need to focus on what you really want for yourself, what you want for the other person, what you want for your relationship, and the desired goal for the organization. We learned that what makes a conversation crucial is that it contains three key elements: High stakes, opposing opinions, and strong emotions. We also learned about the "Pool of Shared Meaning," which contains the facts, experiences, opinions, and feelings held by the participants in a conversation that are understood and appreciated by all. The reason others get defensive with us is not because we lack the right skills, but because we have the wrong motives. By changing what we want we can change how we act. The key is to start with the heart, and stay focused on what we really want. Progress is achieved by clarifying the contents of the pool of shared meaning so that each person understands where the other person is coming from, and then committing to seek a mutual purpose. Holding a crucial conversation allows us to look for something that each person can agree on so that new strategies can be developed to move to action that results in solving the problem and achieving the goal.



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Conference Coverage

Assessing Pain as a Limitation

by Rodney Roth, Illinois IADE



ON THE SECOND DAY OF the NADE 2013 National Conference Gregory D. McCormack, M.D. from the Office of Medical & Vocational Expertise (OMVE) gave an IVT presentation on the Medical Aspects of Pain in Disability Evaluation. He began by informing us about the definition of pain, which is "a more or less localized sensation of discomfort, distress or agony, resulting from the stimulation of specialized nerve endings" (Dorland's Medical Dictionary).

Pain is an unpleasant sensory and emotional experience that is associated with actual or potential tissue damage. It is sensed where the tissue injury is located, and the degree of pain generally "matches" that of the severity of the stimulus causing pain. This is referred to as nociception. Nociceptive pain is caused when special nerve endings - called nociceptors - are irritated. This is the type of pain you feel when you burn yourself, twist your ankle, or stub your toe. It is a dull or sharp aching pain, and it can be mild to severe. This type of pain can usually be controlled, and usually responds well to pain medications, anti-inflammatory agents or other drug therapies, but does not usually respond well to neurostimulation. Nociceptive pain can be temporary or can also become a chronic condition.

Dr. McCormack went on to discuss the steps in nociception, which include transduction, transmission, perception, and modulation. He went into more detailed discussion about fibromyalgia and SSR 12-2p which describes the evidence needed to establish fibromyalgia as a medically determinable impairment. He also discussed myofascial pain syndrome and neuropathic pain. We learned about various analgesics used for chronic pain, and that for patients with severe chronic pain that is having an adverse impact on their function or quality of life, opioid pain medications may be more effective. Dr. McCormack's knowledge of the Social Security Disability programs was evident as he went on to describe how disability examiners need to assess symptoms when evaluating pain conditions, how to determine whether or not the medical evidence substantiates the person's pain complaints, and the related psychological manifestations that often exist with persons living with chronic pain. Dr. McCormack concluded his presentation with a discussion regarding assessing chronic fatigue syndrome. For an in-depth review of his material, please access the SSA VOD/IVT.



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Conference Coverage

Substance Abuse and Mental Health

by Kimberly Underwood, Missouri DDS

IN THE TRAINING SESSION ENTITLED The Effectiveness of Substance Abuse Addiction Treatment and the Mental Health Delivery System, by Terry Cline, Ph.D., conference attendees were presented statistical information on substance abuse, mental health treatment, and other aspects of health care that affect Americans.



Terry Cline, Ph.D. discusses substance abuse, mental health treatment, and other aspects of health care that affect Americans.

To begin the presentation, Dr. Cline gave statistical information about overall health. He cited multiple determinants of health and their contribution to premature death, the largest of which is the behavioral patterns of the individual, which account for 40% of an individual's overall health. Other determinants include genetic disposition, social circumstances, health care, and environmental exposure. Of the behavioral determinants, smoking, binge drinking, obesity, and a sedentary lifestyle were the most common obstacles to a healthy lifestyle.

Substance abuse is a growing concern for Oklahoma and many other states. Substance Abuse is defined as conditions resulting from the inappropriate use of alcohol, prescription drugs, and/or illegal drugs. There is a higher use of prescription drug misuse than any other illegal drug. In Oklahoma alone there are between 600-700 deaths per year due to prescription drugs, which is actually more than deaths caused by automobile accidents.

Treatment for substance abuse has been proven cost effective. Dr. Cline cited a study showing that for every dollar invested in addiction treatment program there is between \$4 and \$7 in reduced drug-related crime, criminal justice costs, and theft. Treatment for substance abuse is as effective as treatment for any other chronic disease, such as asthma or diabetes. Dr. Cline noted relapse rates for people receiving substance abuse treatment are lower than for persons with other chronic diseases like hypertension or asthma. He equated a relapse of addiction treatment to a person who has hypertension and stops taking their medications when they start feeling better.

The biggest downfall to receiving treatment is the lack of facilities and treating physicians available. Currently, almost 90% of people who need substance abuse treatment do not receive care. Substance addiction frequently occurs in conjunction with other mental disorders. Six out of ten people with a substance addiction disorder also suffer from other mental illnesses. Many individuals with mental impairments do not seek treatment and often, when they do, they are met with the same obstacles of lack of treating physicians and facilities. Finances are also cited as a major obstacle to receiving care, with 45% of adults stating they are unable to afford the cost of care.

There is a push to provide integrated care for persons with mental impairments and substance abuse. This would provide care for all aspects of their health and start with the PCP. Studies show emergency room visits were 42% lower for patients receiving integrated care. Treatment access is improved with new technologies such as Telepsychiatry which uses video conferencing to provide psychiatric treatment; it has been shown to be as effective as face-to-face psychiatry sessions. Dr. Cline noted statistics of "telehealth" for Oklahoma which included a savings of 2.4 million dollars, and 78,300 services offered via telehealth.

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Conference Coverage

Proton Therapy for Patients with Cancer

by Ellen Cook, Illinois DDS

EVERYONE IS FAMILIAR WITH RADIATION (x-ray) therapy in the treatment of cancer. It is used to target the small arms or tentacles of tumors that cannot be easily removed with surgery. It is also well known that there are problems with radiation treatment damaging surrounding normal tissue and organs. This damage can cause life threatening complications later in life. For example, a fair number of patients who receive radiation for lung cancer develop breast cancer years later. Researchers like Andrew L. Chang, M.D. of the Integris Cancer Institute of Oklahoma are working with a new type of radiation therapy which should cause far less damage to normal cells. This therapy is Proton Therapy.

Regular radiation loses energy as it goes deeper into the body. So if you want to deliver 50 rads, for example, to a tumor, you have to start out with 75 rads at the skin level. This causes much damage to the tissue between the source and the tumor. Some relief from the damage has been achieved by delivering the radiation at varying angles to the cancer so it goes through different tissue each time a treatment is given.

Proton radiation has several unique qualities which make it a superior form of radiation therapy. First, it gets stronger as it gets farther from the source. Thus, the tumor gets more radiation than the tissues closer to the skin. Also the protons can be controlled so that the energy stops at the far edge of the tumor. Regular radiation continues on through the body to the opposite side without stopping. Proton therapy uses lower dosages so tumors can be treated more completely without reaching the "lifetime dose" of radiation. Once a patient has reached their lifetime dose, they can never be treated with radiation again - even if they develop a new cancer.

This new therapy is ideal for brain tumors, prostate cancer, breast cancer, lung cancer, Hodgkin's Lymphoma, and childhood cancers. Children benefit from not having other structures damaged because those structures will stop growing and developing. One example given by Dr. Chang was that of a child where a minor surgery was done to temporarily displace part of the intestine using a breast implant so the protons could reach the tumor without damaging the growing, developing intestines.

This therapy is new and not yet widely available. There are only 12 centers in the U.S. offering Proton Therapy. This therapy is expected to grow in availability as more research data becomes available to show the benefits.

Information taken from a presentation by Andrew L. Chang, M.D. at the National Training Conference in Oklahoma City, OK. 8/21/2013



Andrew L. Chang, M.D. of the Integris Cancer Institute of Oklahoma explains proton therapy.

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Newsletter and Photo Awards



First place Large Chapter Newsletter. **MADE Lansing** (Michigan). Brenda Hairston is accepting on behalf of MADE.



Frist place Medium Chapter Newsletter **TADE** (Tennessee). Daniel Carr is accepting on behalf of TADE.



Second Place Medium Chapter Newsletter **ORADE** (Oregon). Pacific Regional Director Meggen Gladue is accepting on behalf of ORADE.



Photo Competition - **MADE Lansing** (Michigan) First Place. Brenda Hairston is accepting on behalf of MADE.



Photo Competition - **OKADE** (Oklahoma) Second Place. Billie Thomas is accepting on behalf of OKADE.

Awards

National Disability Professionals Week Awards



*NDPW - **THADE** (North Carolina)
Large Chapter, First Place. Thomas
Gautier accepting on behalf of THADE.*



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Small Chapter, First Place.
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*NDPW - **NeADE** (Nebraska)
Small Chapter, Second Place.
NADE Treasurer and Legislative Director
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Conference Photos

The President's Reception



Conference Photos

Opening Ceremonies



Conference Photos

Lunch Between Sessions At The OKC DDS
Dining on Persimmon Hill
The National Cowboy Museum



Conference Photos

Tuesday Night on the River



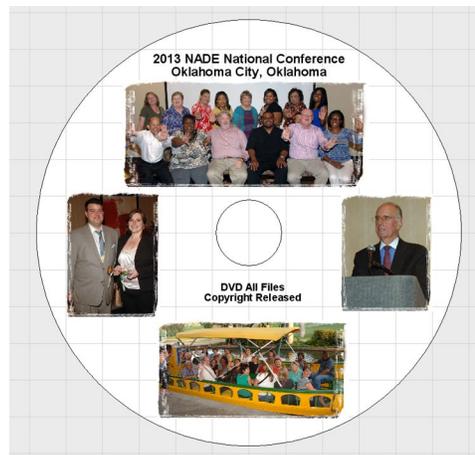
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Change Of Information Form For: (Name) _____

Name _____

Professional Designation _____

Address _____

City _____ State _____ Zip _____

*Local Chapter # _____ Daytime Phone (_____) _____

Email Address _____ @ssa.gov

Other: _____

NATIONAL ASSOCIATION OF DISABILITY EXAMINERS
PO Box 105763
Jefferson City, MO 65110
Address Service Requested

The members of OKADE's conference planning committee did an amazing job of keeping this conference 'Moving Forward!' as they demonstrate in this photo.



Attention All NADE Award Winners

If you would like to be featured in the next Advocate, send a photo of you with your award to NADE.communications@gmail.com

Congratulations to all NADE award recipients!



Rodney Roth, winner of the NADE Great Lakes President's Award.



Susan Vlahos, winner of the NADE Southeast Regional Supervisor Award.