
the **NADE** **ADVOCATE**



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**WRITTEN TESTIMONY
Of The
NATIONAL ASSOCIATION OF DISABILITY EXAMINERS**

Chuck Schimmels, President

Prepared For

U. S. Senate Finance Committee

**Hearing on
Funding Social Security Administrative Costs:
Will the Budget Meet the Mission?**

May 23, 2007

CHAIRMAN MAX BAUCUS AND MEMBERS of the Committee, my name is Chuck Schimmels and I represent the National Association of Disability Examiners (NADE). I have been a NADE member and worked for the state Disability Determination Services for 13 years. I am pleased to have the opportunity to submit this testimony to the committee.

NADE is a professional association whose purpose is to promote the art and science of disability evaluation. The majority of our members work in the state Disability Determination Service (DDS) agencies adjudicating claims for Social Security and/or Supplemental Security Income (SSI) disability benefits. In addition, our membership also includes SSA Central Office personnel, attorneys, physicians, and claimant advocates. It is the diversity of our membership, combined with our extensive program knowledge and "hands on" experience, which enables NADE to offer a perspective on disability issues that, is both unique and which reflects a programmatic realism.

NADE members – throughout the state DDSs, Regional Office(s), SSA Headquarters, OHA offices and the private sector - are deeply concerned about the integrity and efficiency of both the Social Security and the SSI disability programs. Simply stated, we believe that those who are entitled to disability benefits under the law should receive them; those who are not, should not. We also believe decisions should be reached in a timely, efficient and equitable manner. We believe this is part of the fundamental mission of SSA and the state DDSs – to provide the American public with compassionate and timely service. Unfortunately both SSA and the state DDSs are finding it increasingly more and more difficult to perform its mission given the significant funding reductions experienced by SSA and the DDSs over the past five years.

Along with the reductions in funding, SSA has been asked not only to manage an increasing workload with fewer staff but also to perform Congressional mandated responsibilities outside of its core mission, such as supporting the Medicare prescription drug program and assisting with verifications of immigration status, with no additional resources or staffing. In the disability process, there has been a burgeoning growth of

Budget, Continued on page 4

IN THIS ISSUE:

Correspondence	p. 9
Nat'l Conference Registration	p. 13
"It's The People"	p. 17
Positive Attitude	p. 21
The History of NADE	p. 24

President's Message

IN WHAT IS MY LAST Presidential address, I want to start by saying a big THANK YOU to all of you as members for a wonderful year of success for NADE.



I was able to participate in all of the NADE regional training conferences this year and can say with confidence that those in attendance experienced tremendous learning opportunities with excellent medical and program sessions, as well as sharing of best practices and learning from other participants. As I interacted with and watched others interact with the medical experts, SSA speakers and other disability professionals from across the country, I was very impressed by the dedication of the NADE membership and the commitment to the disability program.

I appreciate all of the support the DDS administrators have given to the NADE training conferences and, in particular, want to thank those who supported hosting regional or national training conferences in their states.

This year's national training conference will be held September 17-20, 2007, in Sioux Falls, SD. The South Dakota chapter has been planning the conference for several years and their agenda is "jam-packed" with an excellent mix of medical and programmatic training sessions. We are pleased that several top SSA officials will be participating in the conference, including the Commissioner, Michael J. Astrue. The agenda and registration information is currently available from NADE's web site at: www.nade.org and is also published in this issue of the Advocate.

I also had the opportunity to represent NADE by testifying before the Senate Finance Committee and NADE provided a statement for the record for the House Ways and Means committee. NADE has also written several letters to the members of the Congressional budget and appropriations committees regarding the need for adequate resources and funding for the disability program, as well as encouraging dedicated funding for CDRs.

At the request of Kelly Croft, SSA's Chief Quality officer, several NADE Board members have visited a number of SSA regional offices and met and talked to staff from OQP's disability quality branches about NADE as a professional association that represents all those involved in the Social Security disability program, not just the DDSs. I am pleased to report that these meetings went well and there were a lot of questions and interest in what NADE does expressed by the SSA staff.

NADE is a totally volunteer organization and depends on its members to serve as the voice in on-going policy discussions that determine how the disability program operates currently and in the future. NADE is well respected and widely recognized for its expertise and our input is sought frequently on issues pertinent to the disability claims process. So, thank you for your support and your voice in NADE.

I look forward to seeing all of you in Sioux Falls and hope you can join me and the rest of the NADE family as we learn, share and celebrate another year of success.

Sincerely,

Chuck Schimmels

NADE President



Chuck "sweetens" up the audience at the SW/Great Plains regional conference.

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 published in **Fall, 2007**.

All correspondence should be directed through your Regional representative or NADE editor by

October 15, 2007.

You may e-mail articles in text format to drhilton@suddenlink.net. Please also forward a hard copy.



SSA Commissioner Michael Astrue took time in March to meet with NADE Executive officers. From left: Barbara Styles (President-elect), Chuck Schimmels (NADE President), Commissioner Astrue, Shari Bratt (Past President) and Mimi Wirtanen (Legislative Director).

The NADE editor apologizes for omitting Ms. Wirtanen's name from the photo in the Spring issue of the Advocate.

Electronic notification of the Advocate offers the advantages of color photos and graphics, faster delivery, website links, etc. As mailing expenses continue to rise, this is an excellent way to help NADE save money.

Contact the NADE Publications Director Donna Hilton to change your paper copy into a color electronic copy!

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Silver Corporate Member

Welcome to the Board!

Please join me in welcoming our newest board member. Tami McIntyre officially took over as the Mid Atlantic Regional Director on May 21 to fill the vacancy left by Danelle Bradshaw.

Tami has worked with the Richmond VA DDS since 2001. She has worked as a hearing officer for Medicaid, a case manager for the mentally ill population and as a social worker in a woman's shelter. Tami is a 1996 graduate of Lesley University in Boston, MA. She is married and has a 3 year old St. Bernard dog named Gulliver.

Welcome!
Chuck

Advocate advertising rates are as follows:

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1/3 page	\$75.00	\$50.00 per issue
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Advertising: Contact Donna Hilton 417.678.4001 or Malcolm Stoughtenborough 405.419.2573 .

NADE is an incorporated, nonprofit organization.

NADE CALENDAR OF EVENTS:

Michigan State Training Conference	Hampton Inn	Traverse City, MI	Sept 17, 2007
2007 National Training Conference	Holiday Inn City Centre	Sioux Falls, SD	Sept 15-20, 2007

Will the Budget Meet the Mission?

Continued from page 1

disability applications and growth in the number of individuals receiving disability benefits. The number of disabled workers drawing Social Security Disability Insurance has more than doubled since 1990 from 3 million to 6 ½ million, an increase of 117% and the number of disabled SSI beneficiaries has increased during this same time period by 66%. As baby-boomers age and more and more individuals retire or become disabled, this places a significant strain on already stressed resources just to manage the daily work involved with maintaining benefit levels of more beneficiaries. This poses significant challenges for both SSA and the DDSs as we try to manage this workload.

In addition, both SSA and state DDSs face a retirement wave of experienced staff and a tighter labor force that will make it more difficult and expensive to hire replacements – EVEN if full funding for replacing staff was available. The disability program has become increasingly more complex as new advances in medicine and treatment have allowed individuals with disabilities to live longer and more productive lives and it takes longer for new staff to learn all the complex rules and regulations to be able to process disability cases. The complexity of the program, the changing nature of the program and the sheer volume of claims, coupled with diminishing resources, has brought a significant amount of stress to an already over-burdened system.

Resources

There is no doubt that backlogs in the disability program have increased. This is a direct result of the hard choices that needed to be made by SSA over the past few years to deal with the realities of inadequate budgeting and staffing. If SSA continues to be burdened with inadequate funding, the problem will only exacerbate the already over-strained system. Backlogs are a direct result of inadequate funding and staffing. SSA's administrative budget is only 2% of its overall program, a bargain compared to private industry or other governmental programs. Continuing to under fund SSA's and state DDSs' administrative costs will only increase the disability backlogs and timely service to the public will continue to deteriorate.

For the past five years, the SSA budget has not been what the previous Commissioner of Social Security or the President requested from Congress. The prior Commissioner reported to Congress several times that if the President's proposed budgets for SSA this past five years had been granted, SSA would have been able to eliminate its disability backlogs. The results of years of under-funding has been at the cost of service to the American public who suffer severe disabilities and have to wait long periods of time before their disability case can be processed.

The complexity of the Social Security Disability Program, coupled with the need to produce a huge volume of work, justifies even more the need for adequate resources in order to provide the service that the American public has come to expect and deserves from SSA. It takes at least two years for a disability examiner to

be fully trained and function independently to make timely and high quality disability decisions. It is critical the DDSs be provided with the resources needed to hire and train replacement staff immediately upon staff losses so that further delays in service do not result. Given the complexities of the program and the continuing changes in the nature of disease processes, new technologies and treatment, it is also critical that adequate resources be provided for on-going training to ensure that staffs maintain their highly developed disability evaluation skills to provide continuing quality service to the American public. Unfortunately, low salaries, hiring restrictions and the stress of the job contribute to high turn-over in some DDSs, with a loss of approximately 400 DDS employees nationally in FY 2007 alone and an average 12 percent examiner attrition rate over the years. Given the hiring restrictions and inadequate resources placed on the SSA and DDSs, it is amazing that the disability backlogs are not even higher than they are currently and that the number of claims processed has continued to increase despite inadequate funding and resources. NADE believes this is a positive testament to the dedication of its members to the American public and their pride in providing high quality service despite these hardships.

SSA over the past decade has attempted to redesign the disability claims process in an effort to create new processes that will result in more timely and consistent disability decisions. Results of numerous tests undertaken by SSA to improve the disability process have not produced the results expected. In fact the majority of them have only slowed the processing of claims while employees adjusted to the constant changes. The impact of these changes has also contributed to the inability to manage the high workloads experienced during this time and decreased efficiency of operations as DDSs have struggled to incorporate these changes into their daily case processing.

“Medical costs” is an important budget item unique to the DDS. It includes both Medical Evidence of Record (MER), which consist of reports from the claimant's treating sources, and the cost of Consultative Examinations (CEs). The DDS arranges consultative examinations to obtain additional medical evidence required for adjudication. Medical costs can easily account for a quarter of a DDSs operating budget.

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**National Association of
Disability Representatives, Inc.**

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The payment for MER varies from state to state but averages about \$15 for each report, which is significantly less than the amount paid by insurance companies and others in the private sector for the same service. Given the limited budget in recent years, most state DDSs have been unable to increase the fees. While the majority of doctors, hospitals and clinics are cooperative in providing their records, there are a growing number of sources who refuse to send a response for the fee paid by the DDS. This can result in the DDS not having access to a critical piece of medical evidence and may require that they obtain a more costly consultative examination.

Consultative Examination fees are also considerably lower than the fees paid by other disability benefits programs including workers compensation programs and private disability insurers. While the DDSs currently obtain a good standard examination from our CE sources, the exams are sometimes not thorough enough to fully document a hidden or unusual medical condition. The DDS also arranges for CEs conducted by the treating physician, but most doctors decline the request because of the low fees paid by the DDS.

In the Institute of Medicine's December 2005 report entitled "Improving the Social Security Disability Process – Interim Report", it is recommended that "Reimbursement should be adequate to cover the full costs of consultative examination, which involves more than a standard examination, whether it is focused or comprehensive in scope. This will require a substantial increase in fees over the amounts currently paid in most states." Higher fees would likely increase the pool of medical sources willing to conduct CEs and would provide incentive for more attending physicians to be willing to perform consultative examinations. These improvements in the CE process would be expensive and impossible to implement, even in a limited fashion, with the current DDS budget.

Even if SSA receives the funding increase recommended by the President in Fiscal Year 2008, staffing will be cut due to increases in expenditures in several areas. Rent, salaries, medical evidence, security and benefit costs are totaling more than the annual appropriated funds.

Backlogs

Addressing disability backlogs is a high priority for NADE. As baby boomers are increasingly filing for disability as they age, without sufficient funding and staff to process these workloads, backlogs will continue to increase. However, we think it is important to remember that while there are a large number of cases pending at some DDSs, the most significant delays in the process still occur at the Office of Disability Adjudication and Review (ODAR) where an average claim takes over 500 days, compared to the 84 day average at the DDS. These backlogs create pressure to adjudicate claims quickly without being able to fully develop and give proper attention to analyzing and explaining the disability decisions due to the pressures of dealing with high caseloads and limited resources for processing them. This can often lead to less careful case adjudications. One incorrect allowance can represent a quarter of a million dollars in SSA/Medicare benefits. Delays in case processing make claims more expensive to process, as resources are devoted to dealing with the management of the backlogs instead of working the cases. This results in increased administrative costs over the long run as increasing numbers of staff will be required to manage larger and larger backlogs.

NADE agrees that many people suffer needlessly as a result of these types of backlogs and that individual conditions can worsen or lead to death during waiting time. It is critical that adequate resources be provided to all levels of SSA involved with disability case processing.

As a result of the reduced SSA budgets over the last few years, SSA mandated that initial level disability claims be given top priority. This necessitated other claims, such as reconsiderations and continuing disability reviews (CDRs), not receiving the attention they deserved and resulted in backlogs of these claims at the DDSs. However, it should also be noted that while the DDS's have already disposed over 2 million claims in the FY 2007, the overall receipts have increased and the backlogs have grown by an additional 26,000 cases at the DDSs.

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Will the Budget Meet the Mission?

Continued from page 5

NADE strongly believes that the Single Decision Maker (SDM) process which currently exists in ten states can help to alleviate some of the backlogs at the initial level of case processing. This was the one successful piece of SSA's redesign efforts and it has proven to be one of the most efficient and cost-effective ones. The SDM process has proven to be successful in producing high quality decisions and a time saver when processing claims. NADE believes that SSA should expand the SDM initiative to all states to not only reduce initial case backlogs, but to lower processing times at the initial level.

Continuing Disability Reviews (CDRs)

Limited resources have forced SSA to reduce the number of CDRs performed. Of utmost concern to NADE is the past history of these types of actions and the resultant negative impact as the agency falls behind in these critical reviews. When we experienced a backlog of CDRs previously, it took a great deal of effort by all components of SSA to reach a point where CDR reviews were being conducted as scheduled. It took a significant number of years of dedicated funding solely for the purpose of conducting CDRs before SSA was current with CDR reviews. With decreasing the number of CDR reviews done in the past few years, there is now a real danger that we will once again find ourselves in the position of having backlogs of overdue CDRs.

While there are some increased administrative costs with the performance of CDRs, there is a potential for significant savings in program costs. If a beneficiary is found to no longer be eligible for disability benefits, the estimate is that over \$10 of program funds is saved for every \$1 spent in administrative costs on

conducting CDRs. While NADE agrees that it was necessary to decrease the number of CDRs done over the last couple of years given the current budget situation, this decision has repeatedly been described by many, including the former SSA commissioner, as "penny-wise and pound-foolish". We agree.

It is essential to program integrity that CDR reviews be conducted in a timely manner to ensure that only those who continue to be eligible are receiving disability benefits. NADE's experience has been that the only way to ensure that this happens and that the necessary funds for CDRs don't get transferred to process other SSA workloads is for Congress to provide "dedicated funding" for CDRs. Dedicated funding has shown to be the best means of staying current with the CDR workload. The projected cost savings from dedicated CDR funding from FY 2003 to FY 2006 would be \$1.8 billion over 10 years. NADE encourages this committee to recommend appropriating dedicated funding for CDRs to ensure that this workload gets the attention it deserves.

Electronic Disability Process (eDib)

eDib is still a work in progress and requires ongoing refinements, upgrades and improvements frequently in order to make the system work as efficiently and effectively as possible. The impact on the electronic system as a whole when these changes are made is unpredictable, and currently results in case processing systems slowness or inability to work at all.

Since Disability Determination Services (DDSs) process over 2.5 million cases on an annual basis, any shut down or slow down of the case processing system equates to a significant loss of production capacity.

Continued on next page

Pacific Conference



The National anthem was sung at the Pacific Conference by Dave VanArnam of the Seattle DDDS.



The Pacific conference provided NADE members a chance to network, relax, and enrich their professional knowledge.

Continued attention to eDib is needed to insure that the proper financial support is given to make it successful. NADE believes that eDib at its full implementation may result in a significant reduction in processing time at all levels of adjudication, from the Field Office to the DDS to ODAR and above. Careful and deliberate efforts to ensure the system is operating at full functionality and as efficiently as possible in addition to full funding for necessary changes is critical to ensuring that the anticipated savings in cost and time of a fully electronic case process are realized.

Summary

- Inadequate resources along with increased workloads has not only caused backlogs, but has allowed existing backlogs to increase.
- Disability backlogs are affected by inexperienced staff, hiring restrictions, and implementation of constant program changes.

- Dedicated funding is necessary in order to avoid the costly possibility of having a backlog of overdue CDRs.
- Resources should not be diverted from eDib to implement disability service improvement changes until the eDib system is fully operational. It is critical that necessary refinements be made to the system in order for it to produce the anticipated and desired efficiencies.

Conclusion

NADE believes that the American public wants and deserves to receive timely, compassionate and efficient service from SSA and the state DDSs. Therefore, we request that you approve at least the amount included in the FY 2008 House Budget Resolution, to begin the process of restoring the levels of service that the public deserves from all components of SSA and the state DDSs.

On behalf of the NADE members, I thank you again for the opportunity to submit this testimony to the committee.

Chuck Schimmels

Chuck Schimmels
NADE President



Northeast/MidAtlanticConference

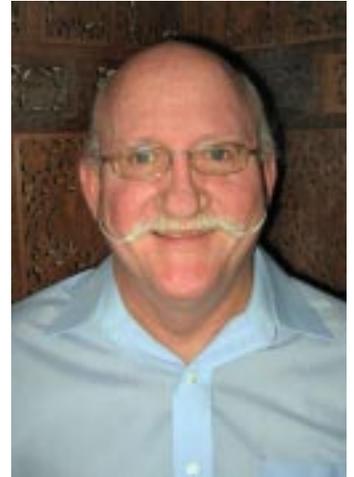


A group of NADE members attending the recent Bi-Regional conference in Vermont had the unusual opportunity to meet Maria Von Trapp, daughter of the Von Trapp family. She is 92 years young and quite a lady. She played the piano for the NADE group. Left to right: Liz Jameson, Noel Tyler, Debi Chowdhury, Vickie Johnson, Trudy Lyon-Hart, Mary Ann Cleavenger, Chris Sias, Terry Gruber, Leesa Chalmers, Diane Richardson, Edie Peters-Liguori, and Susan LaMorte. Seated are Maria Von Trapp and Rich Clauss.

Candidate Announces For NADE Office

Bill Dunn For Treasurer "Get Your Bills Done By Bill Dunn"

My name is Bill Dunn and I would like to announce my candidacy to serve as NADE Treasurer again in 2007-2008. Many of you already know me but for those of you who don't, I first joined NADE in 1989. I have attended many national conferences since my first one in New Orleans in 1993 and I believe strongly in the goals and purpose of NADE. I have worked at the Texas DDS since 1983, currently in the position of Operations Unit Manager. NADE has twice awarded me the John Gordon Award as the Supervisor of the Year. I am currently the NADE Treasurer and have served as the NADE Bylaws Chair and Parliamentarian in the past. I have also served on the NADE Strategic Planning and Legislative Committees in the past. I am active on the Regional level and am currently the regional Bylaws Chair and Parliamentarian. I have also served as the Regional Secretary and on numerous committees. On the Chapter level, I have served as President twice and Secretary twice as well as serving as the chair of numerous committees. I am currently the Membership Chair of TADE.



I am experienced with financial record keeping as I kept the books for five years of a successful company co-owned with my wife, filing all required financial records and tax returns without problem during that time. As the current NADE Treasurer, I have paid all NADE's bills in a timely manner and reported NADE's financial status on a monthly basis. I have made myself available to answer all questions regarding NADE's finances and tax status. If elected, I pledge to continue to ensure that the financial obligations of NADE are met in a frugal and timely manner and that NADE's financial records will be kept in a timely and accurate format. I will do all that I can to advocate for keeping dues at a realistic level and will continue to advocate for rebates to the Regions and Chapters whenever possible.

I am asking for your support for my candidacy and I pledge to be worthy of it.



Quality is Our Goal

To ensure quality photos for printing in the *Advocate* and on the NADE website, please submit digital photos in a .jpeg format or submit printed photos.

Articles should be submitted in a Microsoft Word or a text document.

Your assistance is appreciated!

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May 14, 2007

Commissioner of Social Security
PO Box 17703
Baltimore, MD 21235-7703

Dear Commissioner:

The National Association of Disability Examiners (NADE) has reviewed SSA's proposed rule on Consultative Examination – Annual Onsite Review of Medical Providers. We appreciate this opportunity to provide comments.

NADE is a professional association whose mission includes fostering, promoting and participating in activities designed to: "Improve the documentation of applications for disability benefits and the evaluation of medical and vocational information obtained in connection with such applications." The majority of our members work in the state Disability Determination Service (DDS) agencies adjudicating claims for Social Security and/or Supplemental Security Income (SSI) disability benefits. However, our membership also includes SSA Central Office and Regional Office personnel, attorneys, consulting physicians and psychologists, claimant advocates and others interested in disability evaluation. We welcome the opportunity to provide comments on this, and other changes in the disability process. We believe the diversity of our membership, combined with our "hands on" experience provides a unique and realistic perspective on issues affecting the disability programs.

SSA proposes to revise the threshold billing amount in Sec. Sec. 404.1519 (e) (1) and 416.919 (e) (1) to raise the amount to \$150,000 from the current rate of \$100,000 that triggers onsite reviews of medical providers who conduct consultative examinations (CEs) for disability programs under titles II and XVI of the Social Security Act. NADE does not support these proposed revisions.

NADE recognizes that the costs for performing CEs has risen and that some high volume CE providers may reach the \$100,000 threshold mark sooner than in previous years. However, while increasing the onsite review amount for CE providers that do a significant number of consultative examinations may seem appropriate due to the rising costs for performing CEs, NADE feels that it opens the door for the potential for some key providers to provide a "less than quality service" to the disability program.

Some of the smaller states currently do not have providers that meet the \$100,000 threshold mark and only do reviews of the top five providers in their state per current regulations. NADE experience has shown that the current regulations requiring DDSs to either review those CE providers who reach the \$100,000 threshold mark or the top five providers in the state allows some high volume providers in larger states to not have on-site reviews. NADE feels that more on-site reviews of high volume key CE providers need to be conducted, not fewer. Increasing the threshold mark for performing on-site reviews from \$100,000 to \$150,000 would take away the possibility of reviewing some high volume CE providers in the future.

NADE feels that Professional/Medical Relations Officers (PRO/MRO) in state DDSs need to continue to monitor high volume CE providers on a regular basis to maintain the quality and consistency of CEs performed across the country for disability applicants. Thus, NADE favors expanding, rather than limiting, the situations in which PRO/MROs in state DDSs review high volume CE providers. We are also concerned that increasing the CE threshold amounts may send the impression to the general public and Congress that our consultative examinations are not an important part of the DDS process, thus, opening the door for Congress to reduce our funding for medical expenditures.

Thank you for your consideration of our comments.

Sincerely,

Chuck Schimmels
Chuck Schimmels
NADE President



Across NADE Today

The **Los Angeles Chapter of CA NADE** hosted a BBQ/Picnic for all NADE members and their families and friends on June 9th in a quaint park of Culver City. We had lots of food, games and prizes for the kids and discussion about NADE and future activities. Because we had extra food from the Picnic, we donated frozen hamburgers and hot dogs to the Greater Temple Media Food Bank and Power of Praise. Both organizations feed the homeless so the LA Chapter did a good deed by showing appreciation to its members but also gave back to the community. Way to go Los Angeles!!!!

Colorado (CADE) - CADE held free luncheon and conference presentations (from those who attended various Regional NADE Conferences). We had seven CADE Members present policy and medical information. We had 50 people from the DDS attend. We have beautiful display boards out all week which have pictures of the conferences and promote the National Conferences in 9/07 and 9/08. We have a free basket drawing which is huge and filled with many wonderful gifts. We have free desk top items and other goodies which were given to DDS Staff. CADE hosted an Ice Cream Social and Watermelon Feast with a free NADE Membership Drawing.

Delaware (DADE)- Delaware has been very busy this spring time working with fund raising. DADE put on a very successful flea market May 31, 2007 on the first floor of our New Castle, DE business office. Examiners, Medical Staff, and Clericals all conducted some spring cleaning and brought in valuables that they wished to part with. These efforts helped raise over 300 dollars for our organization. This money will assist us in cooking a charity dinner for The Ronald McDonald House in July, as well as assisting in our celebration of National Disability Professionals Week. With the help of Beverly Wardyga we have planned an exciting Professionals

Week which will include special speakers, stress management, a pizza luncheon, and an ice cream social. All together DADE has continued to show dedication and commitment to the ethics up on which NADE is built.

Shreveport, Louisiana - LADE celebrated National Organ Donor Month by focusing on health. We had two guest speakers from local organizations. Tina Hickey, Liver Transplant Coordinator of the Willis Knighton Regional Transplant Center, shared vital information about maintaining healthy liver function, life-saving tips on avoiding over-the-counter pain relief overdose and how this affects the organs, and detailed information about organ transplantation. Sheron Raymond, Education Coordinator of Louisiana Organ Procurement Agency, shared helpful information on donor registration, family health discussions, living donations, and healthy lifestyle changes. A local elementary school donated 30 jump ropes through their PTA association for our colleagues to use in a Minute Jump Rope Contest. There was also a Minute Military Push-up category and a Minute Bent-Knee Pushup category. A \$10 gift certificate to a local health food deli was awarded to a winner in each category plus an honorary mention to participants who were in all three categories. At our annual Father's Day Cooler raffle, one lucky father received a rolling cooler filled with assorted gifts, a huge lawn chair, and dinner certificate. We are settling down into the training of the new examiner class, as many of our chapter members are also on the training committee.

Maryland (MADE)- Maryland continues to grow and current membership is 39 and counting! Members have sponsored a DMA discussion panel which assisted in identifying agency training needs. MADE continues to perform community outreach. MADE had three representatives at the recent conference in Stowe, VT. In the last year, MADE has

sponsored teams for the March of Dimes Walk-A-Thon, sponsored blood drives for the Maryland Chapter of the Red Cross, and participated in a holiday gift drive for a residential care facility that supports AIDS patients. We have had several fund raisers this spring, including Opening Day at DDS, in conjunction with the Baltimore Orioles opening day, with hotdogs, nachos, popcorn and door prizes donated from the Orioles. MADE planned a fun filled week with NDPW, which included a Nutritionist who discussed nutrition in a sedentary lifestyle, an infectious disease specialists from the University of Maryland that discussed symptoms and current treatment modalities for HIV, concluding our week with a staff picnic, which will included a yoga instructor. MADE members are looking forward to the upcoming national conference in South Dakota.

Michigan (MADE)- The Michigan Association of Disability Examiners has been busy working on their upcoming state training conference scheduled for September 7, 2007. It will be hosted by the Traverse City sub-chapter who has been diligently working to put together an interesting and informative agenda, locate a comfortable venue, and establish some great room blocks in hotels on the shores of beautiful Lake Michigan. Additionally, each sub-chapter is planning activities for NDPW such as lunch-time speakers, a silent auction and various food activities such as an ice cream social.

North Dakota (PGADE) - Peace Garden Association of Disability Examiners welcomes its newest member, Ginny May! Thanks Ginny, for joining us! They organized a busy week during National Donate Life Month that involved all of DDS with a video, potluck and a presenter awaiting a transplant along with other various activities. One of our support staff moved this month to another agency. In an office as small as ours, when one person leaves, it causes a

lot of duty reassignment, so that has been a challenge. All of our members are signed up to attend the National conference in South Dakota and are looking forward to that!

Oklahoma (OKADE) - The Oklahoma Association of Disability Examiners orchestrated three successful months of fundraising for the March of Dimes and Relay for Life (American Cancer Society). Activities included - lots of food (pizza, salads, spaghetti, BBQ brisket sandwiches, bake sales) - silent auctions, raffles for baskets of goodies and sponsoring. The chapter received a plaque for raising over \$5000.00 for March of Dimes and received a Bronze banner for donations to the Relay for Life. OKADE had 7 members attend the SWADE conference in New Mexico, which was well organized and had some excellent speakers. We are continuing our fundraisers so as many, or more may attend the NADE conference in South Dakota. Professionals week included speakers, food activities and recruiting to the organization.

Vermont (GMADE) - Recently, the Green Mountain Association of Disability Examiners (GMADE) hosted the Northeast and Mid-Atlantic Bi-Regional training conference ("Springing into DSI") in Stowe, Vermont on May 20-23,

2007. The highlight of the conference was the DSI (Disability Services Improvement) panel discussion. Speakers included Ruby Burrell, Associate Commissioner for the Office of Disability Determinations; Bill Gray, Deputy Commissioner for Systems; Paul Farinato, Director of the Center for Disability for the Boston Regional; and DDS directors Trudy Lyon-Hart from Vermont and Diane Richardson from Maine. Also on the panel were John Rynne, the Vermont District Offices Manager and Briana Wilson, a Vermont DDS adjudicator and NADE's DSI committee chair. The panel speakers gave overviews of how DSI was going in the Boston region and also took questions from the audience.

Conference attendees also heard from Linda McMahon, Deputy Commissioner for Operations, regarding DSI and the disability program; and from Glenn Sklar, Associate Commissioner for the Office of Disability Programs, regarding upcoming changes to the listings. Sal Sorbello, Senior Analyst for the Boston Government Accountability Office also gave a talk on the GAO backlog report.

The conference was not all lectures, however, as NADE in New Hampshire livened up the Hospitality Suite with their Chocolate Fountain and some attendees participated in pre-conference trips to Shelburne Museum and Church Street Marketplace. Overall, participants got a

glimpse of how DSI is shaping up and of what changes may be heading their way soon.

Washington - Thanks to the combined efforts of all three Chapters in Washington State (located in Olympia, Spokane and Seattle) the Pacific Regional Conference held in Seattle in May was a success for several reasons. The attendees reported satisfaction with the information presented, the speakers, facility, meals and, of all things, our weather!

OWADE has new officers and it is off and running. The program is starting to come together for the next year. We will be celebrating NDPW with an ice cream social. There are plans for "lunch at the movies" in July with a movie and popcorn.

Wisconsin (WADE) - The WADE chapter has been focused on revitalization of our fundraising activities and recruitment of new members. We've also been busy preparing for our National Disability Examiner Professionals Week celebration with several activities taking place during that week. Next on our priority list is the planning process for the 2008 Great Lakes Regional Training Conference. It will be held in Madison, May 5th thru 6th.

No More Long Holds!!

Virtual Hold Technology and SSA have announced that SSA will implement "Virtual Hold" queuing in its customer contact centers. Currently, callers are placed on hold when the number of incoming calls exceeds the number of available SSA representatives. The "Virtual Hold" technology will inform SSA customers of the estimated hold time and they will be given the choice to hang up, yet keep their place in line. The system will automatically call them back when it is their turn to speak to an SSA representative. This system will enhance customer service.

The SSA processes between 40 and 50 million call per year from Americans seeking information on retirement, disability and survivors benefits for workers and families.

Winds of Change
Continued from page 28



To highlight some of the region's "old west," along with the great farming and ranching of the area, an exciting tour package, "Roamin' the Range" is available on Sunday. The tour begins at the annual Spirit of the West Festival, chosen as American Cowboy Magazine's Best of 101 Great Western Events, and also featured in the AAA vacation magazine. Tour attendees will get a taste of what it was like in the days of the prairie pioneers and the Old West cowboys. Chuck Wagon and Dutch oven cooking along with sharp shooting, singing, dancing, and reenactments make this a lively event well worth attending.

Next, the tour is off to the Wilde Prairie winery, located on a family farm near Brandon SD. With good old South Dakota hospitality, the Wilde family will welcome us into their comfortable home, a farmhouse built in the early 1900's. In this peaceful family home and winery, we will have the opportunity to sample unique SD wines such as rhubarb, apple-raspberry and dandelion while Victoria Wilde describes and explains each of the wines. In addition, for any of those falling in love with that certain flavor, wine will be available for purchase.

After sampling some of the unique wines of the area, the tour moves on to a real life buffalo ranch. Tour goers will have the opportunity to get up close to live buffalo in a ranch setting, and even have them eating right from the palm of their hand. Prairie Heights Bison Ranch also gives the delicious opportunity for a wild west BBQ. The ranch provides juicy grilled buffalo burgers with all the fixings while you unwind, and enjoy the comfy down home atmosphere.

After the cookout supper, we travel to a farm outside of Harrisburg SD for a visit to the Heartland Country Corn Maze. Enter the corn maze and enjoy a walk through a wonderful natural environment surrounded by cornstalks. Everyone will be provided with a maze map and a list of questions. Search out the checkpoints and answer the questions for a prize from the concession barn. Don't worry, the lost can be found.

This exciting tour has limited capacity, so reserve your spots early to guarantee that you will be along for the fun. Early registration cost is only \$50 per person plus a \$2 out of town fuel surcharge, and includes the evening meal. For additional information see the NADE website at www.NADE.org.

Holiday Inn® Hotels & Resorts SIOUX FALLS-CITY CENTRE

Welcomes... NADE

**To South Dakota
September 15-20, 2007**



Deadline for Publication Contests Is August 1st!

Any member may submit a NADE-related photograph for consideration in the photography contest. Cash awards of \$50 and \$25 will be given. Chapters entering the newsletter contest should submit eight (8) hard copies of each issue or one electronic copy of each issue. All entries must be received by August 1. Entries should be sent to:

Donna Hilton, Publications Director.
1117 Sunshine Drive
Aurora MO 65605 or drhilton@suddenlink.net

Regional Publication Representatives will assist with the judging of both contests. Newsletters are judged by chapter category according to size: 15 or less, 16-39, and 40 or more members.

2007 NADE National Training Conference

September 15-20, 2007

- Registration Form -

Sponsored by SoDADE, Inc. Fed Tax ID. 36-3529409

The Winds of Change:
New Directions in Disability



NADE 2007 - SIOUX FALLS, SD

NAME: _____		(first name)	(m.i.)	_____	(last name)
ADDRESS: _____				Nat'l Conference 1st Time Attendee: _____ Yes / No	
_____				NADE Chapter: _____	
_____				Daytime Phone: _____	
E-mail Address: _____					
Arrival Date: mm/dd/yy		AM/PM	Departure Date: mm/dd/yy		AM/PM
Special accommodations needed for any registered activities, events, or meals: (if more attach extra page)					

Registration Fees:

Fee Summary

Please indicate the number of people in each category. Each registrant should be listed on a separate registration form. Number of Guests (Spouses, Significant Others, etc) that may be joining you for meals or ticketed activities should also be listed on this form.

All Days:	NADE Members:	\$135	_____	@ \$135	\$ _____
	Non-Members:	\$195	_____	@ \$195	\$ _____

Early registration will end 8/15/07. Late fees apply to registrations postmarked on or after 8/16/07: \$175/member or \$235/non-member

Daily Rate:	NADE Members:	Mon.	_____	Wed.	\$ _____
	\$60 per Day	Tues.	_____	Thurs.	_____
	Non-Members:	Mon.	_____	Wed.	\$ _____
	\$100 per Day	Tues.	_____	Thurs.	_____

Early registration will end 8/15/07. Late fees apply to registrations postmarked on or after 8/16/07: \$80/member or \$120/non-member

Pre-Conference Activities:

Tickets will be provided with your registration packet. Please bring the appropriate ticket for admission to each tour. Fees for these excursions include transportation.

	↓ # Persons ↓	↓ \$ Subtotal ↓
Saturday, Sept. 15th - Breezin' Through the Town Tour: 1:00pm - 4:00pm	_____	\$ _____
Start by exploring the Sioux Falls' Old Courthouse Museum and then hop on the trolley for a 2 hour guided tour of the city's namesake falls and other historical areas. Limited seating available. Cost is \$15 per person. www.siouxlandmuseums.com		
Saturday, Sept. 15th - German Fest 2007: 3:00pm - 10:00pm	_____	\$ _____
Brats and beer abound with polka music to celebrate the rich German heritage of the region. Located on Phillips Avenue just outside the hotel in downtown Sioux Falls. Free admission to all participants. Food and beverage available for purchase. www.siouxfallsevents.com/eventDetails.CFM?EventID=5827 www.dtsf.com		
Sunday, September 16th - Roamin' the Range Tour: 12:30pm - 9:30pm	_____	\$ _____
Enjoy the Spirit of the West Festival, wine tasting at a local winery, a cook-out at a local buffalo ranch (meal cost included) and a trip through an authentic corn maze. Tour begins and ends at the Holiday Inn City Centre. Cost is \$52 per person, which includes an out of town fuel surcharge. Limited seating available. www.spiritofthewestfestival.com www.wildeprairicwinery.com www.buybison.com www.heartlandcountrycornmaze.com		

Weekday Activities:

Tickets will be provided with your registration packet. Please bring the appropriate ticket for admission to each event.

Monday, September 18th

↓ # Persons ↓ ↓ \$ Subtotal ↓

CCP Brown Bag Luncheon: 11:30am - 1:00pm

The CCP Chair will lead a lunch meeting and informational session for Chapter Presidents, President-Elect and immediate Past-Presidents or their designee from each chapter. This will be held in the Conference Room at the Siouxland Library's Main Branch, which is directly across the street from the hotel. A brown bag lunch and beverages will be available. Lunch cost is \$15 per person.

Attending and participating in the meal:	_____	\$ _____
Attending, but not participating in the meal:		\$ _____

Presidents' Reception: 7:00pm-9:00pm

This event is within walking distance at Chef Dominique's in Shriver's Square in historic downtown Sioux Falls. The trolley is available until 8:30 pm or alternative transportation can be arranged if special accommodations are needed. Relax, eat, and network in celebration of NADE's Presidents. Business dress attire - No children. A cash bar will be available. This is free for paid registrants and \$15 for guests.

Registrant:	_____	\$ _____
Guests:		\$ _____

Tuesday, September 19th

NADE Board/DDS Administrators' Luncheon: 11:30am - 1:00pm

This is a private Luncheon for NADE Board members and DDS administrators. This will be held at the Siouxland Library's Main Branch, which is directly across from the hotel. There's no charge for this lunch, but registration is necessary.

Attending Luncheon:	\$ _____
----------------------------	----------

Little Games on the Prairie: Games 7:00pm-9:00pm & Dance 9:00pm-12:00pm

Gear up in the attire of your favorite team or sport and come test your skills, win prizes and then dance the night away. Show your spirit with just a cap or even the entire uniform. Munchies are included with your admission ticket and a cash bar will be available. Cost is \$15 for entire event - no partial fees.

Wednesday, September 20th

NADE Awards Luncheon: 11:30am - 1:30pm

This event honors all of the NADE award winners. Cost is \$28.00. All meals include a House Salad, Vegetable, Rolls, Dessert and a choice of Beverages.

Top Sirloin w/ Bordelaise Sauce and Red Skin Cheddar Mashed Potatoes	_____	\$ _____
Herb-Grilled Chicken Breast w/ Chardonnay Sauce and a Wild Rice Blend		\$ _____
Pasta Alfredo w/ Broccoli Fresh Florets tossed with Bowtie Pasta in a Rich Alfredo Sauce		\$ _____

Mall Mania: 6:00pm - 9:00pm

No trip is complete without some shopping, so transportation for an evening at the Empire Mall (over 180 stores) will be provided. Additional stores at the Empire East are located a short walk across the street from the main mall. This is free of charge, but registration is required to reserve transportation.

_____	\$ _____
www.theempiremall.com	

Conference T-Shirts: Pre-paid Conference T-shirts will be available at conference registration table.

Women's - \$15 each

Men's - \$15 Each

Small _____		Medium _____
Medium _____		Large _____
Large _____		X-Large _____
X-Large _____		XX-Large _____
XX-Large _____		XXX-Large _____
		\$ _____

T-shirts are 100% pre-shrunk cotton. Women's style is not as long with shorter sleeves than men's. Please indicate the # of T-shirts you wish to order. Cost per shirt will increase at the time of the conference. ** Order your T-shirts now, because they will only be available in limited supply during the conference. **

Total Conference Fees - Including Optional Items and Excursions:

\$ _____

SoDADE USE ONLY: This section will be completed by SoDADE upon receipt of your registration. A copy will be returned to you at the registration table to serve as your conference receipt.

Registration Received: _____ Amount: _____ By: _____, SoDADE Conference Treasurer

2007 NADE National Training Conference, Sioux Falls, SD - September 17th-20th, 2007

Make Checks Payable to: SoDADE, Inc.

Send printed registration form and payment to:

Joanna Fischer, Conference Treasurer
Disability Determination Services
811 E. 10th St Dept. 24
Sioux Falls SD 57103-1650

For questions regarding registration, please call Joanna at (605) 367-5499 ext 130 or Doreen at ext 104

****Registration for the 2007 NADE Conference will not be finalized until payment is received.****

Include printed copy of your registration with your payment. Early registration will end 8/15/07. Late fees apply to registrations postmarked on or after 8/16/07.

CONFERENCE BANNER INFORMATION

Display your NADE Banner for all to see at the 2007 National Conference for a fee of \$10. All banners will be displayed in the main conference hall during the week of the conference. You may submit your banners in one of two ways:

1) **MAIL:** Mail your banner to the address above. It must arrive at this location no later than 9/14/07 to assure it will be received for the start of the conference.

2) **HAND-DELIVER:** Bring the banner with you as you travel to the conference. Bring it to the registration table no later than Sunday 9/16/07 at 7:00 pm to assure it will be put up for display during the conference.

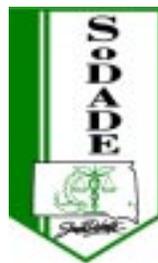
****Payment will be expected at the time your banner arrives. If it's mailed, please submit your check in a separate envelope in the same package your banner arrives in. If you hand-deliver your banner, please submit your check at the Registration table. Make your \$10 check payable to SoDADE, Inc.**

Banner Pick-up: All Conference Banners can be picked up at the registration table at 9:00am on Thursday morning, 9/20/07

Cancellation Policy

A full refund of registration and fees submitted with this registration form will be granted any time up to 8/15/07. Any requests for cancellation after this date will be reviewed on a case-by-case basis.

Please note that SoDADE is not responsible for cancellation or refunds related to hotel reservations or other fees you may have paid which are not covered on the registration form. No refunds will be granted after the start of the conference on 9/15/07.



?? Questions ??
Call a Co-Chair--
Candi - Ext 1013 or
Heather - Ext 122
(605) 367-5499

SoDADE
welcomes you to
Sioux Falls SD in
September 2007!

Remember door prizes



**Check the NADE
website for forms and
information**

www.nade.org

HOTEL INFORMATION-HOLIDAY INN CITY CENTRE, 100 W 8TH ST, SIOUX FALLS SD 57104, (800) 287-0037

- ✓ Conference rate of \$79 per night is guaranteed until August 15, 2006
- ✓ Reservations by phone or on the NADE reservation link
- ✓ Complimentary airport shuttle service
- ✓ In-room amenities include voice mail, computer data ports, high-speed internet, web TV, in-room movies, Sony Play Station games, coffee maker, hair dryer, iron and ironing board
- ✓ Concierge level upgrade for \$10 per night – limited availability
- ✓ Jacuzzi, sauna, indoor pool and fitness center (treadmills, stationary bikes, left lift bench and Pilates tapes)

2007 NADE NATIONAL TRAINING**CONFERENCE AGENDA *****September 15 –Saturday**

12:00 – 5:00 Registration
 1:00 – 4:00 Tour: Breezin' Through the Town
 3:00 – 10:00 German Fest 2007
 4:00 -- NADE Old Board Meeting

September 16 –Sunday

11:30 – 8:00 NADE Old Board Meeting, if needed
 Registration
 12:30 – 9:30 Tour: Roamin' the Range
 6:00 – 11:00 HOSPITALITY SUITE

September 17 –Monday

GENERAL SESSION
OPENING CEREMONIES
 8:00 – 8:30 **Chuck Schimmels**
 8:30 – 9:00 **NADE PRESIDENT**
 9:00-10:00 **Michael J. Astrue**
SSA COMMISSIONER
 10:00 – 10:30 NETWORKING BREAK
 10:30 – 11:30 **Linda McMahan**, Deputy Commissioner,
 Operations

11:30 – 1:00 Lunch – On your own
 11:30 – 1:00 CCP Luncheon (Box Lunch)
 Location: Siouxland Library

GENERAL SESSION

1:00 – 2:00 **Ruby Burrell**, Associate Commissioner for
 Disability Determinations
 2:00 – 3:00 **Glenn Sklar**, Associate Commissioner for
 Disability Programs
 3:00 – 3:30 NETWORKING BREAK
 3:30 – 4:00 **MEET THE CANDIDATES**
 Presentation of Nominees
 4:00 – 5:00 **REGIONAL CAUCUS MEETINGS**
 7:00 – 9:00 **PRESIDENT'S RECEPTION** Held at
 Chef Dominique's in Shriver's Square
 9:15 – 11:00 HOSPITALITY SUITE

September 18 –Tuesday

8:00 – 9:00 **BREAKOUT SESSIONS**
 1. Orthopedic
 Frederick Entwistle, MD
 2. Acupuncture / Chiropractic
 Dr Timothy Rabb
 3. Psychological Assessment
 4. 1st Time National Conf Attendees

9:15 – 10:15 **BREAKOUT SESSIONS**
 1. Stroke Panel
 S Richard Gunn, PhD, et al
 2. Asthma-& Childhood Listings
 Darcy Ellefson RT
 3. Pain Clinic Panel
 4. Professional Relations

10:15 – 10:30 NETWORKING BREAK

10:30 – 11:30 **BREAKOUT SESSIONS**

1. Vision
2. Suicidal Claimants
HELPLINE
3. Cardiac
Rena Owen, PAC
4. DHU Meeting
Gabe Barajas

11:30 – 1:00 LUNCH – On Your Own
 Luncheon for NADE Board & DDS
 Administrators (Location: Siouxland Library)

1:00 –2:00

GENERAL SESSION
 Diagnosing Autism in Very Young Children
 Tracy Stephens, Ph.D.
 Understanding Native American Culture
 Using Humor
 Vanessa Short Bull

2:15 – 3:15

3:15-3:45 NETWORKING BREAK

3:45 – 5:15 **GENERAL ASSEMBLY**
 5:15 – 7:00 DINNER - On Your Own
 7:00 – 9:00 Little Games On The Prairie and
 Dance
 9:00 – 12:00 HOSPITALITY SUITE
 5:15 – 8:00

September 19 –Wednesday

GENERAL SESSION
 8:00 – 8:55 Organ Donation Panel
 Kerry Wentzell -- Lifesource
 Cheryl Buchkoski, Recipient
 Pat Riepel, Donor
 9:00 – 9:55 **Bill Gray**,
 Deputy Commissioner for Systems

10:00 – 10:30 NETWORKING BREAK

10:30 – 11:30 **Kate Thornton**,
 Advisory Board

11:30 – 1:30 **AWARDS LUNCHEON**

1:30 – 2:30 **Noel Tyler**
 NCDDD Liaison to NADE

2:30 – 3:00 NETWORKING BREAK

3:00 – 5:00 **GENERAL ASSEMBLY**
 6:00 – 11:00 HOSPITALITY SUITE
 Host: Tennessee NADE Chapter

September 20 –Thursday

8:00 – 8:55 **GENERAL SESSION**
Patrick O'Carroll, Jr.
 Inspector General for SSA
 9:00 – 10:00 **Kelly Croft**,
 SSA Chief Quality Officer

10:00 – 10:30 Networking Break

10:30 – 11:30 Genomics Research Project

11:30 – Noon **CLOSING REMARKS and**
PASSING THE GAVEL

1:30 -- **New NADE Board Meeting**

Pacific Regional Conference

It's the People

by Matt Rieke, Oregon DDS

Note from the author: It is entitled "It's the People" because it is truly the people who make going to a training conference worthwhile. You do get updated knowledge that will help you do your job but it is the interaction with your fellow workers which is the best part of going to a training conference. For that reason I thoroughly enjoyed going to Seattle.

THE TITLE OF THE conference was "DSI: THE FUTURE." A funny thing happened on the way to the conference. The future of DSI changed. Other regions will not roll out into full DSI as had been originally planned. Parts of DSI will still be rolled out to regions other than Boston and other parts of DSI that were tried in that region will be sidelined for retooling. Mary Chatel, Executive Director, Disability Service Improvement Initiative spoke on the opening day of the conference. She primarily spoke about the "Quick Decision Disability" or QDD part of the DSI initiative. That is one part which has been a success and will be rolled out to other regions. So far, the average QDD decision is made in 20 days from when the claim got to the DDS. There is a formula for which cases are picked for QDD: 2.6 percent of all claims are considered QDD claims. Some are ultimately returned to a regular caseload. Accuracy for QDD decisions was 98.3%. SSA is still tweaking with the specifics of the program but it is sure to be brought to other Regions.

eCAT and the FEDRO pilots will likely not move forward at this time. We also heard from Kathi Thompson, Division Director of DDS Performance Management, ODD. She spoke a little of the history of ODD. Through budget cuts over the past 20 years the program shrunk but it is recognized that more money needs to be spent on the program. She outlined many initiatives being discussed to improve the overall communication between various levels of the SSA disability program and the DDS's. She said that as of 1/4/07 all States were IDA certified and 45 of 47 ODARs have been IDA certified. A PRO website is up. The number one priority now is the release of 12.0. They will continue to assist DDSs with upgrades in their equipment and software. They are also communicating with the VA (which has a large backlog of cases as well) to get the two programs

working better together. She mentioned that the RPC (Request for Program Consultation) website is now up. Ultimately, this should help to make decision-making more uniform across the country.

There were break-out sessions through the rest of the day. One was a report from the Seattle CDIU and another about Credibility, Fraud and Beyond by David J. DeLattre, Seattle Regional Chief ALJ, ODAR. Judge DeLattre provided of the history of ALJs working with the SSA Disability Program. He explained the rules regarding investigating fraud.

Other sessions involved PRO Disability Program issues and presentations regarding NADE Leadership opportunities and NADE certification. We also heard from Dennis Campos and Georgina Huskey from California.

Day two of the conference had presentations by Janet Payton, Director, Disability Quality Branch for the Seattle Region and an NCDDD update from Vicki Johnson, DSI chair for NCDDD. She mentioned that the NCDDD is very supportive of QDD and RPC. Breakout sessions involved topics about the LEND Program at the University of Washington, Autism, and a DSI Panel discussion with Briana Wilson, Disability Examiner from Vermont, Jim Shultis, Team Leader from DQB Seattle and Eugene Person, Case Manager/Vocational Expert, OMVE. (He is an avid Atlanta Braves fan. Go Braves!)

After the awards ceremony, Janis Lewis, Ph.D from the Seattle Washington DDS spoke on stress in the workplace and about Cystic Fibrosis was discussed by Al Lew, MSW, LICSW from Children's Hospital in Seattle. Oregon's very own J. Scott Pritchard, DO gave a talk concerning "To Treadmill or Not to Treadmill?" Dr. Edward Beauty of the Spokane Washington DDS gave a very inspiring talk regarding a recent case involving a rare brain disorder. This talk was very fascinating as it involved conflicting evidence and persistence of the DDS professionals to ultimately make an allowance decision on the claim. GREAT WORK!

The following day we had a General Meeting of the NADE Pacific Region and a quick tour of the Seattle DDS and the Seattle Regional Office. The SSA Regional Office is located in a tall downtown Seattle Building. We went up to the Observation floor by taking three elevators. Great views of the entire town and beautiful Puget Sound were had by all.

As I mentioned earlier, what makes attending a NADE conference is the people. I was able to get re-acquainted with old friends and start new friendships. NADE is a wonderful organization and along with the NCDDD, SSA and other folks we will continue to improve the Disability Determination System for the American People. Thanks.

Results of the recent election for the Pacific Regional Board Officers:

Andrew Martinez - Reg. Director Elect - California

Linda Dolata - Pacific Regional President - Idaho

Joe Rise - President Elect - WA State

Jan Goehner - Treasurer - WA. State

Peter Fox - Secretary - Oregon

Shamoon Alli - Constitution and Bylaws Chair - WA. State

This is an outstanding Board that has pledged to give at least 100% to represent the Region and NADE. Congratulations to all! - Georgina Huskey, Pacific Regional Director

Southeast/Great Lakes Regional Conference

Working With Deaf and Hard of Hearing Claimants

Presented by Rebecca Sills, Director of VR Deaf Services Program

*by: Linda Trent Highsmith, M.Ed., CCC-SLP
North Carolina Disability Determination Services*

MS. SILLS PROVIDED A rather enlightening session at the most recent Southeast and Great Lakes Bi-Regional Conference held in Atlanta, Georgia that focused on Deafness and Hard of Hearing. Ms. Sills is the State Coordinator and Director of VR Deaf Services Program for the state of Georgia. She began the session by presenting some interesting facts to the audience about hearing loss. She explained that 31.5 million Americans have a Hearing Loss, individuals with Hearing Loss represent the single largest disability group in the U.S., and that Hearing Loss is the third largest medical condition in older adults behind arthritis. She also mentioned that people with hearing loss on the average wait seven years before seeking help and that Hearing Loss affects 12,000 chil-

dren born in the U.S. each year which makes Hearing Loss the most common birth defect.

She stressed that "Hearing Loss is invisible but its effects are certainly not". She reported that 48.6% of causes of deafness are unknown. Ms. Sills explained that Deaf and Hard Hearing individuals in many cases are exposed to and/or taught to communicate with others by using one or more types of sign language, oral communication or lip-reading. She shared with her audience that there are various distinctions associated with each of the different forms of sign language such as the American Sign Language, Pidgin Signed English, Exact English, and Cued Speech. For those individuals who rely on lipreading/

speechreading skills 24% to 40% of what we say in English is apparently hidden inside our mouth and another 20% of what we say looks like something else on our lips when speaking.

Ms. Sills shared many ideas of how to easily accommodate individuals who are deaf or Hard of Hearing in the work setting. She suggested: write notes, email and instant messaging, have interpreters, signing job coaches, use an FM system, and consider using Videophones such as the Video Relay or Video Remote Interpreting. Ms. Sills pointed out many of the advantages of using the Video Relay Service as a tool to assist with communication and that this system was a free service to the consumer and is reimbursed to the providers through the FCC funds while the Video Remote Interpreting system is a billable service.

When speaking with a deaf person, Ms. Sills offered a few communication tips such as:

Speak naturally and with expression, talk without moving your head from sided to side or nodding excessively, resist putting your hands on or near your mouth, face the speaker, and communicate in quiet places when possible. She further stated that communicating with a deaf or hard of hearing person is primarily a matter of sensitivity, common sense and courtesy.



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*Look for more information on the NADE web page
coming soon.*

*Daniel Roper, New Mexico
DDS Director and Kay
Hoffpauir, Louisiana DDS
Director strategize during a
break at the Southwest/
Great Plains conference,
which was held in
Albuquerque, NM.*



Obesity And The Obesity Hypoventilation Syndrome Implications For Disability

*Dr. Gary W. Hinzman, MD, MPH Medical Consultant, Ohio DDS
by Celeste Lilly, North Carolina DDS*

Obstructive Sleep Apnea (OSA) and its relationship to Obesity Hypoventilation Syndrome (OHS)

Many persons with morbid obesity have:

- sleep apnea with or without hyper-somnolence
- Hyper-somnolence without OSA

A large percentage of OSA cases are significantly obese, obesity affects so many different co-morbid conditions. In these cases, the examiner needs to assess functionality of the extremely heavy individual and how they get around.

Obesity-Hypoventilation Syndrome (OHS)

It typically begins with nocturnal hypoxemia, due to a combination of sleep apnea, hypoventilation and restrictive lung defect. It progresses to daytime hypoxia – or low oxygen levels. Hypercapnia (elevated carbon dioxide) may also be present. OHS is very difficult to evaluate and is not easily discerned in the medical community. Doctors may attribute it to every other diagnosis but OHS. Acidosis can occur due to low blood pH levels.

Hyperventilation-hypoxia... Why is it worse during sleep?

There is a blunted ventilatory response to hypoxia, low PaO₂ (arterial carbon dioxide pressure) and elevated PaCO₂ during sleep. There is diminished muscle tone during rapid eye movement (REM) sleep causing insufficient respiratory effort. Obstructive sleep apnea (OSA) co-exists with OHS. Around 85-90% of OHS individuals also have OSA. More than 2/3 of OSA is related to obesity but OHS is the more

extreme disease. Sleep apnea is becoming more frequent but you don't have to have extreme obesity to have sleep apnea. Excessive tissue in the throat area can cause the need for a CPAP (Continuous Positive Airway Pressure) machine while a person sleeps.

Obesity-Hypoventilation Syndrome

Primary features:

- Obesity
- Hypoventilation
- Hyper-somnolence
- Hypoxia (low O₂ level) nocturnal to daytime
- Hypercapnia (elevated PaCO₂) in many cases

Obesity Hypoventilation Syndrome Secondary Features

Secondary features related to hypoxia are:

- Pulmonary hypertension
- Right sided heart failure
- Polycythemia
- Cyanosis
- OSA is likely present

Obesity Hypoventilation Syndrome Treatment

Treatment is critical to prevent irreversible pulmonary HTN and right ventricular heart failure. Hypoxia must be corrected so a CPAP machine is started. This provides a steady pressure throughout the respiratory cycle. Bi-Level Positive Airway Pressure or BiPAP is a system that senses inspiratory effort and it increases the pressure. OHS begins with nocturnal hypoxia due to a combination of sleep apnea and hypoventilation restrictive lung defect. It progresses to daytime hypoxia with low oxygen levels. As the disease progresses, elevated carbon dioxide levels occur and eventually acidosis occurs as blood pH levels drop. As the oxygen level drops, the

sensors in the brain compensate and the body adjusts to the lower levels. Chronic hypoxia occurs. This is similar to people living in the Andes and how their bodies have compensated to the lower oxygen levels.

OHA Treatment

Patients with OSA should be treated with CPAP or BiPAP during sleep, providing supplemental oxygen either nocturnal or continuous. Weight reduction (by diet, exercise, or gastric by-pass) is often recommended. In significant and acute phases, there may be a need for intubation and ventilatory support; occasionally a tracheostomy is necessary.

OHS - Why is it Difficult to Evaluate?

It is often not recognized by physicians. It can be misdiagnosed and often as OSA and/or chronic obstructive pulmonary disease (COPD). A PFS (pulmonary function study) or DLCO (Diffusing Lung Capacity of the Lung for Carbon Monoxide) testing gives false sense that there is no severe pulmonary impairment. The individual may be too obese for treadmill exercise and the six minute walking test with pulse oximeter is often not done. The use of oximeter and simple walking in the doctor's office may be enough to show desaturation below 90% (which is low enough for insurance companies to reimburse the cost of home oxygen).

OHS requires ABGs (arterial blood gas studies), serial O₂ saturations, exercise testing with O₂ saturations and measurement with or without ABGs. It requires experience to perform necessary testing, pulse oximeter, trained personnel, protocols, proximity of lab-performed ABGs. BBD testing requires specific protocols and it can be difficult to adjust for each claimant.

Continued on next page

OHS Is Often Difficult to Recognize; Treatment Is Critical
Continued from page 22

OHS –Summary of Tests to obtain from Treating Sources

- PFS
- DLCO
- ABGs at rest
- ABGs exercise – these are often not done
- O2 saturations-pulse oximetry – rest-serial, formal 6 minute walking test or informal walking test

OHS –What BDD Testing May be Needed

PFS is the starting point. DLCO is usually not needed. Resting ABGs and exercise ABGs if they are safe to perform.

Other Hypoventilation Syndromes

1. Obesity Hypoventilation Syndrome
2. Chest Wall deformities: kyphoscoliosis, fibrothorax, thoracoplasty (TB patients)
3. Neuromuscular Disorders: ALS, Muscular Dystrophy, Guillian-Barre, Myasthenia Gravis, diaphragm paralysis
4. Central respiratory drive depression: drug usage such as narcot-

ics, benzodiazepines, barbiturates, neurological disorders –encephalitis, brainstem disease, trauma, primary alveolar hypoventilation (problems /c various centers of the brain to react to breathing)

5. COPD: hypoventilation occurs late in the disease, it usually is not until the FEV1 is < 1.01L, by the time it is this severe –it meets listing 3.02A, it important to recognize hypoventilation with attendant low O2, may be able to use expediency guidelines to meet/equal a listing, with a chest x-ray: the lungs are hyperinflated and there is so much air in the lungs that the patient can't blow out all of the air in their lungs; the diaphragm is flattened and they have an inability to move air in and out.

Hypoventilation –What is the point?

For the COPD and chest wall deformities with pulmonary symptoms, the PFS and DLCO if needed are sufficient in the vast majority of cases. For the neuromuscular and neurological disorders, by the time the hypoventilation or pulmonary disorder is a major concern, the condition meets or equals the neurological body system.

An examiner needs to pay attention to ABGs, O2 saturations, exercise testing with O2 saturation or ABGs, or the need for supplemental oxygen. PFS and DLO may be normal, not severe, or in the severe range but above the SSA medical listing level.

An examiner may miss the significance of and severity of the condition and should consider meeting or equaling a listing or a medical vocational rule. In OHS, knowing the presence of chronic hypoxia, hypercapnia or acidosis is critical.

In some cases of COPD, chest wall deformities, neuromuscular disorders and central respiratory drive depression, only tests such as ABGs, O2 saturation testing, or exercise testing with O2 saturations or ABGs will tell the tale. It is unlikely that a resting O2 sat will be low, lower than 90%.

In all hypoventilation syndromes, one should consider the presence of cardiac and pulmonary co-morbid conditions (cardiomyopathy, congestive heart failure, COPD). In OHS, you need to consider other non cardiac co-morbid conditions (degenerative joint disease in the weight bearing joints, knees being the most common, peripheral vascular disease and stasis dermatitis), we may miss the significance of these in OHS.

Illinois Hosts "Survivors"

by Steve Marvel, Illinois DDS

THE ILLINOIS ASSOCIATION of Disability Examiners recently held a very successful State training conference in Springfield, Illinois. The conference theme of "Survivor" with island casual dress was a big hit! Forty-two people registered for the day long conference with another seven attending the awards luncheon. A health fair was held prior to the conference. We offered a health conscious soup, salad and deli lunch buffet; saving desert until the afternoon break ice cream sundae bar! Attendees and speakers enjoyed home-made chocolates in novel tropical shapes in their "survivor bags" which were specially prepared by new IADE board members Andrea Telford and Erin Vincent.

A pre-conference welcome reception was held the evening prior to the conference and was well attended by past and present Illinois DDS staff, including retired NADE president, Larry DeVantier. Also, by offering a conference discount/membership rebate for new or renewing NADE members, IADE was able to bring nine new members into the NADE fold. This promotion encouraged most current members to renew their memberships. IADE is now busy preparing for NDPW week with activities and recognition planned for all DDS staff and special recognition for NADE members.



Illinois conference attendees enjoy the Awards Luncheon.

Positive Attitude and the Disease-Resistant Personality “You are the boss of your journey.”

Presenter: Richard Blue; PhD
by Mary Sue Bryan, Georgia DAS

DR. BLUE PRESENTED AN interesting and challenging lecture at the NADE Bi-Regional Training Conference in Atlanta. He began his talk by reminding us all that “It is all in how you look at the World!” How many times have each of us heard this?

He reminded us that human behavior is very easily changed. Our personality and our unique way of viewing things will determine what impact stress has on each and every one of us. Our attitude affects our Mind, our Body, and no doubt, our Immune System.

If we perceive our lives as a challenge and opportunity rather than a negative experience, we can have and use tools that help us cope. It has been studied and was giving the name “Stress Buffers”. These include 1) social support, 2) sense of control, 3) physical support (medicine), 4) humor, and 5) optimism. Dr. Blue reminds us that “the demons come when you’re alone. Count on others for help!” Practice Optimism. Our life can turn on a dime. According to a study by Ornstein and Sobel: Optimism is the tendency to seek out, remember, and expect pleasurable experiences.” “Ride the Wave!” Dr. Blue implores.

A historic study was performed by Peterson of Virginia Tech in reference to Pessimism. It was concluded that “Hardiness” is a set of beliefs involving commitment, control, and challenge. Control is the opposite of helplessness. Control yourself – not the situation. The healthiest and hardest people are those that focus on what they can control and ignore the rest. So, ask yourself: What Is My Plan? Determine that, “You are the boss of your journey.”

Dr. Blue gave us a handout that everyone wanted extra copies to share with their loved ones and their coworkers.

The card is called, “*Strategies to Fight Burnout and Achieve Balance*”

- Monitor your Negative Thoughts – Negative thoughts are powerful, automatic, and can quickly distort your thinking. Distorted thinking is the one thing that destroys job satisfaction.
- Find a Way to Dispute Your Negative Thinking – Learn to challenge the negative self talk. Focus on what you are accomplishing and give yourself credit for the things that you are doing right. Remember, it’s all in the attitude.
- Practice Assertiveness – Learning to speak up in tactful and diplomatic ways to the source of your stress is very important. You might not get what you want but at least you made the effort. Sometimes holding thoughts and feelings inside can be very dangerous to your emotional health.
- Get Rid of the Anger – Anger produces all kinds of physical and mental ailments. This is the number one factor in burnout. Learn to reduce your anger. Remember that chronic repressed anger is a killer.
- Talk Your Frustrations Out with a Support Group – Confession is good for the soul. It is important to connect with others who understand your issues. People who are empathic to your problems can help you reduce your daily irritations just by listening.
- Maintain a Sense of Humor – Learn not to take yourself so seriously. Perfectionistic and highly critical people

lose a lot of happy living by their seriousness. Laughter is a wonderful distracter to problems and it helps you put things into perspective.

- Participate in Some Exercise Program – The benefits of active exercise cannot be extolled enough. Positive physical changes, mental well-being, and the accomplishment of a goal all help reduce stress. It is important to develop this habit on a regular basis.

- Develop Outside Interests – Everyone needs a “passion” outside of work. This gives you something to look forward to during the day and it keeps you vibrant and interesting. It does not matter what the activity as long as you enjoy it.

- Learn to “Let It Go” - Whatever your worry, will it really be that important later on? How important is it in the big picture? Learn to talk to yourself in a positive way. Remember that all behavior is governed by reinforcement. Positive self-talk really works.

- Practice Relaxation Techniques – Deep breathing with positive images reduces tension and anxiety. Practicing the techniques daily will help you develop this skill. You can learn to control your physical and mental tension with this commitment.

Dr. Blue was humorous and engaging! We all felt compelled to “watch out for those demons”. (The demons of Negativity and Loneliness that can lead us to the road of Illness and Depression.)

If more information is desired or if you need his services, he can be reached at:

F. Richard Blue, PhD, ABBPP,
Licensed Psychologist and Diplomate in Counseling Psychology;
6100 Lake Forrest Dr, Su 510,
Atlanta, GA 30328 –
Phone: 404)705-9770.

Bears on Patrol in Kentucky

by Marcella Allen, DCADE

BEARS ON PATROL IS A cooperative effort between Kosair Charities of Kentucky and local law enforcement agencies to provide patrol cars with teddy bears and other stuffed animals. These stuffed animals and bears are used by officers throughout Kentucky and Southern Indiana to comfort young children exposed to traumatic situations.

The Derby City Association of Disability Examiners (DCADE) sponsored a drive for the employees at the Department of Disability Determinations (Louisville Branch) the last three weeks in April, collecting new and gently used teddy bears and other stuffed animals for the Bears on Patrol program. A contest was organized between each section to see who could bring in the most stuffed animals with the winner receiving a Pizza party. Our small office of about 100 people collected over 1500 stuffed animals!



Some members of the winning section agreed to pose with a few of the DCADE contributions. Their section collected over 900 stuffed animals! If you look closely you can see Suzanne Ferguson, Christina Kurvers, Prentice Spaulding, Deidre Meek and Elissa Hill.

Great Plains Elections were held for President-Elect and Secretary.

Current slate of officers are:

President Brenda Frevik, South Dakota (re-elected)

Secretary - Jayme Frakes, Nebraska

Past President - Gabe Barajas, Wyoming

Treasurer - Ella Timm, South Dakota (beginning 2nd year of two year term)

Reg Dir - Mark Bernskoetter, Missouri (beginning 2nd year of two year term)



Great Plains Regional Awards Presented to:

Charles Blalock - Gabe Barajas, Wyoming

NADE Award - Tonja Higgins, Missouri

President's Award - South Dakota

John Gordon - Ken Bowman, Missouri

Earl B. Thomas - Dave Tschetter, South Dakota

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Scenes From Regional Conferences



Attending the NE/MidAtlantic conference in Stowe, VT were: Paul Farinato, Director Center for Disability, Boston; Susan Harding, Acting Boston Regional Commissioner; Trudy Lyon-Hart, Director of Vermont DDS; and Terry Gruber, SSA Division Director.



NE/Mid-Atlantic members Liz Jameson & Diane Richardson from McADE (Maine), NADE President-elect Barbara Styles, and Edie Peters-Liguori, JADE (New Jersey) President catch up on how things are progressing with DSI in their offices.



In true NADE custom, banners filled the walls at the Southwest/GreatPlains conference.



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Reprinted from the NADE Advocate, January/February, 1998

The History of NADE

by Frank Giordano

AT THE 1997 NADE NATIONAL CONFERENCE in Louisville, Kentucky, a panel of past NADE Presidents and Directors presented a session on the history of NADE. The panel traced the evolution of the organization from its inception to the present day. Keeping in mind that it is impossible to capture in an article the anecdotes and personal recollections of those who preside over the many changes in the organization over the years, I will attempt to summarize some of the highlights of the presentation.

In 1963, a group of DDS directors meeting in Philadelphia founded the National Association of Disability Examiners (the generic name by which the organization is still known today) as a division of the National Rehabilitation Association (NRA). In the early days, the major direction for the organization came from the DDS Directors, most of whom were part of State Vocational Rehabilitation agencies. The National Rehabilitation Association adequately represented the NADE interests of the early days and organized annual conferences at which NADE was given a small segment of time for conducting organizational business.

As the years went on, the membership of NADE became mostly examiner and other line staff and the direction of the organization became mostly examiner oriented. In fact, the majority of the DDS directors encouraged this change. However, the changing interests of the NADE membership and growing divergent membership base found NADE more and more at odds with its parent organization. The membership eventually concluded that NRA could no longer effectively serve the organization and in Salt Lake City in 1978 the Delegate Assembly adopted a resolution amending the NADE Constitution and By-Laws to delete all references to NRA, thereby rendering the organization in non-compliance with the NRA Constitution and By-Laws and effectively establishing NADE as an independent organization. Despite predictions of NADE's demise, the organization survived bitter opposition, maintained a sizeable membership base, and organized its first separate annual conference in Indianapolis, Indiana in 1979, devoting a full program of medical and other sessions, as well as conducting its organizational business. Not only did NADE survive, but it grew beyond all expectations not only in numbers but more importantly in status and influence.

Soon NADE became recognized as the effective voice of professionals in the field of disability adjudication, encompassing examiners, administrators, physicians, support staff and others involved in the disability program. Legislative activity took on increasing importance to the point where it is today, sought by legislative committee to present testimony on a wide variety of program issues. SSA officials and legislative representatives meet regularly with the NADE Board and there is ongoing dialogue between these officials and representatives and NADE leaders.

The road to growth and increasing stature was not easy. NADE had to go through organizational problems which created some deep divisions, but overcame them and developed a sound financial structure and administrative accountability. NADE was able to maintain stability and come together to pursue its interests. The annual conference regularly featured interchange between NADE leadership and the DDS Directors working through the National Council of Disability Determination Directors (NCDDD). Joint legislative agenda were developed. Communication, both internal and external, was recognized as a priority. The NADE Advocate, established long before NADE's withdrawal from NRA, was and still is the primary tool for passing on information to all its members. But NADE kept pace with technology,

establishing a web site and making increase use of faxes and E-mail and other means of quick communication. Information to and from the membership was and is a top priority of NADE leaders.

In summary, the panel presented a picture of NADE growth and continuity, of fighting through organizational problems to establish stability and credibility, of assuring the interest of the members were not pushed aside but ably represented by its leaders, of communicating both to the membership and to those who affect our lives and the lives of those we serve, and of awareness of the need to keep up with new and better ways of serving our constituency. The panel presentation left those who attended with a new confidence in an organization proud of its past and looking always to its future. Our past is our strength and the ground work for our tomorrow.

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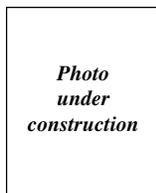
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NATIONAL DISABILITY

PROFESSIONALS WEEK
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PROFESSIONAL DEVELOPMENT

COMMITTEE
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Check the appropriate box in each section.

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(Please print name, title & designation as desired on your Membership Certificate)

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NADE's membership year runs from July 1st through June 30th each year. Your membership will expire on the June 30th following your join date.

Exception: All new memberships received between January through June will receive an expiration date of June 30th of the following year. NADE does not prorate dues.

Mail to: National Association of Disability Examiners Whitaker Bank NADE Account PO Box 599 Frankfort KY 40602
(Make check payable to NADE)

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Change Of Information Form For: (Name) _____

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*Local Chapter # _____ Daytime Phone (_____) _____ Email Address _____ @ssa.gov

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Mail or Fax To: Jeff Price, PO Box 243, Raleigh, NC 27602-0243; phone:800.443.9359 ext. 4056 or email to jeff.price@ssa.gov

Get Wind of the Opportunities: Sioux Falls 2007

Members of SoDADE have been busy planning a fun and exciting 2007 National Conference, officially titled "The Winds of Change: New Directions in Disability".



NADE is honored by the variety of federal speakers which have accepted an invitation to address the National Conference. The Social Security Administration Commissioner, Michael J. Astrue will speak on Monday. Deputy Commissioner for Operations, Linda McMahon; Associate Commissioner for Disability Determinations, Ruby Burrell; and Associate Commissioner for Disability Programs, Glenn Sklar are also scheduled that day. Deputy Commissioner for Systems, Bill Gray; Kate Thornton with the SSA Advisory Board; and Noel Tyler with NCDDD are speaking on Wednesday. And finally, on Thursday will be Patrick O'Carroll, Inspector General for SSA and Kelly Croft, SSA Chief Quality Officer.

Tentative training topics include diagnosing autism in young children and a panel discussion regarding a genomics research project aimed at deciphering what psychotropic medications are most helpful for each individual. One breakout session will provide a first hand look at the stroke recovery and rehab process. Richard Gunn, Ph.D., will share his personal story of recovery and rehab with additional input provided by the medical providers who assisted him along the way. He offers a unique perspective as a DDS consultant, and has been able to continue in his position because of the folderless processing. Frederick Entwistle, M.D., will demonstrate some of the objective tests and signs that are often mentioned in examinations. See first hand, with the help of a volunteer, how the McMurray's or Phalen's is evaluated.

Wednesday morning will begin with the topic of organ donation. Cheryl Buchkoski, Ph.D. will talk about her personal experiences. She was the recipient of a kidney from a live donor in January 2006. The donor, Pat Riepel, a family friend, will also be there to share her view of the process. Donor cards and additional information will be provided by Kerry Wentzell from Lifesource.

Another highlight of the conference agenda is Vanessa Short Bull. Vanessa is a member of the Oglala Sioux Tribe, and grew up on the Pine Ridge Reservation. She was Miss South Dakota USA in 2002, and a finalist in the NBC-Four Directions Talent Search for stand up comedy. She obtained a B.A. in Political Science from the University of South Dakota and a Masters in Public Health. Vanessa uses humor in hope of disproving the stereotypes associated with her culture.

The Holiday Inn City Centre is located in the heart of downtown Sioux Falls. There are many great cafés, shops and galleries just a short walk out the hotel front door. If walking is not your style, you can hop the trolley for a free ride around the downtown area, or down to the cities namesake falls. Downtown Sioux Falls is also home to the sculpture walk. Each year artists from around the country submit sculptures for the chance to be included in the display. The 55 sculptures chosen for display are then placed along the streets of downtown. Look closely at the street light in front of the motel for your first taste of what the walk has to offer or check out www.sculpturewalksiouxfalls.com.

Continued on page 12

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