

NADE



THE ADVOCATE

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ASSOCIATION OF
DISABILITY
EXAMINERS

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2020



NADE: We're Separate, But United!

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Visit

<http://www.nade.org/about-nade/nade-corporate-members/>

for information about becoming a corporate member.

President's Message

Greetings my NADE family!

I hope that you all are remaining healthy and well! This is an unprecedented time for all of us. NADE had some difficult decisions to make regarding this year's conference. I have worked closely with the NADE board to come up with the best way to approach elections and officers this year. At this point, we've asked officers and board members to remain in their positions. I want to thank the current board and committee chairs for continuing in their positions, and for their dedication to the roles they serve.

The National Training conference scheduled for August 2020 in Helena, MT is postponed to 2021. The new dates: August 15-19, 2021. Please plan for this so that we can have the best attendance possible!

We realize that some of you have worked very hard this year and deserve recognition. The NADE award nomination deadline will be extended to accommodate DDS offices due to closures. Please consider nominating your NADE coworkers for a NADE award!

The mid-year Board meeting was held Feb 24-25, 2020 in Baltimore. We were privileged to meet with the Office of Disability Determination (ODD), Office of Disability Policy (ODP), DCPS and Gail Ennis, the Honorable Inspector General. Capitol Hill visits were cancelled this year, but we are still working to support you and make sure our voice is heard. We have held conference calls with Office of Management and Budget regarding the COVID-19 pandemic. We also continue to have quarterly conference calls with Office of Disability Determination (ODD).

As NADE members and DDS employees, our job is to provide the best customer service possible. We know that there are challenges due to the pandemic, but each of us is doing the best we can to navigate through these uncharted waters. We are all in this together and will prevail as we have always have. Remember: safety first! I challenge each of you to keep up your enthusiasm for NADE because there is no better time for your voice to be heard. Email your chapter President, your RD, me, whomever you choose, but let us hear from you. Thanks for your dedication and allowing me to represent you.



Sara Winn

NADE President

Inspector General Attends Mid-Year Meeting

By Todd Deshong



From left: Senior Auditor Nicholas Moore, Assistant Special Agent-In-Charge Conor Washington, Dr. Bland-Brady, Sarah Winn, Inspector General Gail Ennis, and Marjorie Garcia

The NADE Board was pleased to host the Inspector General of Social Security, Gail S. Ennis. Inspector General (IG) Ennis discussed relevant issues and the Board shared their views and concerns. Topics included Social Security impersonation scams, the reconsideration reinstatement progress, proposed changes to medical CDR diaries, the new Allegation Referral Intake System (ARIS), and CDI expansion.

IG Ennis began with the recent increase in Social Security impersonation scams. She cited some instances in which the telephone scammers defrauded claimants and citizens. The IG and Board discussed the collateral damage the scams cause, such as difficulty communicating with individuals who are fearful of such scams. The IG mentioned she had heard of similar impacts on SSA field offices. The Board concluded that the scams are creating difficulty throughout the system.

The NADE Board stated their support for SSA unifying the disability process nationwide by reinstating the reconsideration step. They discussed numerous issues with representatives at the reconsideration level. The Board suggested the OIG consider looking at the issue of representatives who seek denial at the reconsideration step so they can push cases to an ALJ hearing.

The IG raised the issue of switching the fraud/similar fault referral system from the e-8551 system to the new ARIS. The Board noted many difficulties with the new system in that it is not as user-friendly as anticipated, and OIG has had difficulty integrating the information into its National Investigative Case Management System. The Board even noted that ARIS name is similar to a system already in use—the Automated Incident Report System or AIRS. The IG thanked the board for the input and expressed interest in getting DDS input for future updates to the system.

When discussing proposed changes to medical CDR diaries, the Board favored updating the definition of the MIE diary to include review at 24 months rather than 18 months, but not a new 24 month diary as outlined in the NPRM due to issues with Medicaid/Medicare eligibility. The Board expressed its desire to provide input on the proposed changes, and the IG agreed this seemed appropriate.

With respect to CDI, the IG noted a trend of declining referrals from the DDS even as CDI expansion continued nationwide. In 2015, when there were 28 CDI units, there were about 6,170 referrals, or an average of 220 referrals per unit. In 2019, there are 43 units but only 3,543 referrals, or an average of 82 referrals per unit. The Board noted that some of the units had lost law enforcement partners thus causing a significant decline in local referrals. The IG noted that they are gathering data for SSA about the low number of referrals. Further, the Board noted that DDSs have differing business processes to adjudicate CDI disability claims. This creates difficulty in States in which the referring adjudicator continued to have assigned a case that CDI was investigating, affecting the adjudicator's processing time and performance matrix.

The IG and Board discussed other factors that could shed light on the declining referrals. These items included DDS adjudicators being wary because of the "trouble" of referring cases, previous rejections, uncertainty as to what case types to refer, and a general misunderstanding of what constitutes fraud or similar fault. The Board provided additional ideas regarding CDI, including providing "best practices" to DDS administrators for new CDI DDS analysts; creating a national SharePoint site for all DDS/CDI staff to compile best practices; and publishing best practices in the NADE newsletter.

The Office of Disability Policy also attended the mid-year board meeting and provided some policy updates.



From left: Gina Clemons, Dr. Bland-Brady, Sara Winn, Marjorie Garcia, Deborah Harkin and Steve Rollins. All three guests were from ODP.

TOP LEVEL ODD COMMISSIONERS ATTEND MID-YEAR

By Jennifer Nottingham and Gina Schwartz



Left to right: Grace Kim, Dr. Sharon Bland-Brady, John Owen, Sara Winn and Marjorie Garcia

NADE was pleased to have Grace Kim, the Deputy Commissioner of Operations and John Owen, Associate Commissioner of the Office of Disability Determinations attend the mid-year board meeting. Grace started by thanking NADE for our work representing those in the DDS as it helps them to better understand the needs of the DDS. She highlighted the accomplishments for the DDSs in fiscal year 2019. We processed 2.3 million initials and exceeded the goal by 16,000 claims. Over 500,000 reconsideration claims were processed. 703,000 medical CDRs were processed and the agency continues to maintain currency on CDRs. 109,000 Prehearing claims were processed along with 92,000 Disability Hearing decisions. The number of aged disability hearing claims pending over 240 days also decreased to less than 1%. The DDS accuracy rate for fiscal year 2019 was 97.4%. For fiscal year 2020, over 1.3 million initial claims were processed (at the time of the meeting).

The NADE board brought up an agenda item that was noticed in various regions. There have been problems seen where the DDS is contacted by an office claiming to be an appointed representative who filed the SSA-1696 with the field office but it is not in the electronic file. Grace mentioned that this is a customer service issue and someone has been appointed to look into the issue. They are trying to see if there is a way to automate the process. There were also concerns mentioned in how the appointed representatives are showing up in the DCPS claims as a 3rd party. John agreed to look into the issue.

At the beginning of January, new policies went into effect for failure to cooperate and insufficient evidence. John mentioned that this was the first time that a delayed implementation policy transmittal process was used. There ended up being last minute changes which led to discrepancies between what was published and the training, which caused confusion. ODD will go back to the DDSs to see where there are problems from the policies. The NADE board members shared feedback that the delayed implementation did cause some training issues and some states had to retrain people due to the delay. Most members also wanted more training guides.

Operations and ODD have been advocating for the DDSs to get single device set-ups (SDS) with docking stations. Many of the current workstations are out of warranty. SDS have been ordered but the contract process has been delayed and it will take longer to implement. SSA is also working with the legacy systems contractors and Microsoft to transition to Windows 10 operating system to resolve incompatibility issues prior for the SDS roll out. Once the compatibility issues are resolved, we will be prepared for an easier transition to Windows 10, and the agency will be better positioned to provide new laptops to the DDS. Systems continues to test the legacy systems compatibility and will consider initially rolling out the Windows 10 devices to individuals using DCPS exclusively, however the goal is to provide the SDS devices to all DDS employees.

IT Modernization is a broad set of initiatives across SSA. The initiatives that primarily effect the DDS are related to Electronic Evidence Acquisition. The gold standard for acquiring evidence is HIT because the evidence is received as data. This allows using automated decision support tools like MegaHIT to create an alert if the case may meet a listing. As part of this initiative, SSA is trying to bring on as many HIT providers as possible. DDSs are encouraged to notify their regional Medical Professional Relations Officers (MPRO) if you become aware of a medical network updating their medical records system. For medical sources where HIT is not an option, Electronic Records Express (ERE) is the next best option. SSA contracted with Leidos to recruit ERE providers. The Outreach Team recruited 293 providers last year. They have also created ERE training videos and have cleaned up the ERE accounts not used. IMAGEN is another tool that is being developed for the DDSs and is currently being piloted in Iowa and California. It uses Optimal Character Recognition (OCR) to turn images into data, allowing users to sort and search information within the document viewer. Initially, the tool was limited to viewing MER evidence (document types). However, the latest update now allows users to review most document types used in DDS case adjudication. Systems also migrated the software to the Cloud, increasing its scalability to be expanded to additional sites with three more sites to be added soon. The development team will continue to work on functionality prioritized by the pilot sites, including adding an automated process for 'categorizing' MER evidence that needs to be sent to the CE provider, which requires a workaround at this time.

The Commissioner of Social Security has focused hires on front-line services in order to improve customer service and the customer experience. That includes new hires working in the FO, on the national 800-number, and in the DDSs. This year's budget has allowed a higher rate of replacement hires in the DDSs with approximately 1,300 new DDS hires across the country. The budget also allows for overtime. Initial claims processing time has increased significantly in the past couple of years. One of the agency's focus areas will be mitigating factors leading to that increase.

The NADE Board greatly appreciates the time that Grace Kim and John Owen spent to share information and answer questions.

DCPS Updates

By Sabrina Sternschuss

This year, NADE had the honor of welcoming Derek Pulliam and Mary Lindauer to our Mid-Year NADE conference in Baltimore, MD to discuss the pending updates for the Disability Case Processing System (DCPS). This system is a user-friendly program that has been developed by SSA for use nationwide. As of the month of February, there were a total of 35 states in ten regions using this system, with another three states to join at the end of March. As of the date of this presentation, there had been 278,212 DCPS cases receipted with 172,491 determinations made and 89,252 pending.

During the presentation, we learned more about the transparency of the system, and how open forums have helped with the development of the program. Some of the groups discussed included the Community of Practice (CoP), used to help direct necessary changes to the system. Mr. Pulliam and Ms. Lindauer also discussed the User Experience group (UXG) and DCPS User Integrative Team (DUIT) groups. They both show users the DCPS system demos, as well the screen reviews. The developmental team also has regular meetings with the Business Intelligence Training Subgroup as well as the Administration Dashboard and Decentralized Subgroups. These meetings often result in changes of the system and help prioritize user needs for future updates.

Mr. Pulliam and Ms. Lindauer provided us an in-depth demonstration of the system. The demo showed us how far the system had come including improved navigation. We discussed the new updates that will be released in March, which include the ability to complete concurrent DDEs, as well as a new section for the remarks on the 831. They were very receptive of NADE members' thoughts, questions and concerns regarding the system. Some of these included how notes print on the worksheet along with messages from the medical consultants.

NADE appreciates Mr. Pulliam's and Ms. Lindauer's presence at the conference, sharing the amazing changes and progress DCPS has made. We look forward to seeing the future enhancements of the program.



Left to right: Marjorie Garcia, Mary Lindauer, Derek Pulliam, Dr. Bland-Brady, and Sara Winn

National Disability Professionals Week

National Disability Professionals Week (NDPW) is a chance to celebrate our NADE members and all the hard work they do throughout the year. Each year, chapters plan games, lunches and fun activities for their members, centered on the year's chosen theme. The NDPW committee is proud to announce this year's theme: **'20/20 Vision: A Clear Vision for Wise Disability Decisions.'**

NDPW is traditionally celebrated during the third week of June each year. However, this has not been a traditional year. We have chosen to postpone NDPW for the time being. No date has been set. The NDPW Committee will update chapters as the COVID-19 response changes over the upcoming weeks. Fear Not! We will still celebrate and award prizes to the winning chapters.

When the time comes, each chapter will submit a summary of their events for the week to the NDPW committee. The submissions may be as simple as a written summary, or they may include pictures. In previous years, chapters have submitted essays, picture collages, or put together a flyer type presentation with pictures and discussions of the event. However, the committee requests that submission not be PowerPoint presentations. The committee will choose the top two celebrations to receive the annual prizes. The 1st place award is \$25; 2nd place wins \$15. A \$10 award will go to the chapter who suggested this year's theme.

We look forward to seeing each chapter's celebration. If you have any questions, please email the committee chair at marcia.golden@ssa.gov.



NADE Retiree Members: A Valuable Resource

An Interview with Terri Klubertanz

Terri, tell me about your career at DDS.

I started at the Wisconsin DDS in 1980 as an initial claims disability examiner. I was promoted to a disability claims adjudicator to do CDRs and reconsiderations. Then I was promoted to unit supervisor. I served as a unit supervisor for 15 years, and then as QA manager for the last eight years of my career at DDS.

After I retired from DDS in 2007, I joined SSA in the Chicago regional office as a disability program expert in the Center for Disability. I was promoted to Team leader. Then, I left the Center for Disability to become a branch chief in the Chicago RO Disability Quality Branch. I retired from SSA in 2013.

When did you join NADE?

I joined NADE around 1981. I served as the WI Chapter president for several terms, as Great Lakes region secretary, vice president and president for a number of years. On the national level, I served as Great Lakes regional director for 6 years, NADE president-elect, president, past president from 2002-2004, and then as the SSA/DDS Administrators liaison. Currently, I serve as the Strategic Plan chair.



Why did you decide to continue your NADE membership after you retired?

I want to continue to support the organization and the goals NADE is working toward. I'm still interested in the program's policy and technology changes, as well as budget and workloads.

What unique things do you think retired members can bring to NADE's table?

I think belonging to NADE as a retiree offers an opportunity to continue to support the organization and its goals, as well as provide input to the organization. As a long-time member, I feel that I can offer some historical perspective on some of the issues facing NADE and how NADE has developed some of its positions in the past. NADE offers the opportunity to share feedback and insights not only with other DDS staff in other states, but to SSA staff.

What can retired members get out of NADE?

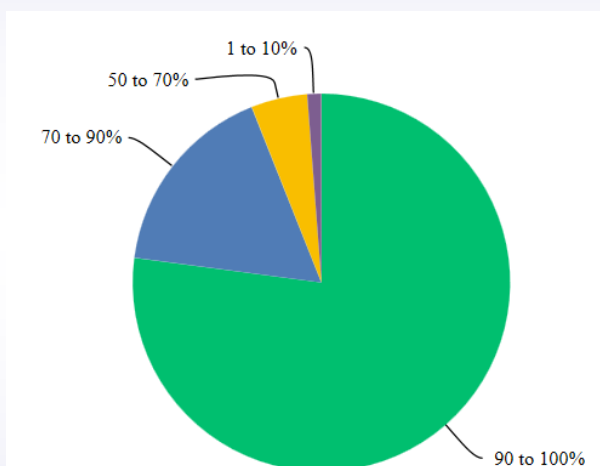
I continue to believe in the valuable service that NADE offers to the disability profession. I think belonging to NADE as a retiree offers an opportunity to continue to support the organization and its goals, as well as provide input to the organization. I continue to believe in the valuable service that NADE offers to the disability profession. I have made some wonderful friendships over the years and continue to communicate with my NADE family in retirement. With all the challenges facing the program, NADE continues to provide that positive support to all members, including retirees.

COVID-19 Impact Survey

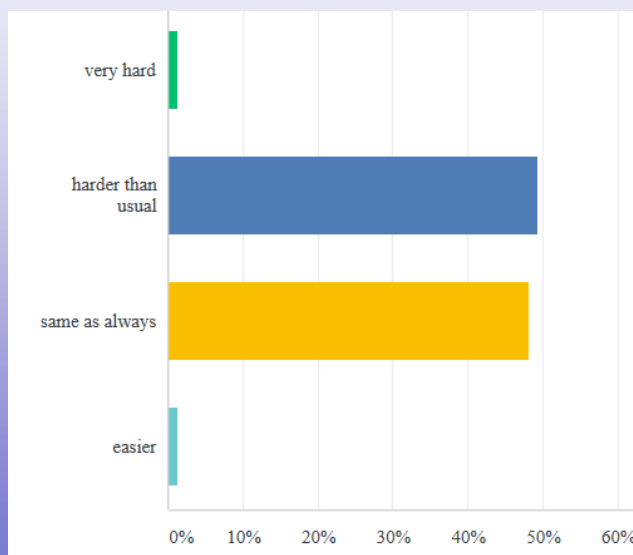
During this unprecedented time across the nation, we wanted to know how the COVID virus has affected your work. We sent a survey to all the regional directors for distribution to chapter presidents, in hope that people on the front lines of disability determination analysis, support and processing would weigh in. We received 83 responses! Unfortunately, some offices were shut down completely for the month before the survey went out, so their answers aren't represented. They weren't working from home *or* in the office.

Please note that where a state or region is identified, the respondent gave permission. Those who didn't identify their locale or didn't give permission to publish their location are identified as, 'anonymous.'

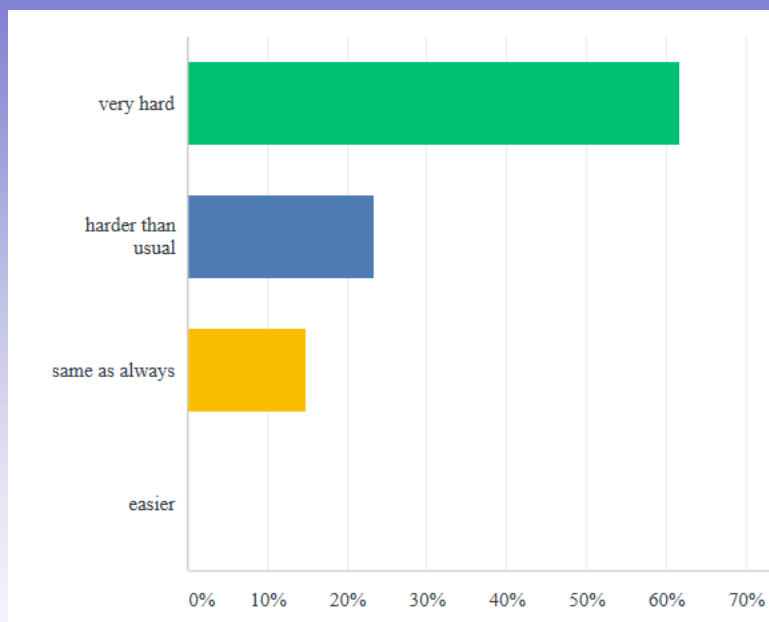
1. What percentage of your office staff are working from home, including analysts, development team, managers, etc.?



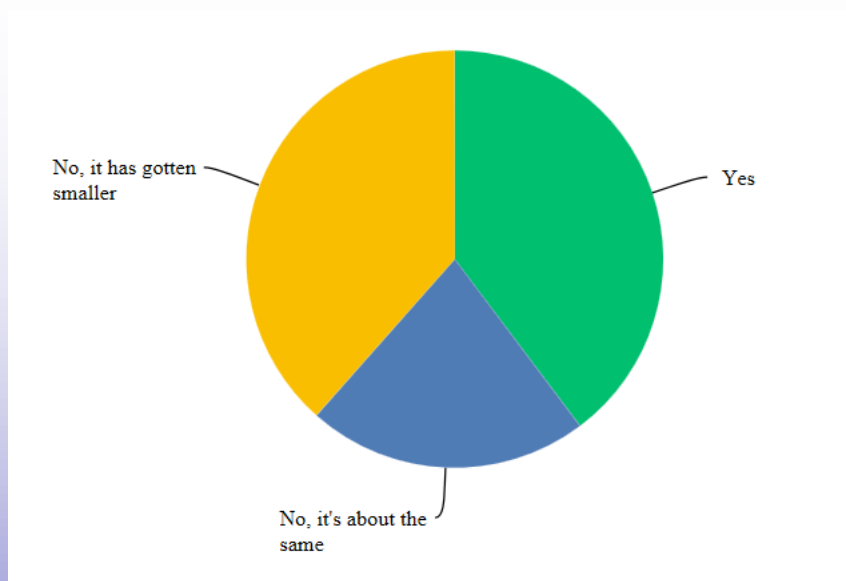
2. How hard is it to get medical records?



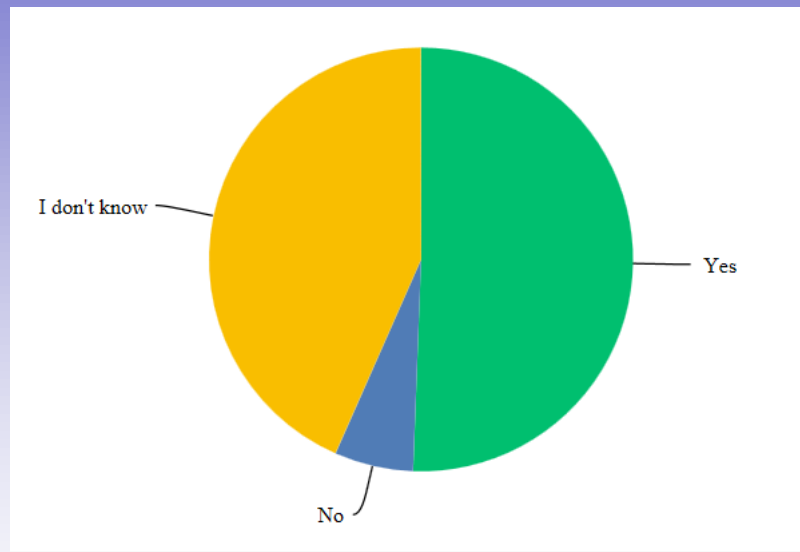
3. How hard is it to get school records?



4. Has your caseload grown in size since March 1st?



5. Has the backlog in your DDS office grown significantly since February, 2020?



We invited comments in the survey, as well. Here are some of the responses:

- *We're unable to process cases where the claimant has failed to cooperate, or cases that need a consultative exam, so our closures are lower than usual and cases are aging. (Utah)*
- *I'm no longer doing hearings. I've taken on an initial and recon caseload which I haven't had since 2003. (Nebraska)*
- *I get many calls from distraught claimants about financial problems, lack of food, inability to obtain medical care. I've gathered a list of resources for them. (Arkansas)*
- *Trying to juggle so many things right now - working from home, homeschooling, coping with the changes in the world around us - I'm mentally drained, and feel guilty when I can't make my pre-COVID goals. (Midwest)*
- *I'm glad and grateful to be allowed to work safely from home. I have to work at my kitchen table due to connectivity issues, Internet is slow, the chair is not meant to be sat in for eight hours. Working after hours and on weekends makes compartmentalizing work and home difficult. Those are the challenges. (Anonymous)*
- *Teleworking from home is great. It's quiet. I'm getting through my work more efficiently. (Nebraska)*
- *Paper cases can't leave the office, so they're getting older while we work from home. (Kansas City)*
- *Attending to my children and working at the same time, my attention and concentration are divided. However, due to the extended hours of network access to SSA, I am able to work late in the evenings and on weekends. (Kansas City)*
- *The adjustment to working from home has been stressful. The isolation and inability to talk through cases or ask questions in person has been challenging. (Missouri)*

- *I'm support staff. We were short-handed before COVID-19. Duties that were not mine have been shifted to me, like handling the mail and answering incoming calls. A lot of these are people wanting to know how to apply for disability due to being out of work with no money, not because of their health. Soon, I may be the only person physically in our office. I'm not sure how I feel about working here totally alone. (Great Plains Region)*
- *We were provided cell phones for full-time telework, but they don't allow voicemail to be left on them. My phone doesn't always ring more than once, so I sometimes miss calls. We were instructed to check our desk phones for voicemails. The claimants will say they called, but no one answered. This can cause a customer service problem for claimants with urgent issues. (Washington, D.C)*
- *When dealing with sources that we frequently get records from, it's hard to reach someone who can help you establish a new process for obtaining records. (Mid-Atlantic Region)*
- *My caseload is huge, I cannot close anything. My director is angry about low office production. There seems to be a lack of understanding regarding overall expectations for this quarter. (Mid-Atlantic Region)*
- *Claimants are stressed. We don't have access to fax machines at home. Processing time is slower. (Wisconsin)*
- *I feel stressed about all the desperate people who are waiting for a decision. I work overtime for a total of 50 hours per week. I think about cases when I'm not on the clock. I didn't used to do that. (Oregon)*
- *Medical offices being closed makes medical records very delayed. Claimants are unable to assist in obtaining records due to restrictions. Schools are closed and teachers have no access to records. We can't get teacher questionnaires to the teachers. This significantly impacts child claims. (Mid-Atlantic Region)*
- *I am a QA reviewer doing casework to assist examiners and our claimants. (Anonymous)*
- *I am now trying to school my child while meeting my numbers expectations. Things are going about how you'd expect! (Anonymous)*
- *I have a newfound appreciation for the work we do. (Wisconsin)*

We should've asked whether people like or dislike working from home, but the results reflect a fairly even distribution. We received lots of responses like, "My commute is great!" and an equal number of responses describing a strong desire to keep home and work separate.

Thanks to everyone for participating! We hope to include more surveys of our members in The Advocate going forward. Please spread the word and encourage others to participate in future surveys.

NADE's Strategic Plan

By Terri Klubertanz, Strategic Plan Chair

NADE's strategic plan is designed to help NADE meet our mission and purpose as outlined in Article II of the Preamble to NADE's constitution. The plan focuses on both present objectives as well as future goals with the purpose of building and strengthening our organization, while maintaining NADE's essential purpose.

From Wikipedia: “While much criticism surrounds strategic planning, evidence suggests that it does work. In a recent meta-analysis including data from almost 9,000 public and private organizations, strategic planning is found to have a positive impact on organizational performance. Strategic planning is particularly potent in enhancing an organization's capacity to achieve its goals (i.e., effectiveness).”

That's why we need your input! NADE's strategic plan is reviewed on an annual basis and updated as needed. Within the strategic plan, there are five strategic goals outlined that support NADE's mission and purpose. These define how the ends (goals) will be achieved by the means (resources).

What are the Strategic goals in NADE's plan?

- Professionalism;
- Legislative, Regulatory and Judicial Monitoring and Advocacy;
- Organizational Continuity and Service to Members;
- Membership, Fraternity and Recognition;
- Chapter Development and Services.

The Strategic Plan committee is seeking member input on our strategic plan. It can be found on NADE's website under "About NADE." Comments may be submitted directly to the committee at **strategic.plan@nade.org**. In your comments, we would appreciate hearing specifics as to how the strategic plan could be improved to best meet NADE's mission and purpose. To facilitate full consideration of your thoughts and ideas, the committee would like to have any feedback by June 30, 2020.



Annual Award Nominations Are Open

Rachelle Timmer, Awards Chair

The Awards Committee is eagerly awaiting your award nominations and wanted to remind everyone the deadline has been extended to the close of business on June 26th. Please take advantage of the additional time to submit nominations.

2020 NADE Awards Criteria

1) Each chapter is responsible for selecting and nominating their own members on the approved forms. (See next page)

2) Nominations must be submitted by **June 26, 2020**, to Rachelle Timmer, NADE Awards Chair. These should be emailed to rachelle.timmer@ssa.gov. Please be sure to type the address exactly as shown. Award nominations must be submitted electronically.

3) The nomination form should be typed and should explain in detail how the nominee exemplified the specific criteria of each award. It is preferred that only the nominee's identifying information be listed on the nomination form while an additional page(s) is submitted to include the narrative for the nomination.

4) **Please avoid referring to the member or chapter by name or any geographical identifying information in the nomination narrative.** This could result in disqualification of the nomination. Attach the nomination form with the name of the award and the nominee to the written narrative contained on an additional page(s).

5) Each chapter is limited to one nomination per award.

Thank you for your assistance with the NADE awards program. If anyone has any questions, please contact **Rachelle Timmer at (406) 444-5742 or by email at Rachelle.Timmer@ssa.gov**

- | | |
|--------------------------------|--------------------------------|
| • The Frank Barclay Award | • The NADE Award |
| • The President's Award | • The John Gordon Award |
| • The Lewis Buckingham Award | • The Marty Blum Award |
| • The Earl B. Thomas Award | • The Medical Consultant Award |
| • The Charles O. Blalock Award | • The Director's Award |

For the criteria for each of these awards, please contact your chapter president.

NADE AWARDS NOMINATION FORM

Instructions: Please type or print legibly.

DO NOT refer to the nominee's name, chapter or geographical location in the narrative. It is preferred that the narrative be provided on an additional page(s). This "Nomination Form" page will be separated from the narrative before any voting by the Awards Committee. Any nominations that refer to the nominee by name or chapter in the narrative may be disqualified.

Award Name: _____

Nominee Name: _____

NADE Member since: _____

DDS Employee since: _____

Current Job Title: _____

Chapter Activities (include elected and appointed positions held with dates and other participation and service to the local chapter)

Regional Activities (include regional elected and appointed positions held with dates and other participation and service to region)

National Activities (include national elected and appointed positions held with dates and other participation and service at the national level)

Leadership (include specific examples of the impact of the nominee's contributions to the advancement of NADE during the span of their membership)

A MESSAGE FROM THE EDITOR

Each of us is absorbed in our own work, dedicated as we are to quick, efficient, accurate determinations. It takes a village to clear a case! It can be hard to see life at DDS from another's perspective.

I plan to make "A Day in the Life" a regular feature in The Advocate. I'd like to highlight a different DDS role in each issue: administrators, support staff, CDIU, medical consultants, etc. Please consider participating! It involves a 20 minute phone interview. After the piece is written but before it goes to print, you'll have an opportunity to review it and make changes. Be aware that some departments may require approval and a separate review before publication.

I also plan to make a collage of smiling NADE members' faces the cover of every issue. One of my favorite aspects of NADE membership is the chance to connect with members across the country. Please submit your photos. Goofy pictures, dress-up days, celebrations and triumphs are all big hits. Your photo could boost someone's morale! Submit one today!

To aspiring writers who've never contributed, please consider writing for The Advocate! It's a publication with a nationwide audience, and not just within the DDS community. Disability attorneys read The Advocate. Senior members in the Social Security Administration read The Advocate, too, and members of Congress! The Advocate is a great credit for your writing resume.

Even if you're not a writer, please consider submitting story ideas. We're gearing up for the next issue already! We welcome topics of interest to any member of NADE, including but not limited to medical topics, office process innovations, morale boosters and success stories.

The more of you, our readers, we have in our publication, the better The Advocate will be. I want to hear from you!

Korin Gary

Communication Director

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NADE MERCHANDISE



DELUXE LAPTOP BRIEFCASE
\$35.00



CARRYING CASE \$20.00



INSULATED COOLER BAG \$7.50



PENCILS 2/\$1.00



ABSORBENT STONEWARE
COASTERS \$7.50



LAPEL PINS
\$6.00 EACH



CAPS \$12.00



NADE LANYARDS \$6.00



NADE TRAVEL MUG
\$11.00



EXECUTIVE PORTFOLIO
WITH PAD AND PEN \$25.00

All proceeds to benefit NADE/Non-Dues Revenue
<http://www.nade.org/join-nade/nade-merchandise/>

NADE BOARD 2019

20

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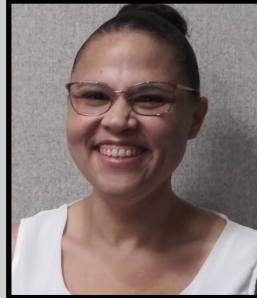
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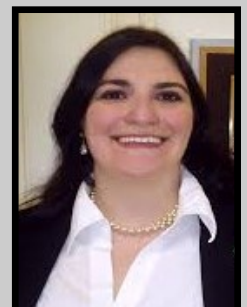
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