
the NADE ADVOCATE



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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.

NADE Is Your Voice On Capitol Hill

by Mimi Wirtanen, Legislative Director

ONE OF NADE'S PRIMARY responsibilities is to communicate with Congress in the area of legislation related to the Social Security/SSI programs. Once again, we had the opportunity to meet with Congressional staff members while we were in Washington, DC for the midyear board meeting.

President Chuck Schimmels, President-elect Barbara Styles, DDS Administrators/SSA Liaison Terri Klubertanz and Legislative Director Mimi Wirtanen had a series of meetings with influential staff members of House and Senate committees.

This year's budget and, particularly, the FY2008 budget were the main concerns in our meeting with the Kathryn Olson, majority Staff Director of the House Committee on Ways and Means Subcommittee on Social Security, and Alaine Perry, Professional Staff Member

whose responsibilities include the Disability Program. We also discussed the implementation of DSI, eCAT, the Five-Month and Two-year Waiting Periods and a variety of other concerns.

In our meeting with Kim Hildred, minority Staff Director of the House Committee on Ways and Means Subcommittee on Social Security, and Margo Smith, Professional Staff Member with the Subcommittee on Income Security and Family Support, the budget was also the primary topic of discussion. Ms. Hildred indicated that many of the Representatives on Subcommittee are quite aware of the great job the DDS's do and the large volume of claims we process annually. She indicated that we should feel free to communicate regarding any legislative, statutory areas of concern.

On the Senate side, we had a very informative meeting with majority staff from the Senate Finance Committee. Alan Cohen (Chief Social Security Counselor and Senior Budget Advisor), Tom Klouda (Social Security General Assistant), and Suzanne Payne, Legislative Fellow and Neil Ohlenkamp (Legislative Fellow) were also concerned with budget matters and the implementation of DSI.

When we returned home, NADE sent letters to the chairs of the House and Senate Budget and Appropriations Committees urging them to provide adequate funding in FY2008 for the Social Security program. We also asked members to contact their own representatives to share that message. (*See a sample letter on p.10.*) I was able to get a head start on our grassroots effort when I ran into my Congressman at the Washington airport on my way home. He was quite interested in our issues and I followed up by faxing him additional information. It's important that we educate our representatives on matters related to disability. You can find out information about your local Congressional Representatives and Senators online by going to www.house.gov and www.senate.gov.

**MidYear Board Issue
"Voices of Disability"**



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President's Message

WOW, DOES TIME FLY. It is hard believe that since I last wrote you that we have held our Mid Year Board Meeting and provided another Statement for the Record, this time on Social Security Disability Backlogs.*



The annual business meeting of the NADE Board was held in late February and early March in Washington, DC at the Madison Hotel. It is customary for the NADE President, President-Elect, Past President, Legislative Chair and SSA/DDS Administrators Liaison to visit members of the House and Senate, the Social Security Advisory Board, the Commissioner, the Congressional Budget Office, and the Institute of Medicine prior to the rest of the Board's arrival. We had very informative and interesting meetings with the parties listed above and were able to learn more about the Disability Service Improvement Initiative and discuss budgetary issues for the upcoming fiscal year.

Guest speakers at our Board meeting included Linda McMahon –Deputy Commissioner of Operations, Ruby Burrell-Associate Commissioner for the Office of Disability Determinations, Kelly Croft – Chief Quality Officer, Glenn Sklar-Associate Commissioner for the Office of Disability Programs, Bill Gray-Deputy Commissioner for the Office of Systems, Rick Warsinsky-President of the National Council of Social Security Managers' Association, and Kay Hoffpauir-President of the National Council of Disability Determinations Directors along with other offices of NCDDD. These guests spoke to the Board about SSA policy changes, DSI, ERE, and other topics relevant to disability adjudication and eDib.

Also at the Mid-Year Board meeting the board approved the formation of a new NADE Chapter in Rhode Island, discussed NADE membership renewals, provided NADE Training conference updates, discussed corporate membership vs. corporate sponsorship and renewed our membership/web contract for three more years with Envision. I am also happy to mention that with the assistance of SSA's Chief Quality Officer Kelly Croft, NADE is being given the opportunity to visit all of the regional DQBs to recruit for new NADE membership. As Mr. Croft mentioned, we do the same job and DQB reviewers could benefit from the NADE's training opportunities.

The Southwest/Great Plains Bi-Regional conference was held in Albuquerque, NM April 18-20th, and there was a superb agenda. The theme of the conference was "Enriching Lives through Vision & Innovation". There were sessions on myofascial pain, traumatic brain injuries, making the most of your MER, and DSI updates. Thanks to NewMADE for hosting such an informative training conference! The other three Regional or Bi-Regional Conferences will be held in May and I am delighted to speak to the conferences about NADE's activities and accomplishments this year. I hope to see as many of you there as possible!

Continued on next page

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NADE is an incorporated, nonprofit organization.

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 **Summer, 2007**.

All correspondence should be directed through your Regional representative or NADE editor by **June 15, 2007**.

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

With the Board's approval, Georgina Huskey (Pacific Regional Director), Debi Chowdhury (CCP Chair) and I will be visiting the Carson City DDS for the purpose of recruiting members and reactivating their NADE chapter. I look forward to this visit in June, because I am always delighted to talk about NADE membership and what we have accomplished on behalf of our members.

I hope you are making plans to celebrate National Disability Professionals Week in June, and that you observed in some way "National Donate Life Month." Activities such as these are a great way to learn and interact with co-workers and other NADE members. And remember, there are contests for both these events recognizing how you observed and celebrated them.

Chuck Schimmels

**(The NADE February 14, 2007 Statement for the Record on Social Security Disability Backlogs can be viewed online at www.nade.org under Testimony.)*



NADE Selected For Professional Health Care Leadership Award

It is with great pride that I announce NADE has received an award by another professional association. The American Optometric Association (AOA), which has over 35,000 members across America, has select NADE as the 2007 recipient of the AOA Health Care Leadership Award. As your president, I traveled to Washington, DC on April 24th to receive this award and gave a presentation to more than 250 doctors of optometry and students from 17 schools of optometry at their AOA Congressional Advocacy Conference.

We were selected for this award because of our work on a wide range of health care issues and priorities. We should all take pride in our organization for its hard work and for being recognized.

Thanks to all of you for all you do.

- Chuck Schimmels
NADE President

NADE Certification Voices Recognition of Professionals in the DDS

by Raye Scott, Professional Development Chair

All NADE members, support professional, medical professional or disability professionals can be certified. Please visit our website at www.NADE.org

You can read about the requirements and download forms for certification and recertification. Certification requirements include:

- NADE member for one year
- Held a position within the DDS for three years
- Completed CERTIFICATION application including your training hours
- Have the form signed by your Agency Director, Regional President or Chapter President

NADE certification recognizes individuals who have taken advantage of training opportunities to increase their skills and knowledge base. It's important that we recognize the specialists in our profession as we develop our expertise in our careers.

Certifications:

Linda Trent Highsmith - North Carolina
Jonathan Jaffe, MD - New Hampshire

Recertifications:

Celeste Lilly - North Carolina
Brenda Tibbetts - South Dakota

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!

NATIONAL ASSOCIATION OF DISABILITY REPRESENTATIVES

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For Membership Info**

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Washington, DC 20006
Phone 202-822-2155; Fax 202-463-1257
Web Site: www.nadr.org

2007 NADE AWARDS CRITERIA ANNOUNCED!

by *Chrisa Schimmels, Awards Chair*



DO YOU KNOW SOMEONE WHO goes above and beyond for NADE, someone who deserves some recognition? Well, here is your chance to acknowledge them for all of their hard work. It is now time for to nominate those hard workers for a NADE award! The nominating procedures and criteria for each award are listed below! Please take the time to nominate someone from your chapter for an award. The Awards committee looks forward to reading your nomination. Deadline to submit nominations is July 2, 2007. Nominations received after that will not qualify

NOMINATING PROCEDURES

- 1) Each chapter is responsible for selecting and nominating their own members on the approved forms (available through your chapter president).
- 2) Nominations must be submitted no later than July 2, 2007 to the National Awards Chair.
- 3) The nomination form should be typed and should explain in detail how the nominee exemplifies the specific criteria for each award.
- 4) A one page typed attachment is permissible if needed.
- 5) Please do not refer to the member or chapter by name in the nomination. If an award contains this information, it will be disqualified.
- 6) Each chapter is limited to one nomination per award.

All nominations, as well as ballots, will be submitted to the Awards committee members (one from each region) by the Awards Chair. The results will be announced at the Awards Luncheon at the NADE conference in Sioux Falls, SD.

Nominations must be received by July 2, 2007. Please send nominations to: Chrisa.Schimmels@ssa.gov

If you have any questions, you can contact Chrisa at (800) 877-9977 x 2232 or at the above email address.

NADE AWARDS CRITERIA

The **PRESIDENT'S AWARD** is to be given annually and presented by the NADE President in recognition of an outstanding Chapter.

- (a) Any organized NADE Chapter which has demonstrated outstanding achievement by innovation of programs for improving medical and other professional community relationships. Such activities as panel presentations, speeches, publication of bulletins, newsletters, circulars or other efforts to improve the quality of medical reporting or reporting of vocational assessments or the use of other professional information which can be utilized for the factual and effective documentation of disability determinations.
- (b) Any chapter activities which have enhanced working relationships among its professional communities.

The **CHARLES O. BLALOCK AWARD** is a service award to be presented annually and on a continuing basis in the name of the founder of NADE. It is made in recognition of an individual who has made extended efforts and major contributions toward the organizational advancement of NADE.

- (a) The recipient may be any professional member of the National Association of Disability Examiners who is employed either full or part-time.
- (b) The recipient shall have provided outstanding leadership in the development and substantial expansion of his/her State Chapter, Regional, and/or the National organization.
- (c) The recipient shall have shown consistent efforts over a period of at least three years toward the organizational advancement of NADE.
- (d) The recipient may be a Committee Chairperson, a National Board Member, a Chapter President or any Member who has promoted the advancement of NADE to an outstanding degree.

The **NADE AWARD** is to honor and recognize the disability professional of the year who has made outstanding contributions not only to the service of the claimant in accordance with his/her expertise but has contributed substantially of his/her time and talent to promote harmonious and more effective working relationships among his/her immediate professional community. The award shall be presented annually at the National Conference.

- (a) Anyone who is professionally identified as a disability professional, employed full or part-time.

- (b) Any NADE member engaged as a professional in any capacity, i.e., Medical Consultant, Adjudicator, Vocational Evaluation Consultant, Supervisor, etc.
- (c) Anyone who has consistently shown outstanding achievement by the use of initiative and humanitarian efforts and ability to effectively assist in the Social Security disability process.

The **JOHN GORDON AWARD** is presented in the name of John R. Gordon to a supervisor in the disability program and is designed to honor and recognize superior performance in a supervisory capacity.

- (a) Any supervisor who is professionally identified as a NADE member.
- (b) Any supervisor who by his/her initiative and resourcefulness promotes cohesiveness in his/her work group.
- (c) Any supervisor who provides further incentive for personal growth and professionalism among the individuals he/she supervises.
- (d) Any supervisor who acts in his/her executive capacity in the promotion and maintenance of morale.
- (e) Any supervisor who exceeds the requirements of his/her role in facilitating the workloads of his/her Agency.

The **LEWIS BUCKINGHAM AWARD** is a professional award to honor and recognize a leader of the National Association of Disability Examiners at either the Regional or National level.

- (a) This person must consistently have shown outstanding achievement by the use of initiative and humanitarian efforts to further advance the professionalism and goals of the National Association of Disability Examiners.
- (b) The recipient must have contributed at least ten (10) years of continuous service to the organization.
- (c) The recipient should have served on the National Board of Directors.

The **DIRECTOR'S AWARD** is to honor and recognize an outstanding member of the support staff who demonstrates work performance efficiency and characteristics which contribute to the efficient operation of the unit and the morale of coworkers.

- (a) Any clerical or paraprofessional employee who is employed either full or part-time and is a member of NADE.
- (b) The recipient must have shown outstanding leadership and work performance among his/her peer group.

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

- (a) The recipient must be a member and active supporter of NADE.
- (b) The recipient must be the administrator of a State or Federal agency or be the top administrator of a Regional or Satellite DDS and have been so for three years.
- (c) The recipient must have contributed significantly to the program in ways consistent with the policies of NADE, beyond the normal administrative duties of his/her position.

The **FRANK BARCLAY AWARD** is presented annually in recognition of an individual who has demonstrated exceptional ability to motivate and challenge or to develop or promote programs which motivate and challenge personnel in a disability program and/or develop programs designed to motivate/challenge such personnel in personal and professional growth through human resource development.

- (a) The recipient must be a member of NADE.
- (b) The recipient must be assigned to job duties on a full or part-time basis. Examples of potential nominees include, but are not limited to, training officers, civil rights office employees, human resource management personnel, etc.
- (c) The recipient must have notable accomplishments in the area of human resource development, consistent with policies and objectives of our professional organization.

The **ROOKIE OF THE YEAR AWARD** is to be given annually to honor and recognize a disability professional who has made a significant contribution on a local, regional, and/or national level to the National Association of Disability Examiners.

- (a) The recipient must have been a member of NADE for less than two years, at the time of nomination (July 2), regardless of the number of years of service in a DDS.
- (b) The recipient must have made a significant contribution to their local, regional, and/or national level of NADE.

Commissioner Astrue Speaks Before Congress

Text of his testimony before the House Subcommittee on Social Security

Statement of The Honorable Michael J. Astrue, Commissioner, Social Security Administration

Testimony Before the Subcommittee on Social Security of the House Committee on Ways and Means

May 01, 2007

Mr. Chairman and Members of the Subcommittee:

I am pleased to be here today to discuss the Social Security Administration's (SSA) management of the disability determination process for the Disability Insurance and Supplemental Security Income programs, and the importance of Administrative Law Judges (ALJs) in that process.

Before I go any further, I want to thank you, Mr. Chairman, and the members of this subcommittee for your support. I fully understand how important that support has been, and I am grateful for it. In addition, I want to recognize the hard work and service of the employees of SSA and the State Disability Determination Services (DDSs). They understand the importance of our programs and provide the best service they can.

We recently passed an important milestone; for the last 50 years, the Disability Insurance program has helped disabled workers and their dependents cope with the loss of income due to severe disability. Along with SSA's stewardship of the Supplemental Security Income program, SSA employees work every day to provide vital service to disabled Americans. While the accomplishments in SSA's disability programs are many, today I would like to discuss several areas of concern and our planned solutions.

I'd like to start with some strategic context. Since 2001, Congress has appropriated on average about \$180 million less than the President has requested. The dollar value of this differential is equivalent to processing an additional 177,000 initial claims and 454,000 hearings. The added money in March's continuing resolution allowed us to avert 6-10 days of furloughs and to slow the rate of attrition, but it is important to remember that we will still end the year with substantially fewer employees than we had when we started the year.

During this same time period our workloads have increased both due to demographics and new statutory responsibilities. The baby boomers not only start retiring in January, they are increasingly filing for disability as they age. Moreover, Congress has asked SSA to engage in new responsibilities in homeland security, immigration, Medicare Part B and Medicare Part D.

With so many of the agency's activities mandated by law, other activities have suffered disproportionately. We went from 790,000 medical Continuing Disability Reviews (CDRs) in 2002 to 290,000 medical CDRs last year, a shift that makes a permanent negative impact on the trust fund. Field offices are harried. Hearing offices have lost support staff and productivity, and we have not hired sufficient ALJs to handle a caseload that has doubled in the past five years.

The Members of this committee have been great about making our case with others in Congress, and I ask you not only to continue your efforts, but to expand them. We need your help.

Timely passage of the President's requested appropriation for SSA is a key first step towards addressing our disability caseload backlog. However, I want to acknowledge that we have not addressed the backlog problem as quickly as we need to, and that we are moving as fast as we can toward providing more efficient and compassionate service to the public.

As you know, in 2006 SSA revised the disability determination process to increase accuracy, consistency, and timeliness. The new Disability Service Improvement (DSI) process was rolled out in the Boston region in August 2006, and builds upon SSA's electronic disability folder.

DSI was implemented in a way to allow us to monitor the effects that the changes are having in the Boston region, on our entire disability process, and the Federal courts. The lessons that we learn in the early stages of implementation will help SSA as we continue to evaluate changes needed to improve the disability determination process.

In February and March, we engaged in an intensive review of DSI. We found mixed results.

Early accomplishments include perhaps the best news so far out of DSI, the success of QDD – the Quick Disability Determination program. Using a computer model to identify the cases most likely to be allowed, the states have decided 97 percent of these cases within the required 21 days and they have a mean decision time of 11 days. About 85 percent of these cases have been allowed during the initial review, and more have been allowed with additional documentation. We plan to build on the success of the QDD tool by greatly improving our ability to make decisions so that claimants with conditions such as a confirmed case of pancreatic cancer or ALS are approved for disability within the 11 days we have proved we can do. It is both efficient and compassionate for us to do this.

Another electronic program developed as part of DSI is a decision-tool for use by ALJs called the Findings Integrated Template (FIT). About 80 percent of the ALJs use it now voluntarily, and ALJs who use it have a significantly lower rate of remands from the Appeals Council. These remands cause significant costs and delays. We are in the process of requiring that all ALJs use this new tool by the end of this year. We also found areas of DSI that are not performing as expected, and have taken early steps to make course corrections.

I am committed to making the changes internal to SSA and in SSA's policies that are needed to continue our dedicated service to disabled Americans. We are going to reorganize the Office of Disability and Income Support Programs to better align our organizational structure with this mission, and we have already received some helpful advice from the Inspector General, who, at my request, has completed a first draft of an organizational audit.

We found that two of the new electronic systems developed for DDSs were not ready for real-world use, and were in fact causing considerable delays in processing caseloads. While these systems have great potential over the long-term, they have been pulled until they are more developed. We are focusing on refining our primary two systems for making us fully electronic, and have used an additional \$25 million from our technology reserve fund to accomplish that goal.

We have also accelerated and expanded recent efforts to address the "aged" cases – those cases that involve waiting for 1000 days or more for a hearing. This is America, and an American should not have to wait three or four years for his or her day in court. We have established as our goal the elimination of these cases to a negligible level by the end of this fiscal year, and I am pleased to report that this number has already dropped from 63,525 on October 1 of last year to 17,966 as of last week.

Under the broader DSI continuous-monitoring implementation strategy I mentioned earlier, we are evaluating the Federal Reviewing Official, or FedRO, and Medical and Vocational Expert System (MVES) for these components' effects on processing time, and accuracy, and the costs of handling a claim, and the program costs to the Social Security Trust Funds.

With regard to the Disability Review Board, we have limited actual experience to date due to the time required for claims to reach this stage, but I am concerned about potential for confusion and reprocessing of cases if we have two different bodies issuing conflicting decisions on my behalf over the next ten years. We are evaluating the DRB, and its counterpart – the Appeals Council -- under the current process, with these concerns in mind.

I am overdue on the subject of this hearing – ALJs. Let me make two brief points. First, we need to use our ALJs in a smarter, more efficient way. Posting all our ALJs in our 141 hearing offices does not give us enough flexibility to address the worst backlogs. Electronic hearings have been a successful method to address backlogs on an ad hoc basis, and it is time that we reserve a percentage of the ALJs in a central office and use them exclusively to address the worst backlogs through electronic hearings.

Second, we need more ALJs, and we're aiming at a net increase of about 150 ALJs. With support staff, we're looking at about 750-850 FTEs, a significant reallocation of our discretionary FTEs. With rising numbers of appeals being filed, we simply cannot reduce the backlog with fewer ALJs than we had in 1997. Last year, our ALJs made a record number of decisions – almost 559,000 – and we still fell further behind with a total number of 730,659 cases pending as of March 30 of this year. This kind of commitment, however, means we need to evaluate the costs of other changes in the disability determination process.

Let me conclude by saying that I have very much appreciated the bipartisan support we have received from both Members and the staff of this Committee, and I am looking forward to continuing to have our regular candid discussions until we have a system in which we can all take real pride.

Mid Year Board Meeting

NADE Board Shares Concerns and Suggestions With Bill Gray, Deputy Commissioner for Systems

by Terri Klubertanz, DDS/SSA Liason Chair

MR. GRAY, SSA'S DEPUTY COMMISSIONER for Systems, recently met with the NADE Board during NADE's mid-year Board meeting in Washington DC. After giving a brief overview of where SSA is in the automation process, there was a very interactive discussion with the Board to get their feedback, ideas and suggestions for improving systems.

The roll out of the electronic disability process (eDIB) has been completed and all states have been certified to process cases electronically as of January 2007. This was a tremendous accomplishment for the DDSs and Mr. Gray thanked all those involved in the roll out process. SSA currently has the largest image repository in the world with 105 million documents stored in the electronic folders. These documents take up 22 terabytes of storage and the number of documents continues to grow rapidly. The volume is getting so large that one site can't handle back-up recovery any more so a second data center is being built in North Carolina to assist with back-up recovery. The new site is being sized so that if one site goes down, the other site will be able to handle the entire workload.

All hearing offices now have eDIB in place and almost 5000 electronic hearings have been taken. There is a lot yet to do but the infrastructure is now in place to accomplish it.

Mr. Gray pointed out that the entire SSA agency has moved to an electronic environment, not just the disability program. Ninety percent of SSA's workload is now being processed electronically.

The Disability Service Improvement initiative (DSI) is going fine. As of the beginning of March, 60,000 claims had been filed in the Boston region, 2½% of which were identified as Quick Disability Determination (QDD) claims. The predictive model for the QDD selection of cases is being refined as SSA gains more experience with the process.

Ten percent of the DSI claims have used the electronic claims analysis tool (eCAT), the tool developed for disability examiners to fully document and explain their disability decisions. A second release of eCAT has been built and will be in production shortly; the database in the second version can run separately from other programs so the software is much more stable than the first release. The Office of Systems has instituted a new process for developing requirements for eCAT so that much more user input and feedback is incorporated into the product before being released to the states for use.

Additional refinements and developments will be incorporated into future releases of eCAT. A new version is expected out in June 2007 that will be able to handle child cases and multiple claims. Another release of the software is scheduled for January 2008 that will be for use by the federal Reviewing officials and allow multiple claims analysis for one case.

Mr. Gray reassured the Board that as problems and issues come up, the Office of Systems is paying attention to them and taking steps to get improvements and fixes in place as quickly as possible.

A new software process is being built for the Office of Medical and Vocational Experts to use and is expected to be up and running by March 31, 2007.

Refinements and improvements are being developed so the Electronic Records Express (ERE) website will be easier to use and more user friendly. \$25 million per year is being paid to have paper converted to electronic images so not only is electronic evidence quicker for vendors and claimants, there is considerable cost savings as well.

Mr. Gray spent a large part of his session responding to Board member questions and listening to Board members concerns and suggestions. He took down all suggestions from the Board and promised to look into problems identified as issues in case processing. It was a very lively and interactive session.



Gold Corporate Member

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Contact: Trisha Cardillo
800.747.6131**

BRAND NEW NADE ITEMS!!!!

by Malcolm Stoughtenborough, Non-Dues Revenue Chair



NADE NON-DUES REVENUE is excited to announce brand new inventory:

Lapel pins in bronze w/NADE logo @ 5.00 ea.

Silk-screened golf visor in white w/green imprint @ 5.00 ea./2 for 9.00

Fluted stadium cup (22 Oz.) In green w/white imprint @ 2.00 ea./2 for 3.00

Collapsible "koozie" can holder in green w/ white imprint @ 2.00 ea/2 for 3.00

Transparent vinyl green lanyard w/o-ring attachment in green w/white imprint @ 3.00 ea/2 for 5.00

Lead pencil in light green w/white imprint @ 3 for 1.00

Any of these items are a great way to acknowledge employees and to promote NADE in your organization. We also still have many of the items shown on our website.

TO ORDER OR FOR MORE INFORMATION:

CONTACT: Malcolm.Stoughtenborough@ssa.gov/ or Phone:405-419-2573 for details.

LOOK FOR UPDATES TO THE WEBSITE SOON!!!! THANKS.


South Dakota Invites YOU to "Winds of Change; New Directions in Disability"

The 2008 National Conference is being hosted by the South Dakota Association of Disability Examiners (SoDADE) in Sioux Falls, SD this year and has a great program planned. Accommodations are reasonable. An outstanding array of speakers is planned. All that is missing is YOU! Check the NADE website, www.nade.org, for information and registration forms.

More details to follow in the Summer issue of the *NADE Advocate*.

a NADE Gold Corporate Member

Established in 1981



NATIONWIDE PROVIDER OF
DISABILITY EVALUATIONS

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Internist/Cardiologist



Share Your Voice With Congress Sample of Letter To Encourage Passing Budget Bill

Date

Dear Senator/Representative _____:

I am writing as a member of the National Association of Disability Examiners (NADE). The majority of our members work in the state Disability Determination Services (DDS) agencies adjudicating claims for Social Security and/or Supplemental Security Income (SSI) disability benefits. Although we are considered "state" agencies, the operation of the DDSs is totally funded from the Social Security Administration (SSA) budget.

As you know, there has been great concern in Congress, in the media and in the general public regarding the backlogs at the DDS and, particularly, at the Office of Disability Adjudication and Appeal (ODAR). The total number of disability applications currently pending at the DDSs is 771,018, despite their having processed 1,302,609 claims thus far in FY2007. The number of hearing requests at ODAR totals 717,000 with an average processing time for claims appealed to ODAR of over 500 days, with some offices as high as 800 days. These unacceptable backlogs are a direct result of years of underfunding for SSA. In order to effectively address this crisis in public service, it is imperative that the FY 2008 budget include adequate funding for salaries, purchase of medical evidence, improvement and maintenance of our electronic system and administrative costs.

After years of underfunding a critical service agency, I respectfully request that you consider increasing the amount of SSA salaries and expenses above President Bush's proposal in his Budget of the United States Government, Fiscal Year 2008. In his FY08 budget request, the President proposed \$9.597 billion for SSA Limitation on Administrative Expenses. While this is an increase from his FY07 proposal and far greater than Congress appropriated for FY07, it still falls short of the SSA Commissioner's request of \$10.44 billion in the independent budget request required by law and prevents the agency from meeting its backlog challenges.

The President's FY08 budget request includes \$477 million for program integrity funding. This includes activities such as Continuing Disability Reviews (CDRs) and Supplemental Security Income (SSI) redeterminations; measures that are proven investments for the federal government. CDRs save the government \$10 for every \$1 spent and redeterminations yield \$7 in program savings for every \$1 spent by ensuring that SSI recipients are receiving the correct benefit amount based on non-medical factors of eligibility. As you consider the President's budget request in the coming weeks, I respectfully urge you to remove the integrity funding allocation from consideration as part of the SSA budget without reducing the overall budget cap. Since these programs result in revenue for the federal government, and therefore removing these funds from the overall budget cap will not impact the deficit.

DDSs nationwide have seen a significant increase in workloads in the past few years due to the implementation of the electronic disability folder and the rise in the incidence of disability claims due to the aging of the baby boomer population. In addition, SSA is beginning to feel the impact of the aging of our own employees. There will be large numbers of employees retiring from all components of SSA in the next several years, taking with them years of experience, knowledge and institutional memory. The SSA Field Offices, the DDS and ODAR must begin to hire new staff to compensate for this looming "brain drain". This is especially true at the DDS as it takes approximately two years of training and experience before a DDS Disability Examiner can be considered to be a fully functioning, independent adjudicator. These staffing issues must be addressed now in order to avert a further service delivery crisis in the very near future.

Thank you for any assistance and support you can provide regarding this important funding. I look forward to your response.

Sincerely,

Name

Address

Member

National Association of Disability Examiners

Mid Year Board Meeting

Associate Commissioner Sklar Highlights ODP Projects

by Terri Klubertanz, DDS Administrators/SSA Liaison

MR. GLENN SKLAR, ASSOCIATE COMMISSIONER for the Office of Disability Programs, met with the NADE Board during its mid-year meeting in Washington, D.C. Mr. Sklar's office is responsible for developing disability policy. Mr. Sklar highlighted several areas of recent work done by his office.

1. Development of Regulations (this includes the Listings of Impairments): The outreach program used over the past couple of years to update the Listings of Impairments has been very successful. SSA is getting advice and opinions from experts, advocates and other interested parties before starting to write any changes to the listings. Once they have gotten feedback from as many people as possible, they then start to write the changes. About one-half of the listings have been updated and revised and it is expected that all will be completed within the next two years. Changes to the digestive and immune systems listings are very close to completion and he expects they will be released within the next six months. They plan to tackle several large listings next – cardiovascular, pulmonary and mental. An outreach session for cardiovascular listings is being planned for next year and a study is being done on pulmonary impairments. The mental impairment listings are very complex and will take a little longer to complete.

2. Program Policy OnLine (PPO): SSA wants to put policy out in a more user-friendly format so that individuals can quickly access it electronically. They are trying to aggregate all of the disability policy pertinent to an area, organize it into categories and put it in one place with search capabilities. An electronic database (PPO) has been developed for this purpose and currently has the Disability Service Improvement (DSI) procedures, the Listings, and various other policy areas. ODP is bringing in virtual

detailees from the field who use the policy on a day-to-day basis to help with updating the POMS. The detailees are brought in to SSA Central Office for three weeks of training and then they go back to their home duty station and write from there. Using this structure allows them to get many more interested individuals to volunteer to participate as they don't have to be away from home for as long as normal detailee assignments. It will take several years to complete this process. They will concentrate on perfecting the Listings of Impairments first and then policy on Steps 4 and 5 of the sequential evaluation process.

3. Upgrading the role of Optometrists: SSA released the final rule which provides updated policy for the role of optometrists as acceptable medical sources. Changes became effective 4/2/07.

4. Military Service Casualties: A pilot project called SIMS (severely injured marines and soldiers) has just been completed. The Manassas, VA Field Office teamed up with the Pentagon to take and process these claims so as to expedite decisions for military service personnel casualties or severely injured in combat. Preliminary feedback is positive.

5. Electronic Records Express (ERE): SSA worked with some large scale vendors like SMART and CHART ONE to develop procedures to move huge volumes of records to an electronic format. In January 2005, 82,000 pages of medical evidence had been submitted using Connect Direct; in September 2006, 1.8 million pages of medical evidence had been submitted using Connect Direct. DDS professional relations officers have been working with providers in their states to increase the submission of electronic records to SSA.

6. VA facilities: 117 of 160 VA sites are now submitting records to DDSs using the SSA/DDS VA template.

7. Request for Program Consultation (RPC): A pilot involving the Denver and Boston regions has been developed to replace the traditional DDS rebuttal process when a DDS disagrees with an SSA DQB return. This RPC process was developed as a direct result of feedback from the DDSs to make the quality review system fairer and more policy based rather than a system of who's right or wrong. When there is a question on an SSA return to the DDS, the DDS submits the question to Office of Disability Programs (ODP). The case is reviewed and looked at by a cross-component of SSA staff, including policy and quality improvement. A consensus is reached on policy sufficiency and the response to the DDS is returned within a week. The results of the questions and responses are entered in a database and are available to all DDSs to review. This process is much quicker than the normal rebuttal process and has helped identify a number of areas where policy requires more clarification. The goal is to be more responsive to DDSs in the process and to ensure that disability policy is clear. Where policy needs to be clarified, ODP will be rewriting such policy and providing training on the revised policy. Though the pilot is limited to two regions currently, the feedback has been very positive and we await a decision on future plans. ODP also hopes to come up with some good examples for training as a result of the RPC process.

Mr. Sklar expressed his appreciation for the opportunity to hear from those on the front-line and thanked everyone for all the hard work done by the DDSs.





Candidates Announce For NADE Offices



Georgina Huskey Candidate for NADE President Elect.

I would like to take this opportunity to announce my candidacy for NADE President Elect 2007-2008.

As a member of NADE since 1992, I have been involved with the Los Angeles chapter in several capacities and worked on many national committees, most notably being honored as Chair of the Litigation Monitoring Committee and the recipient of the Regional Supervisor's award in 2005. I served as the Pacific Region President for three years, and for the past four years I have been the Pacific Regional Director. While serving as the Pacific Regional Director it has been a pleasure to see a significant increase in our membership, and to have chaired and assisted in the planning of the successful and well-received 2006 National Training Conference in San Diego, California.



I have worked for the State of California DDS for over 20 years. During my tenure with the DDS I have held many positions. I began as a Disability Evaluation Analyst and quickly promoted to the journeyman level. Eventually, I was selected to be a Professional Relations Officer, Quality Assurance Analyst, Hearing Officer, and currently, a Disability Evaluation Services Administrator/ Team Manager. I am honored to report that I supervise one of the largest and most successful disability evaluation teams in the California DDS.

As a certified Empowerment Instructor, I provide personal-empowerment training for my division on a regular basis. Throughout my career I have been recognized with several awards from the California DDS, and in 1996 I received the Social Security Administration, Associate Commissioner's Citation for exemplary performance and teamwork in achieving quality case adjudications and disability program goals.

Throughout my years of involvement with NADE, I have been extremely impressed with the professionalism, knowledge, advocacy, and viewpoints of this organization's membership. The NADE board has represented our diverse membership needs before Congress, Social Security executives, and DDS administrators. Our continuing education conferences and position papers demonstrate that many challenges rest ahead for our profession, and I am eager to take a leading role in the advancement of the art and science of disability evaluation.

Firmly committed to membership growth, I believe that mentoring and guiding each other will help NADE maintain advocacy in our profession by keeping our members poised to assume their own leadership roles in the future. It is vital that NADE continues to expand and communicate with SSA and Congress as the highly respected professional organization that you, our members, have made us become.

Looking ahead to serve as your President Elect for 2007-2008, and pledging to be a strong advocate for all of our diverse members, I will welcome your insight. I will face the challenges of SSA's evolution of disability guidelines, electronic processes, and policies with the commitment that your concerns will be heard, so that NADE will ensure its growth of professional excellence and advocacy for the disabled. I would be honored to be your voice. Together we can make it happen!



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Tom Ward
Candidate for Council of Chapter Presidents

I would like to announce my candidacy for the position of the 2008 Chairperson for the Council of Chapter Presidents. I have been a Michigan DDS employee for 26 years and have worked as a disability examiner, case specialist, QA analyst, and most recently as a PRO.

I have been an active NADE member since 1993 and have served for many years as the Michigan Chapter President of NADE. I have been extensively involved in organizing two Training Conferences for the Great Lakes Region, as well as several Michigan State Chapter Conferences. I am ready to accept the responsibilities of the CCP Chairperson, to support the NADE Board in any way I can, and to continue to promote NADE as the single most effective professional organization any disability professional is privileged to join.

Having worked extensively at the local, state, and regional levels, I believe I can bring some fresh ideas to CCP while maintaining those tried-and-true ideas that have worked in the past. I believe we must continue to reach out to all classifications of disability professionals, be they administrative support personnel, physicians, quality analysts, professional relations, or any other non-examiner position, while continuing to increase our membership base of disability examiners.

I look forward to working with each Chapter President, to assist you in any way I can as Chairperson, and to communicate your needs to the NADE Board.



Margaret Neal
Candidate for NADE Secretary

I would like to take this opportunity to announce my candidacy for the office of NADE Secretary for 2007-2008.

I joined NADE shortly after I started with the Georgia DAS as an Adjudicator in February 1999. As an active member of GADE I have served as President and Secretary. I have served on many committees on the local level and several on the regional level. Currently I am the Southeast Regional President.

I have attended the National Conference in Kansas City and Regional Conferences in Alabama and Raleigh. I have been actively involved in planning the last four local GADE conferences and am currently the chairperson for the Southeast/Great Lakes Bi-Regional Training Conference scheduled for May 5-9, 2007.

I have enjoyed attending and benefitted from NADE training opportunities. I am excited about NADE and the new members we have recently enlisted here in Georgia. I look forward to the opportunity to serve NADE and will dedicate the time required to perform the duties of secretary.

Thank you for your consideration and support.



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!

Mid Year Board Meeting

SSA Executives Linda McMahon and Ruby Burrell Speak On SSA Accomplishments and Plans For Coming Year

by Terri Klubertanz, DDS/SSA Liason Chair

LINDA MCMAHON, SSA'S DEPUTY COMMISSIONER for Operations, and Ruby Burrell, SSA's Associate Commissioner for Disability Determinations, recently met with the NADE Board during NADE's mid-year Board meeting in Washington DC.

Ms. McMahon is very familiar with the federal-state relationship and the strong interdependence between operational components – she used to be the SSA Regional Commissioner in the San Francisco region. Prior to that, she was the Director of the Department of Social Services in California, the parent agency for the California Disability Determination Services. Ms. McMahon stressed that no matter what our role in SSA or the DDS, we are all here to serve the claimant. She stated that she recognized how much more difficult that is becoming with the budget cuts and limited resources that have been provided to SSA.

Over the past five years, SSA received \$720 million less than the President's budget. With these types of cuts, service delivery has been significantly impacted and some workloads have had to be reduced. SSA is currently in a hiring freeze. Due to high attrition rates in some DDSs, 18 DDSs would need to do significant hiring in FY 08 just to have the capacity to process pro-

jected workloads if this freeze continues through the end of FY 07.

It's very clear that the disability program is "front and center" – the disability hearings backlog has grown considerably and has to be the first priority. However, front-line services in the Field Offices (FOs) have also suffered significantly. In the last one and a half years, SSA has lost 2000 employees from FOs, being able to hire only one replacement for eight employees who have left. This has resulted in lower processed counts in several workloads – CDRs and SSI redeterminations, for example. SSA's 800 phone number saw a huge increase in workload due to the passage of Medicare reforms. There will be some serious internal discussions at SSA regarding what can be done to improve the staffing situation. The focus will be on making strategic decisions to meet SSA's overall mission – where the most positive impact can be gained, always keeping in mind "What problem are we trying to solve and will this do it?"

Ms. Burrell explained the structure and role of the Office of Disability Determinations (ODD). She shared the vision of the ODD: "Through open, interactive communication between headquarters, DDSs and the Regions, the Office of Disability Determinations (ODD) will provide premier operational,

administrative, performance, budget and technical support of SSA administered disability programs." She stressed her office's sole role is to support and advocate for the

DDSs. The office has expanded and several components have been added to be better able to meet the needs of the DDSs. Communication between ODD and the front line is critical and she values the input and feedback she has received from NADE.

Accomplishments over the past year:

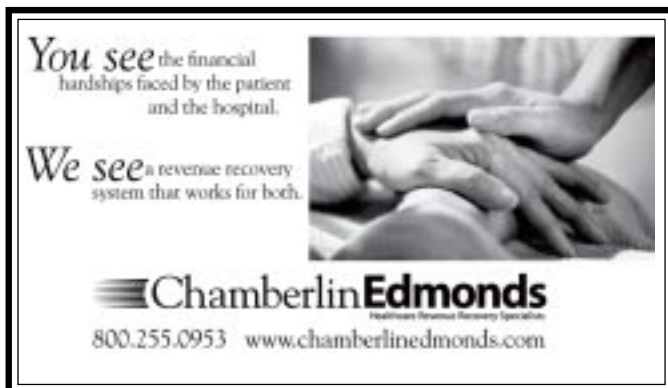
1. Every DDS is now certified to process cases electronically, including Guam and the Virgin Islands.
2. Forty Hearing Offices have been IDA certified; only four are left to be done.
3. They are still working on the fiscal piece of eDIB.
4. They are very close to getting outbound FAX and outbound request software to all DDSs.
5. Last years initial pending goal was 577,000 cases; the year ended at 555,071 cases.

Next year:

1. DDSs are funded to do 2.5 million initial and 574,000 reconsideration claims.
2. DDSs are funded to do 198,000 CDRs.

As of 2/23/07, the DDSs had outproduced receipts; DDSs had received 956,500 initial claims and cleared 969,500 initial claims; DDS had received 220,300 reconsideration claims and cleared 235,400 reconsideration claims. Funding at DDSs is more connected directly to productivity than any other component.

Continued on next page



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Upcoming Activities and initiatives:

1. **DDS Recruitment and Retention** - A DDS led Recruitment and Retention workgroup has been created. All members of the workgroup are DDS staff. Terri Klubertanz is NADE's representative on this workgroup. In addition to looking at recruitment and retention issues for the DDSs, the workgroup will look at position descriptions in the DDS and skill sets necessary to function in an electronic environment; identify staffing issues and barriers and make recommendations for creative solutions to ODD.
2. **Quality Initiative** – the QPMS (Quality Process Management System) component has been put on hold. Input will be sought from NCDDD and NADE as to next steps and what will the quality model look like in the disability program.

3. **Request for Program Consultation** – if DDS gets a write back and believes they are right, they can make a request to the policy component for clarification of policy. This is currently being piloted in the Boston and Denver regions.

4. **Legacy System Priority Meeting** – A meeting was held December 12-13, 2006, with representatives from the various states with different legacy systems. The goal of the meeting was to focus on defining baseline functionalities required for all legacy systems and develop a priority list of functionality requirements. The top 4 items on the priority matrix developed were: Outbound fax capability, ERE, fiscal functionality and reduction of exclusions.

5. **DDS workstations** - The DDS workstation refreshment schedule is now out.

6. **DSI** - Through mid-February 2007, 1400 cases went into the QDD units of which 1,050 were allowed. 114 cases were still pending. 97% of the cases have been processed in twenty days or less. The eCAT tool has been used in 5,000 cases.

7. **The Office of Systems** has agreed to work with the National Council of Disability Determinations (NCDDD) to come up with service level agreements for SSA systems. Robotic monitoring tools have been installed in the DDSs to help to determine level of systems performance.

Ms. McMahon and Ms. Burrell then listened to the Board's concerns, ideas and issues from the front lines. They stated how much they value and appreciate NADE's professionalism and input on how to improve the disability program and better serve the claimants.

How will your chapter celebrate National Disability Professionals Week?



National Disability Professionals Week will be held June 18-22, 2007. The theme is "Windstreams of Change - Following the Current with NADE".

For information on entering the NDPW contest:

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Across NADE Today

(taken from the Regional Directors' midyear reports)

Great Plains:

Nebraska has hosted a retirement party for an MC, Dr Thomas Chael, luncheons and after-hours get-togethers as well as learning opportunities on topics such as Change Management, Depression, Hepatitis, Retirement, and hearing from a heart transplant recipient. They have focused on fundraising to provide funds to send members to Regional and National Conferences with much success (and good food). NEADE maintains a scrapbook archive of activities including a group photo of members.

Colorado had a membership drive in January, and is planning luncheons, another silent auction, and raffles as fundraisers which have made it possible to assist in sending members to regional and national conferences. CADE sponsored a March of Dimes collection, Toys for Tots, a food drive, luncheons, breakfasts, and dessert socials with drawings for free memberships. CADE hoped to have a one day conference as they have in the past, but due to state budget concerns, this was not possible.

Missouri is scheduled for outbound fax at the end of February. Care packages were sent to troops in Iraq and an orphanage in Afghanistan around Christmas time, as well as participating in Toys for Tots. They also supported the Susan G Komen Foundation to fight breast cancer.

South Dakota is preparing for the national conference to be held September 17-20, 2007 in Sioux Falls. Please encourage all members to attend.

North Dakota has gone from 2 members to 3 and they are actively working to recruit 2 more.

Great Lakes:

Illinois is planning their 1-day training conference for May 17th. They also had their annual bus trip to Woodfield Mall to go Christmas shopping. IADE contin-

ues to collect canned goods for the local food pantry. There is discussion about a possible bi-regional conference in 2009, perhaps aligning with the Great Plains region.

Indiana: Muriel Treadwell is the contact person for this Chapter, and I have continued to correspond with the Indiana members via email.

Michigan continues to show a strong membership of 103 members. The subchapters continue to do a tremendous amount of community service by providing food, clothing and toiletry donations to a diverse group of needy people in their local communities. The Traverse City sub-chapter will be hosting the state Training Conference September 7th.

Minnesota has held steady with 18 members. Funding issues have affected the morale of this chapter; however, they are planning an ice cream/root bear float event in the summer.

Ohio continues to hold their very popular annual Holiday silent auction and bake sale to raise money for the United Methodist Children's Home. Fundraising has been a key point in this Chapter the past year, aiding organizations such as Paws With A Cause and the American Heart Association. OADE brought in quite a few new members during February recruitment month. This chapter continues to sell candy at the office to help defray costs for those attending the National Training Conference, and they were able to aid 15 people who attended San Diego. OADE is co-hosting the regional training conference with SEADE in Atlanta May 7-9.

Wisconsin sponsored their annual mitten tree and collected over 100 items for a local shelter. They were requested to come up with a proposal for the design of a query tailored to Wisconsin DDS and received very positive feedback. They are planning several fundraising activities in the coming months.

GLADE has the unique distinction of being the only region to hold an annual mid-year Board meeting.

Mid-Atlantic:

The **Delaware** Chapter (DADA) continues to thrive. This year, Raye Scott provided all membership with a presentation that included highlights of the National Conference in San Diego. For Christmas, the Chapter participated in the Adopt-A-Family organization and adopted three individuals in nursing homes who were without family members. Through this effort, the Chapter was able to provide these individuals with every item on their Christmas lists.

The **Virginia** Chapter collaborated with Robbie Watts, Virginia DDS Director, to sponsor and help develop a new mentoring program which assists new DDS employees in transitioning to the DDS environment and "corporate culture". This program pairs a new analyst with a more tenured DDS employee who can assist the new employee in gaining informal information, which would not typically be represented in formalized training programs. Because of this collaboration, the Virginia Chapter (VADE) was successful in gaining several new chapter members. Currently, there are 22 new analyst trainees that are paired with a mentor as part of this program.

Virginia has also been quite active in fundraising efforts including a Virginia Gift Basket and a 50/50 raffle split with the Commonwealth's Virginia Campaign that supports a variety of charities throughout the state of Virginia.

MADE (Maryland) continues to grow and since 2006 has increased membership from 25 to 40 members. Members have sponsored a DMA discussion panel which assisted in identifying agency training needs. Several MADE members have also participated in IDA certification teams for other states.

Voices From the Field

MADE has been active in gaining the support of their new DDS director, Sue Page, who appears to be a strong administrative supporter of MADE and has already become a NADE member.

MADE continues to perform community outreach. In the last year, MADE has sponsored teams for the March of Dimes Walk-a-Thon, provided educational materials for Organ Donation Awareness Month, 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.

Northeast:

Six of the Northeast Chapters, CT, RI, ME, MA, NH and VT continue to stay focused on the new DSI process. Although the degree of success varies from state to state, the QDD (quick decision) seems to be successful in all the states.

The Northeast/Mid-Atlantic Bi-Regional Training Conference, "Springing into DSI" will be hosted by the GMADE in Stowe, Vermont, May 20-23, 2007 at the Stoweflake Resort-Spa. Conference registration is \$125 and room rates are \$129 single/double/deluxe. The Chapter's activity has been focused on planning for this conference, with a very interesting and informative agenda. In addition to all this activity, they were able to host their annual holiday fundraiser, donating the proceeds to their chapter secretary who was in a serious motorcycle accident.

Pacific:

The Pacific Region continues to work towards increasing its membership.

Nevada has invited the NADE president, CCP Chair and Regional Director to come and make a presentation to the staff.

Arizona continues to maintain 5 members.

Alaska continues to be a small Chapter.

The three Washington State Chapters have joined together to host the Pacific Regional Conference in 2007 which will be held in May of 2007 in Seattle, this should be a wonderful experience, and we hope that it will be well attended.

The Washington State Chapters have been busy planning the 2007 Pacific Regional Conference as a Team.

Washington (R/S) Chapter 57 adopted an employee husband's platoon with a 12 month tour in Iraq for the holidays. Needless to say, "the men of HHC C 52 Infantry were extremely appreciative for being remembered this holiday season." The Chapter is also working toward increased membership and participation through a membership drive.

EWADE (Spokane) had another successful year and delivered a few hundred dollars worth of school supplies to a local grade school, this going to the most needy grade school district in their district. The entire DDS office participates in this worthy cause. In December this chapter sponsored a Tree Sharing to needy children identified by the YMCA and Alternatives to Domestic violence program. All recipients were most grateful of the chapter's annual contributions.

Hawaii continues to be busy with their recruiting efforts.

Idaho continues to be one of the largest Chapters in the Pacific Region. They are still recuperating from the NADE National Training Conference in Boise in 2005. However, they did have a great "chili-cook off and Halloween contest" back in October, and at the time reported, they were planning to have a minor Valentine's Day celebration just to keep the chapter motivated.

The **Oregon** Chapter OrADE has been very busy as well providing fund raisers and training to the members. They continue to issue the "Pacific Wave"; a

wonderful and informative newsletter that we all enjoy. They continue to raise a lot of money for their Chapter doing various impressive and innovative activities, including their annual chili cook-off. They also assisted in the training of the new disability examiner class and offered an ice-cream social on their first day on the job. At the time reported, they were gearing up to having a combo food drive and appreciation luncheon to coincide with the Governor's Food Drive.

All three of the California Chapters after a few months recovery from the 2006 National Training Conference in San Diego are beginning to ramp up their activities once again. The California chapters are involved in fundraisers to be able to send a nice group of representatives to the Regional Conference in Seattle. California DDS has graciously agreed to pay for Registration for some of the interested members.

The **Los Angeles Chapter** met on 1/22/07 and elected a new slate of officers. The chapter is also looking at increasing membership and doing fund-raisers. The NADELA chapter is planning to have a picnic in May. The Educational Committee is planning to have training and is looking into presenters. Hopefully the chapter will be able to help send some members to attend the Regional Conference in Seattle in May 2007.

The **Sacramento** chapter is also in the process of doing membership drives.

In **San Diego**, the chapter is in the process of becoming more formal. The San Diego chapter has become very interested in making NADE Certification one of the most important goals for the year.

Southeast:

The Alabama chapter (AADE) has organized four fundraising Bake sales and "Casual Day" events since September '06. Their December Charity Silent Auction raised \$1,300.50 for the Glenwood Autism and Behavioral Health



Across NADE Today
Voices From The Field, continued

Center that works with the cares for persons with unique mental health disorders. They are also working very hard on putting together the 2008 SE Region Training Conference. The president of AADE is Louise Liveoak.

The **Louisville, Kentucky chapter (DCADE)** has been very busy. They collected donations of hats, gloves, scarves, and socks to donate to the Phoenix Health Center who distributes them to the homeless in the community. The Chapter also collected donations for a needed family. The gifts included blankets, towels, silverware, books, Bath and Body sets, toys for all the children, clothes, and shoes for all members of the family. The president of DCADE is Marcella Allen.

The **Florida chapter (FADE)** has been sending out information on their chapter to the staff state wide and has had some increase in their membership. The president of FADE is Ron Atchison.

The **Georgia chapter (GADE)** has coordinated many activities including a blood drive, a Halloween social for all the agency employees, which included a costume contest and goodies for all staff members, and a welcome back brunch for all GADE members and their guests. They also sponsored a Christmas "Angel Tree" project to fulfill the "wish lists" of 11 children in foster care. The president of GADE is Sharon Stone-McGlade.

The **Frankfort, Kentucky chapter (KADE)** – no report received. The president of the KADE chapter is Regina Sims.

The **Mississippi chapter (MADE)** is making plans to start up their Lunch and Learn sessions and the fundraising committee is planning for upcoming events. The MADE hosted a Heart Awareness Screening on February 22, 2007 presented by one of the local hospitals. They also planned a project for Organ

Donation Month. The president of MADE is Charlesetta Blanchard.

The **South Carolina chapter (SCADE)** our news chapter has been very busy. They held a member drive, sponsored fundraising projects, and assisted in the provision of training/professional development for the staff. They have been actively recruiting members. Approval has been received for SCADE to hold the 2010 SE Regional Training Conference. The president of SCADE is Dr. Lisa Varner.

The **Tennessee chapter (TADE)** has been busy since being awarded the 2008 bid for the National Conference at the New Board meeting in Boise. They are engaged in the fundraising stage to accomplish an event of this magnitude. The president of TADE is Daniel Carr.

The **North Carolina chapter (THADE)** has hosted several fundraisers and charity activities. THADE members participated in the NCCDS Christmas Project of adopting families for Christmas. THADE awarded their \$500.00 annual scholarship to a THADE member's daughter who is attending Appalachian State University. They have also continued to have their Lunch and learn sessions. The president of THADE is Martha Long.

Southwest:

Arkansas (ARKADE)—continues with their usual activities and fundraisers. A garage sale, sundae sales, and a pizza fundraiser are just a handful of the events held in October. The chapter held a Thanksgiving bake sale and a Holiday basket and backed goods silent auction. They have donated funds to Salvation Army Thanksgiving Fund, Arkansas Food Bank Network, Union Rescue Mission and a prison ministry that buys toys for inmates to give to their children. Arkade started a new agency newsletter in January that focuses on SSA news, Arkade events, and news and people in the agency. At the NADE conference

they were awarded first place in the membership contest for medium chapters. They added four new members at the beginning of the year.

Baton Rouge, Louisiana (BRADE)—has not really been active this year. They still are functioning as chapter but have very few members.

Shreveport, Louisiana (LADE)—has been fairly quiet since the NADE conference. They have been in a DDS production crunch and that put a hold on all non production activities. Despite these restrictions they managed to add 3 new members from the newest examiner class. They collaborated with an office committee to host an IDA certification celebration. They were awarded 2nd place in the National Donate Life contest at the recent NADE conference. They are actively involved in their annual membership drive and are preparing for upcoming celebrations and fundraisers.

New Mexico (NewMADE)—still working on 2007 Southwest Regional conference to be held in Albuquerque, NM April 18-20, 2007 at the Marriott Pyramid North. They received the NADE President's Award for outstanding chapter for the second year in a row. CJ August was elected NADE secretary. The hosted the annual Trick-or-Treat event for children. They held a media sale and food events for continued fundraising for the SWADE conference. The chapter sponsored a flu shot clinic. The chapter welcomed their largest training class with various NADE items and hosted an arts and crafts fair, and held their annual food drive for the Roadrunner Food Bank. They held a charity drive for an emergency shelter for women and children. They also collected donations for The Giving Tree. They sold 25 dozen luminarias as part of the ongoing fundraising for the SWADE conference. A silent Auction was held where almost \$600.00 was raised.

Oklahoma (OKADE)—held a couple

of craft fairs, a silent auction, and a raffle for 2 Thanksgiving baskets. They raised \$800.00 to donate to their Christmas Charity.

South Louisiana or New Orleans (SLADE) —they held a food drive at Thanksgiving. They had an offsite get together after work at a local restaurant to discuss then NADE conference in San Diego.

Texas (TADE)—continues to fight for recognition by their parent agency. They completed an independent CPA audit and are still working on rewriting an Operations Manual. TADE continues with monthly Brown Bag lunch training sessions. Attendance at these has grown considerably in the last year. TADE was able to financially assist some members to attend the NADE conference in San Diego.

Mid Year Board Meeting

NCSSMA Voices Budget and Staffing Concerns

Field Office Managers' Issues Affect All In The Disability Field

by Donna Hilton, NADE Publications Director

THE NADE BOARD WELCOMED NCSSMA President Rick Warsinskey and Rachel Emmons, a government relations lobbyist for NCSSMA. NCSSMA is the National Council of Social Security Management Associations. Mr. Warsinskey is in the second year of his term as president which ends in November. He stated that he had met with the new SSA Commissioner, Michael Astrue. From his meeting, Warsinskey got the impression that the new commissioner will be moving fast and making major decisions. Is he moving too fast? According to Warsinskey, Commissioner Astrue is getting fast briefs from SSA executives. Warsinskey indicated that the major problem Astrue faces is the hearings backlog; there is a 725,000 hearing backlog; which will become a million by 2010.

Warsinskey is concerned about progress lost each time there's a new commissioner, wanting to make their mark. Astrue had indicated he intended to create a plan by April 15th and considering major changes which will impact the process.

Field offices are facing major problems. Answering the phones is a low priority when they are having to use more and more staff for interviewing. There was an explosion of applications from the Medicare changes. SSA card application changes require more work. They are torn between helping the voices on the phones or the crowds standing before them.

Budget concerns are still a focus for NCSSMA, as they are for NADE. Last year they were able to contact everyone with an interest in SSA and even some outside of government, such as AARP, to assist in making contacts with key people. Even though last year's budget was below what was needed, it would have been much worse without the assistance of various groups, including NADE. Furloughs were a real possibility had the original budget have been enacted. This year's proposed budget is even worse. The President's proposed budget was several million below the SSA requested budget. The 843 million requested by SSA would allow field offices, DDSs, and hearing offices to work down backlogs. Tax payers are not getting the service that they are paying for in their SSA taxes. The number one Social Security concern is the disability program. Better networking with the legislators is needed to make them aware of how tight the resources are stretched to try and do the volume of work that is faced.

NCSSMA has prepared a one page flyer to leave with the various contacts. He suggested that if NADE members can arrange to meet with members of Congress when they come back to their home district, you stand a better chance of getting their ear. The budget fight affects all of us in the disability program.



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Mid Year Board Meeting

NCDDD Shares Its Voice With NADE Board

by Donna Hilton, Publications Director

Attendees: Kay Hoffpaur (LA), President
Robbie Watts (VA), President-elect
Vicki Johnson (CO), DSI Chair
Kathy Johnson (OH), Treasurer
Craig Schudy (NV), Secretary

Point of Information - Noelle Taylor (OK Director) serves as the NCDDD Liaison to NADE.

NCDDD PRESIDENT KAY HOFFPAUIR opened her comments by stating, "We're all in this together to make the disability program better. I want to take this opportunity to tell you how much we value your association. I see what you do in providing training opportunities for the staff." She noted that many states don't have the resources to provide the level of professional training and development that NADE provides. The conferences are a good thing for staff. She indicated that NCDDD will have directors at all conferences to show support.

President Hoffpaur shared that she talks regularly with NADE President Chuck Schimmels and referred to the recent letter that they co-penned and sent to all DDS Directors. That letter was published in the Winter issue of the *NADE Advocate*. It encouraged DDS Directors to allow staff to attend one of the training opportunities offered at the NADE regional conferences being held this spring.

Ms. Hoffpaur itemized some areas of concern to NCDDD and described how their efforts have been focused in recent months. NCDDD has members on the Retention and Recruitment workgroup. NCDDD will be making recommendations soon on how to offer benefits and salaries that will enable them to recruit top caliber people.

A "down time" study led to a Service Level Agreement with SSA. The agency is working toward having a system that will significantly decrease the amount of "down time" and become more stable.

A long term CDR workgroup is

looking at how best to maintain a steady level of reviews.

NCDDD is trying to get quarterly meetings set up with appropriate SSA officials help to bring issues to the table with more regularity.

NCDDD surveyed the Medical Consultants on the issue of how many held board certification in their areas of expertise. The results showed that, although all DDS medical consultant staff are licensed, half may not be board certified.

A recent vocational survey was done to see what resources were in the DDSs and to determine what would be needed. They also do an annual salary survey. Kathy Johnson is the survey guru using "monkey.com".

NCDDD also met this week with the house subcommittee and senate finance committee. There is a bi-partisan committee working on an agreement to consider taking CDR and redeterminations off line from the appropriations that are capped. This proposal also gives SSA additional funding for CDR & redetermination workloads. The committee planned to contact SSA to be sure that this is favorable to SSA and the commissioner.

SSA is looking at ways to improve the computer system and to identify resources to enhance performance. Robbie Watts indicated that "it's very important from a training point of view and gives DDS staff a professional identity." The system now being used is an amalgamation developed rapidly and mostly in Baltimore: EDCS at FO, eView to see images, EFI-electronic folder in-

terface, EERE, FECS (front end capture system, which is the weak link in the system). A Service Level Agreement was obtained to ensure system up time and hammering out what standards have to be met. The SLA:

1. guarantees 96% up time – all systems down not included
2. small and med size images will return in 18 seconds, large documentss will come back in 34 seconds.

The average in first quarter measured met the goals. Now the DDSs are pushing for 14 and 25 second image return. The systems performance was to be the same regardless of size of state agency.

NCDDD were pleased when SSA agreed to review the performance of every component plus the problem desk. They get weekly updates on the performance from the previous week. System performance over the last year was poor but SSA is learning what they don't know about the various component systems and is working to make improvements. ODD is involved in the Service Level Agreement and agreed that there should be an adjustment in production expectations when the system is a problem. When there is a failure, it enables the systems staff to have documentation, which can be used to demonstrate a need to secure additional resources for system programs. Also, the systems staff had weekends removed from the data considered in how the overall business system works.

A big discussion item was that SSA

NCDDD is one with NADE in support for keeping the SDM process.

didn't count the AS400 down times in California because SSA doesn't managing that system. They were using an industry standard instead of the actual impact on the system wide impact. NCDDD feels that SSA should count all DDSs and the time lost when the system is down, and include the field offices (FO) as well. Field offices are not usually affected which allows the statistics to skew the numbers from DDS on down time data. It is time for SSA to take a freeze time and go back to fixing the "work arounds" in eDIB. They should fix the number of exclusions, cases that aren't in electronic folder, and fix the ERE posted electronically but requiring bills by regular "snail" mail. NCDDD proposes SSA finish one system before moving on to any more changes. SSA had proposed CDRs be done in electronic format but CPD would be a paper file – forever. ODD supported NCDDD refusal to do the work this way. Ruby Burrell has told them that there will be an eCDR coming out. Kay Hoffpauir stated that there needs to be clear instructions on what will be taken out of old CDR folder and scanned.

Regarding a question, is the fiscal system being worked on? At the Mid Year meeting, there had only been one phone call since December. The workgroup is on the books and maybe someone is thinking about it. It has to be a process that is good for the sources in the field and the staff in the DDS that will work with it.

Kay Hoffpauir asked that NADE share with the members that NCDDD is vigilant and trying to get SSA to keep improving business process and system performance.

Before addressing DSI issues, Vicki Johnson offered a thank you to NADE for having a good relationship with NCDDD. She has been a NADE member since 1982 when she was an examiner in Wyoming. She felt the NCDDD/NADE co-written letter was a great collegially act in showing support for training for staff. DSI states are not getting any feedback and are eager to hear anything on future plans. QDD structure would be positive. She did not know anything firm on roll-out dates as yet.

CAPA was a precursor to e-CAT; a support tool that gives consistency and can be used as a training tool also. The first plan was to write a good rationale but the bells and whistles added have slowed it down how it works. The template is the biggest work around developed and is not user friendly.

The FedRO (Federal Reviewing Official) does not have access to set up CEs so the DDS must handle those for them. SDM has been put back on the table. NCDDD is one with NADE in support for keeping the SDM process.

Request for Policy Consultation (RPC) – When DDS receives an error on a case or "a bounce" from DQB, it can request a review on policy issues. A message goes to DQB at the same time that the request goes to Baltimore. The RPC panel involves medical, vocational, and policy people to review the file. Boston rolled out RPC in August; Denver rolled it out on Sept 1, 2006. Quality and consistency are a focus of the RPC panel. An interesting note is that Boston with high allow rate was paired with

Denver, which has a low allow rate. Colorado supports RPC and first results have been interesting. Onset issues have jumped out for discussion. On average, a review takes three days. Vicki stated, "We're very encouraged that we want to do the right thing by the claimant. Over 50 percent involve medical/vocational decisions, so it is good to have more feedback on policy."

Kathy Johnson stated that NADE brings the voice of the front line, a different and very accurate dimension to the discussions with SSA. A systems data and spreadsheet was prepared to demonstrate why production was down this year, as opposed to usual high production provided by DDSs. It provided time by region when eDIB started compared to time between being IDA certified. The longer states are involved in eDIB, the smaller the decline in production, i.e. there is a learning curve. CDRs are down so totals are down. The push for initial cases caused a rise in reconsideration cases. Overtime was significantly reduced, except for systems fixes. Total FTEs are down five percent across the nation. There is a 10 percent reduction in workloads that has led to lower production. Many states have inexperienced staff – in some DDSs, the majority of examiners have less than two years experience. Dual production systems - paper and electronic - cause production to drop. NCDDD has impressed on SSA the need for hiring. Kathy reminds her staff that "the numbers are actually people and how the public is being served."

The NADE Board expressed their appreciation to NCDDD for sharing their "voice" and similar concerns to SSA

“We’re all in this together to make the disability program better. I want to take this opportunity to tell you how much we value your association. I see what you do in providing training opportunities for the staff.”

- Kay Hoffpauir, NCDDD President

Southwest/Great Plains Regional Conference

The Voice of OIG - Inspector General Patrick O'Carroll Jr.

PATRICK O'CARROLL, JR. IS THE Inspector General for the Social Security Administration. The Office of the Inspector General, or OIG, has a workforce of over 600 auditors, attorneys, evaluators and investigators nationwide. Mr. O'Carroll shared some of the innovative ways in which OIG identifies and combats fraud in Social Security's programs and operations. Mr. O'Carroll reported that due to the cooperative disability investigation, or CDI units, SSI has been removed from the federal list of high risk programs for fraud. There are nineteen CDI units in seventeen states. For every \$1.00 spent in the CDI units, there is an estimated \$10.00 in savings from potential fraud. This savings is calculated based on the assumption that each fraudulent claim would normally be paid for three years, although the average is five years from the time of an allowance until a CDR.

When asked what percentage of SSA claims Mr. O'Carroll and OIG projected would be fraudulent, Mr. O'Carroll responded that a percentage of fraud is always difficult to estimate. He reported that an SSI study on over-

payments found a four percent rate of fraud and that banks commonly estimate about a seven percent rate of fraud in their programs. He also observed that in England and many other European nations, they assume about a 7-8% rate of fraud in social programs. This number can be thought of in two different ways: first, it could be argued that more cases have the potential to be referred to CDI units. However it could also be argued that 4-7% is a very small margin, demonstrating that most disability claimants are trustworthy and credible.

The CDI units have had over 1600 cases opened, more than 1500 cases closed, over 1200 claims denied or terminated, with \$74 million in projected SSA savings, and over \$47 million in projected non-SSA savings from programs such as Medicaid, Medicare, etc.

After hurricanes Katrina and Rita, OIG opened 57 investigations for fraud related to hurricane relief, bringing 47 arrests, 42 indictments, and 28 convictions.

OIG has found that the average



*Patrick O'Carroll, Jr.
Inspector General for the Social Security Administration*

time for QDD decisions (Quick Disability Decisions), are being completed at an average of nine days well within the twenty day goal set by SSA. OIG is suggesting to SSA to prioritize SSI claims and Title II claims that have an onset of greater than five months ago, since Title II claims with a current onset are not payable during the five month waiting period anyway.

Mr. O'Carroll role also noted efforts by OIG have brought about the arrest of twenty six offenders who had been receiving Social Security benefits.

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Training conferences are a great opportunity to network and make new friends. Dean Crawford (right) greets Dana Dominquez of New Mexico and congratulates her chapter on hosting a great bi-regional conference.



Speaking of DSI ...

DON SINGEWALD IS THE DSI project manager in the Office of Disability Determinations in SSA headquarters. He spoke to the SWADE and GPADE bi-regional conference in Albuquerque New Mexico about the status of DSI (Disability Service Improvement) in the Boston region. Mr. Singewald indicated that most changes within the DSI plan will require a regulation change, which will be time consuming.

The quick decision (QDD) component of DSI is considered successful and is likely to be rolled out nationwide. They currently have a 98% allow rate. A predictive model computer program flags cases likely be allowed quickly as QDD. In future releases of legacy software, cases flagged as QDD will be assigned to an examiner automatically, one day after they are sent to the DDS, unless DDS takes other action with them. In the Boston region, 2.6% of the receipts have been designated QDD. Currently there is a twenty day window for the decision to be made on QDD cases; however, this is an issue that is being discussed as a parameter to be modified before rolling out to further regions.

If any components of DSI end, that gives the potential to free up funding for use in other aspects of eDIB like out-bound fax and ERE, or parts of DSI that will likely be kept, such as QDD.

The Federal Reviewing Officer (FedRO) role has raised lots of questions at many levels in SSA. To date, 5000 cases have been received into the FedRO, 400 have been closed, with a 23% allowance rate. Most FedRO cases have involved requests to the DDS for additional evidence such as MER or CEs.

The DDS rationale system used in DSI, eCAT, has had stability problems in both of its first two releases. The new Commissioner of Social Security suspended use of eCAT as well as the alternative template for rationales, and instructed the DDS to just use standard forms such as the RFC, PRTF, or 538. A group is to be meeting to review eCAT, CAPA, and to consider what type of program to build to meet DDS needs. SSA is continuing work on eCAT in the interim. One question that Mr. Singewald raised was whether the DDS needs a tool to lead them through sequential evaluation and to fill out forms.

The request for program consultation, or RPC, has been well received by DDS and SSA components. RPC replaces the rebuttal process when a DDS disagrees with a return, making this previously adversarial issue more of a learning and policy clarification tool. This is one component that will not require a regulation change to roll out. An announcement is expected soon, anticipat-



*Don Singewald
DSI Project Manager*

ing RPC to roll out within the next six months. RPC has its own web page cataloging these case discussions and providing tips for the DDS in a searchable format. With current staffing, SSA anticipates that it can handle 33% of the expected national workload for RPC, which is to have a seven day turnaround time for response, so SSA is prepared to bring people in on detail to man this operation.

Lastly, Mr. Singewald indicated that in the Boston region, there has been no significant impact on allow rate, reconsideration reversal, PPWY, or processing time, other than those experienced at the national level. Stay tuned, we're sure to hear a lot more about the components of DSI in the next several months.



Future Leaders Needed To Speak for NADE Membership

by Ruth Trent, Nominations Chair

THE NADE NATIONAL CONFERENCE is approaching and it is time to consider running for a national office. We are accepting nominations for the positions of NADE President-Elect, Secretary and Treasurer. The election will take place during the General Membership Meeting at the 2007 National Training Conference to be held September 15-20, 2007 in Sioux Falls, South Dakota.

The qualifications necessary to be a candidate are to be a member in good standing, a desire to promote the continuing positive impact of NADE on Social Security disability and a willingness to commit your time, energy and ideas to the advancement of the National Association of Disability Examiners.

Are you committed to advance NADE through your ideas and efforts? If so, express your interest by submitting a recent photograph and a brief resume announcing your candidacy to a Nominations Committee Member no later than June 8, 2007. By doing so, you will insure that your candidacy will be announced in the summer edition of the NADE Advocate. Past practice dictates that nominations be accepted from the floor during the General Membership Meeting at the NADE conference, but the advantage of exposure goes to those that submit their interest in candidacy in advance!

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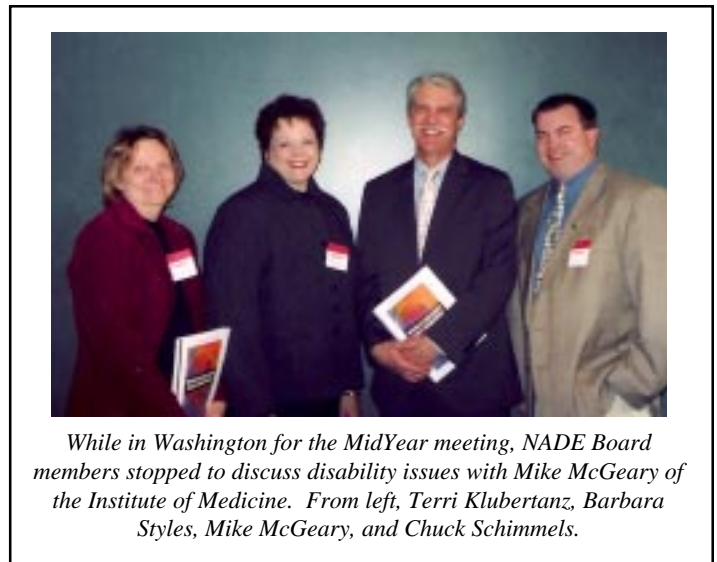
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The 2006-2007 NADE Board met in Washington DC for the annual Mid Year Board meeting. This meeting offers an opportunity for the executive officers to meet with key SSA leadership and Congressional leaders. First row from left: Bill Dunn (Treasurer), Barbara Styles (President-Elect), Chuck Schimmels (NADE President), Shari Bratt (Past President), and CJ August (Secretary). Second row: Donna Hilton (Publications Director), Terri Klubertanz (DDS/SSA Liaison), Georgina Huskey (Pacific Regional Director), Debi Chowdhury (Council of Chapter Presidents Chair), Micaela Jones (Constitution & By-laws Chair), Mimi Wirtanen (Legislative Director). Third Row: Donnie Hayes (Southeast Regional Director), Susan Smith (Great Lakes Regional Director), Anne Graham (representing the Mid-Atlantic region), Brianna Wilson (Ad Hoc DSI Committee Chair), and Susan LaMorte (Northeast Regional Director).

Chief Quality Officer Speaks With NADE Board, continued from page 28

4. FedRO (Federal Reviewing Official) – Initially, every FedRO case is being reviewed: the first 200 allows and 200 denials. After completion of this 100 % special study, FedRO decisions will slip into a routine QA sample review process.

The FedRO will use the same standard of preponderance of evidence (same standards of medical evidence required by DDSs). The change at the end of the process for SOP (standard operating procedure) difference is with a proposed return going before an AAJ (hearings council judge) for “flash review”.

DDS net accuracy runs 97% and FedRO is running 95% at this time. This process is already building a backlog looking at the 20-22 allowances by the FedRO. The FedROs have not had a large allowance rate so far. Looking at the reversals from a forensic view –SSA is looking at why and how - was it the vast pool of medical specialists (shared resource of federal DDS medical specialists) available to provide input that allowed the case with the same evidence? The thirty FedROs received two weeks of medical training by physicians in OMP. It’s early so SSA needs to see how this evolves.

5. RPC (Requests for Program Consultation) – Mr. Croft noted that this is well liked by his office – considers it a smart move.

A panel of program analysts is charged with looking over Boston and Denver Region DDS error rebuttals. So far the panel has mostly agreed with the outcomes. SSA is ready to recommend a national roll out. Mr. Croft asked the DDSs to look on the RPC website prior to sending in an RPC to see if a similar issue has been reviewed previously. A second signoff and review are required before a case returns to the DDS. Requests for Program Consultation should be on issues that are of importance and haven’t already been decided.

“We want to make changes which will provide quality results, not just make changes for the sake of change.”

- Kelly Croft, SSA Chief Quality Officer

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Mid Year Board Meeting

Kelly Croft, Chief Quality Officer Speaks With NADE Board

by Donna Hilton, Publications Director

THE NADE BOARD WELCOMED the opportunity to have Kelly Croft, SSA's Chief Quality Officer, attend the Mid Year Board meeting. He began his visit by telling the Board that he was open to comments, questions, and advice.

Mr. Croft described the new commissioner as calm and even keeled. He noted that, although Commissioner Astrue came to the position very well informed, the vast legions of acronyms are a learning curve all by itself!

From the new process perspective:

1. SSA has a couple of large pilots underway to study methods for getting better quality products sent from field offices to DDSs. Pilot cases are sent from: Dallas FOs (field offices) to Austin DDS; and upstate New York FOs to Albany DDS.

This is a team effort with representatives from DDSs, FOs, and the Office of Quality Performance studying ways to improve FO quality, especially training and orientation. CRs (claims representatives) were pulled off line for eight hours for training. (Mr. Croft comes from a field background and this is an area of interest/concern of his.) In this study, the SSA Area Director assigns a person to review FO actions in the DDS, and report back to the Area Director and the involved FO about the quality of the FO. Using an FO FTE (full time employee) position in the DDS is a key element and a key commitment to keeping track of quality. This is a co-project with Linda McMahon. There have been many attempts in the past to improve the process, but there is hope this time is the charm.

2. DSI – QDD pilot – was to review the first 100 decisions from each of the states up through March.

Very few substantial errors have been found, processing time is good; reviews were done in two days or less. While Mr. Croft realizes most states have a triage system in place; this model gives more formality to the system.

“We want to make changes which will provide quality results, not just make changes for the sake of change.”

- Kelly Croft, Chief Quality Officer

3. eCAT – There have been technical problems.

No studies have been done yet because the eCAT tool has not been used enough. Early indications are that the additional adjudicator time involved in completing the screens might be a concern but that could diminish as eCAT is improved. eCAT removes substitution of judgment from the review process.

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