



NADE ADVOCATE

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2025 CONFERENCE EDITION!!

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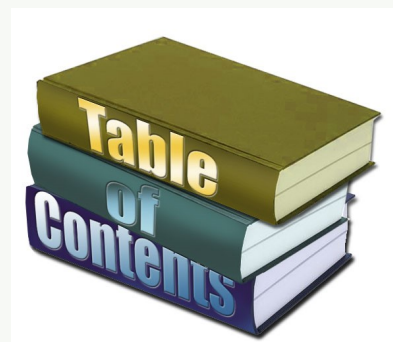
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PRESIDENT'S ADDRESS

Dear NADE Members,

The NTC was an incredible experience- a chance to connect with colleagues from across the country, share ideas, and learn from one another. The sessions were engaging, the discussions were thought provoking, and the energy in the room reminded me why our work is so important. It was inspiring to see our passion on full display.

It was an honor to introduce myself as your new President of the National Association of Disability Examiners. I am deeply grateful for the trust you've placed in me, and I step into this role with gratitude, pride, and purpose.

I have served as a disability examiner for 11 years, with 7 of those years in the Cooperative Disability Investigations (CDI) unit. I have been with NADE since 2015 and have served on the national board since 2019. Over that time, I have seen the incredible professionalism and dedication that disability professionals across the country bring to this work.

As your president, my vision will be guided by several priorities:

Increasing awareness of NADE – I want to focus on increasing both awareness and membership within NADE to ensure we continue to be recognized as a respected national voice for fairness, accuracy, and excellence in the disability process. This last year we saw our strongest numbers since the 2020 pandemic, and I would like to continue the upwards trend.

Advocating for Disability Professionals- I want to continue to advocate for the resources, training, and recognition Disability Professionals deserve. I want to ensure our collective voice is heard by working side by side with the Social Security Administration and by publishing position papers.

Fostering community – One of NADE's greatest strengths is our sense of community and support. I want to foster a stronger relationship with NADE leadership and our members. It is time to empower our next generation of leaders.

I am excited to begin this journey with all of you. Thank you for your dedication and thank you for allowing me the privilege of serving as your president.

With gratitude,

Amber Barnes



Jay Ortis, Acting Deputy Commissioner, Disability Adjudication

Jim Parikh, Assistant Deputy Commissioner, Disability Adjudication



Jay Ortis was appointed Acting Deputy Commissioner for Disability Adjudication in February 2025. He presented a brief overview of the Disability Process, which includes up to four levels of administrative review and Federal Court review. He indicated that the number of pending Initial level disability claims has continued to decrease for every month of the fiscal year, with approximately 924,000 initial cases currently pending. The improvement in the number of pending cases has been due to a significant amount of hard work by adjudicators.

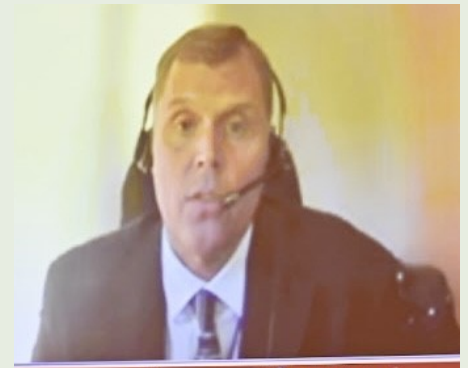
For FY 2026, the Commissioner is looking to leverage technology in smart ways. Commissioner Priorities include improving workforce productivity and accountability by modernizing policies, utilizing technology to improve national workload management, and improving employee engagement. Another priority is to increase IT solutions by upgrading SSA's telephone technology nationwide, and expanding the use of artificial intelligence (AI) to assist adjudicators with their evaluations and workload processing. While tools such as AI can help to review records and increase efficiency, it will never replace the role of the individual adjudicator. Additionally, SSA is developing digital self-service tools to assist with tasks such as scheduling appointments and evidence preparation. Finally, the commissioner is looking to reduce cost and reinvest savings by reducing procurement costs, realigning the SSA property footprint, and improving payment accuracy.

Jim Parikh discussed some additional technological advances and policies that are forthcoming to assist with case production. DEDA utilization is increasing weekly since being implemented nationwide and continues to make a great impact in reducing the initial cases pending. There is the potential that AI could assist in providing a summary for medical records. SSA is working to potentially develop a phone app for MySocialSecurity to provide greater direct information for claimants and their representatives. AI could also assist in developing cases. Taxpayer funding can be saved by leveraging technology to get cases completed in a policy compliant and efficient manner.

ODP Reorganization Brings Streamlined Structure and Policy Updates

By Ayanna Conley

At the 2025 NADE National Training Conference, Acting Associate Commissioner Dr. Robert Weathers provided important updates on the recent reorganization of the Office of Disability Policy (ODP) and shared details about upcoming policy changes.



A New Structure for Greater Efficiency

In May 2025, ODP underwent a significant transformation by merging with the Office of Research, Demonstrations, and Employment Support. This consolidation brings together disability policy, research, and employment support functions under a unified structure, aligning with SSA's digital-first vision. As a result, the number of divisions was reduced from nine to four, with the aim of increasing efficiency, reducing costs, and leveraging data, technology, and automation to deliver faster, higher-quality services.

The newly organized ODP now consists of four divisions:

- **Division of Disability Enterprise Policy (DDEP):** Oversees national disability data systems, procedural tools, and enterprise performance.
- **Division of Employment Support (DES):** Manages employment support operations, contracts, and program integrity.
- **Division of Medical Policy (DMP):** Maintains medical listings, develops adjudicative criteria, and integrates emerging medical data.

Division of Vocational, Evaluation, and Process Policy (DVEPP): Develops vocational and non-medical policy, safeguards, and fraud prevention guidance.

With this streamlined structure, ODP is already moving forward with policy changes designed to positively impact the disability program.

Advancements in Medical Policy

One of the most significant updates is the ongoing expansion of the Compassionate Allowances (CAL) program, which now includes 300 conditions. This expansion will help individuals with severe disabilities receive quicker determinations. ODP is also modernizing the cardiovascular disorder listings for the first time in twenty years to reflect current medical practices. In collaboration with the National Academies, ODP is addressing emerging medical topics such as sickle cell disease, chronic pain, traumatic brain injury, pulmonary function testing, and the use of AI-generated medical evidence, ensuring that policy guidance remains current with scientific advancements.

Progress in Non-Medical Policy

ODP's implementation of Social Security Ruling 24-3p in January 2025 marks another key development. The agency now incorporates data from the Occupational Requirements Survey (ORS), eliminating the need to reconcile with the outdated Dictionary of Occupational Titles (DOT). In response to recommendations from the Office of the Inspector General (OIG), ODP is planning updates to define priority case timeframes and follow-up procedures to strengthen oversight. Additionally, efforts are underway to streamline POMS instructions for reconsideration cases, with targeted updates expected by year's end. These initiatives are designed to shorten processing times, reduce errors, improve consistency, and simplify training for disability examiners.

Enterprise and Technology Initiatives

On the technology front, ODP is enhancing tools to support adjudicators. Upcoming improvements to the IMAGEN platform will feature AI-assisted evidence summaries and draft dispositions, with expanded use across all adjudicative levels to promote consistency. Partnerships through Health Information Technology (HIT) are also growing, enabling more electronic evidence submissions and faster case processing. To further strengthen security, ODP plans to implement multi-factor authentication via login.gov.

Looking Ahead

In closing, Dr. Weathers reaffirmed ODP's commitment to developing policy that is legally sound, operationally effective, and responsive to the needs of the disability program. He emphasized that consistency, timeliness, and fairness remain the guiding principles of ODP's work, and highlighted the importance of ongoing collaboration with NADE and other key stakeholders in achieving these goals.

National Disability Determinations Presentation

2025 NADE Conference



The National Disability Determinations (NDD) Associate Commissioner, James “Jimmy” van der Schalie and Deputy Associate Commissioner, Lucinda Davis presented at the NADE annual training conference in Denver, CO. This past year, SSA made a significant reorganization. Instead of being under the regional offices, the Disability Determinations Service (DDS) offices now report directly to NDD. There is a brand new SSA component, the Office of Disability Adjudication (ODA) which oversees Hearings, Appeals, Quality and NDD. The reorganizing led to a consolidation of disability components. Along with the DDSs, NDD now encompasses the Federal Disability Determination Divisions, which are the federal sites that assist the DDSs with production. With everything disability under one roof, the goal is to better support the DDSs and the initial disability process.

Despite 7% attrition at the DDSs, technology and policy changes have helped to see an increase in production this past year. SSA wants to build upon that for fiscal year 26 and balance disability case processing needs across the nation. SSA wants to reduce disparities in processing times so that no claimant is disadvantaged based on where they live when they apply. Therefore, workload balancing from state to state is a big focus currently. SSA will be promoting best practices learned from the DDSs to help states learn strategies that will improve efficiency. SSA is also looking to leverage automation, which will allow DDSs to use their expertise where it is needed most. SSA plans to involve DDS staff with technology enhancements to make sure it meets our needs. SSA will continue to expand IMAGEN functionality and is working on using the program to summarize medical evidence. SSA continues to work on HIT expansion. Additionally, SSA is looking at automating CE scheduling and automating medical records requests at receipt of the claim.

Another focus is decreasing costs. For each claim processed, SSA wants the cost to be as low as possible. Along those lines, the Disability Examiner Decisional Authority (DEDA) is a high priority. With the implementation of DEDA, it has improved customer service by decreasing case processing time and also decreasing the national disability backlog. DEDA has helped to decrease the medical consultant costs. Quality for DEDA cases has shown to be slightly higher than non-DEDA cases. With the positive results of DEDA to date, SSA would like to expand DEDA.

Policy improvements have also helped with the disability backlog. This past year we saw the reduction of the past relevant work period from 15 years to 5 years. A review has shown that there has been a 30% decline in the number of claims that list three or more jobs. This policy change has shown a significant case processing time savings.

There has been a 30% increase in IMAGEN usage in the past year and in July 2025, 78.1% of cases closed leveraged IMAGEN. There have been recent improvements and enhancements in IMAGEN. SSA sees faster document processing and improvements in the search function. Planned upgrades will include using generative AI to summarize medical evidence and the ability to identify medical source opinions.

Those who attended the NADE conference were able to see a live demonstration of the Vocational Assessment Assistance Tool (VAAT). It is an AI tool designed to assist examiners with Step 4 and 5 of sequential evaluation. The goal of the tool is to help find the best DOT code for jobs, complete a transferable skills analysis, when applicable, recommend a medical-vocational rule and provide a vocational rationale. DDS employees have been involved in testing. Four stages of testing have already been completed and they are about to start phase 5. The testing has helped the developers to improve the tool and they will continue to test for policy compliance. A disability examiner must use caution and cannot solely rely on the VAAT to make a determination. Currently, the VAAT can only be used on claims with physical only limitations and they plan to address this in the future. Updates will be needed to allow the examiner to enter more than one job at a time as well.

The NADE conference attendees were excited to get a glimpse at the VAAT and to hear from NDD on all the updates impacting the disability program.

Now THIS is Quality!

By Michelle Wade

**Hosted Kasey Torres-Division Director, DA, QR, Division of Disability Quality
with co-hosts Jamie Lucero, Associate Commissioner for Quality Review and Jason
O'Daniel Midwest/West Director**

Now THIS is Quality! was a fun and interactive presentation/gameshow, with prizes that provided attendees with an assessment, discussion, prognosis and additional Q&A about quality areas within DDS including myths, truths, and everything in between.

DDS staff often feels that the QR branch would do more than cite deficiencies. Many do not realize that QR not only cites deficiencies, but they also provide adjudication assistance via strike teams, immersion training, mentoring, policy training, quality feedback about new processes/programs like IMAGEN, DCPS, DEDA, and also provide positive feedback to the DDSs. Quality Review certifies programs, like IMAGEN, to determine whether it is doing what it is supposed to. Dr Quality, Jason O'Daniel, says the prognosis is healthy in this area as the quality process has come a long way in creating a collaborative culture between the DDS and Quality Review. The Disability Program belongs to all of us and over the years, the quality culture has gone from a "gotcha" thought process to a "Let's Work Together" mentality, which is beneficial to everyone.

A myth long held by DDS staff is that QR's actions, like citing deficiencies, do not improve quality overall. Kasey discussed that this is an area that continues to show improvement. Several years ago, many offices would fall below threshold, however, there has been improvement and recently no offices have fallen below the threshold.

Do you feel that Quality Review incentivizes reviewers citing deficiencies? Many DDS staff feel that there is a requirement for quality reviewers to cite a certain number of deficiencies, but there is not. However, statistical metrics are in place to make sure that the right deficiency is cited. This is an area that Dr Quality feels is uncertain and wishes that more information could be spread to DDS staff.

How are DDS workloads determined? This is an area partially determined by quality reviews. Pre-effectuation reviews are mandated and 50% of initial and reconsideration allowances. Targeted Denial Reviews (or TDRs) are set each year, and the FY25 goal is 25,000. Federal QA reviews are set based on statistical validity and this is an area of planned enhancement in FY26. Dr. Quality feels this needs improving and like you, wants samples to be in line with case volume. Dr Quality expressed that this could be improved and shares the sentiment that samples should be consistent with case volume. Advancements such as AI should further enhance the sampling process.

Who reviews Quality Review? Does anyone? Do you often ask yourself this question? Well, Kasey and Jamie let us know that there are external auditors that review Quality Review, and the headquarters division reviews the DQBs. Additionally, feedback from the DDSs is also used to provide guidance to the DQBs. But Dr. Quality feels this is an area that is "uncertain" and more needs to be done in this area. Thus far, they have passed the external audits.

Lastly, Kasey wanted to let everyone know that you CAN disagree with QR, and this is why the IRR and RPC processes exist, but even outside of those processes, NDD and DDQ can be contacted for clarification of cases or if a case falls outside of the timelines for IRR and RPC. Dr. Quality let us know that the prognosis in this area is uncertain. There is an efficiency workgroup that will be looking at ways to improve the process and that we know everyone, including QR makes mistakes, so they want the disagreements to be a way to improve, clarify, and enhance policy.

Several attendees had questions and suggestions for the panel, and they wanted to let us know that they are always willing to listen and take those suggestions back and look at further as ways to potentially improve the Quality Review process.

NCDDD panel promotes communication, advocates for DDS

Representatives from the National Council of Disability Determination Directors (NCDDD) took part in a panel presentation at the National Training Conference in August 2025, explaining how the council works to improve the disability adjudication process and encouraging communication between staff at the DDS as well as with other government components.

Past NCDDD presidents Leon Scales and Jacqueline Russell, as well as current president Brian Garber and president-elect Kimberlyn Price explained the setup of NCDDD, a group that meets frequently to talk about issues specific to each state and to advocate to get each DDS needs met. The council is comprised of many of the Disability Determination Services directors nationwide, who meet frequently to discuss topics like pilot projects being tested in different states, look for clarification and additional details on new and updated Social Security policies and seek out different perspectives on difficulties and opportunities common to each state's DDS. The NCDDD members also speak to different government agencies biweekly to monthly regarding some of these same topics. While some issues can be resolved easily, others take more prompting to be addressed. "We don't always get our way, but we always are asking," said Kimberlyn Price, director of the Ohio DDS. The panel shared some of the recent discussions that they had been involved in including Social Security policy changes such as the Disability Examiner Decisional Authority pilot and reduction in the number of years considered in past relevant work. The council keeps track of what's ahead for the DDS, including goals for the next fiscal year and any hiring authority. The panel cautioned that many of these proposed changes happen slowly, partly because government personnel changes frequently, especially with a change in government administration.

The NCDDD panel also answered questions and took suggestions from conference attendees, including thoughts on the medical improvement review standard (MIRS) policies for continuing disability reviews, working on claims from out of state and issues managing communication with Social Security field offices. Both the panel and conference attendees agreed that communication can be an issue between DDS and the field offices, and the council is actively looking for ways to manage it.

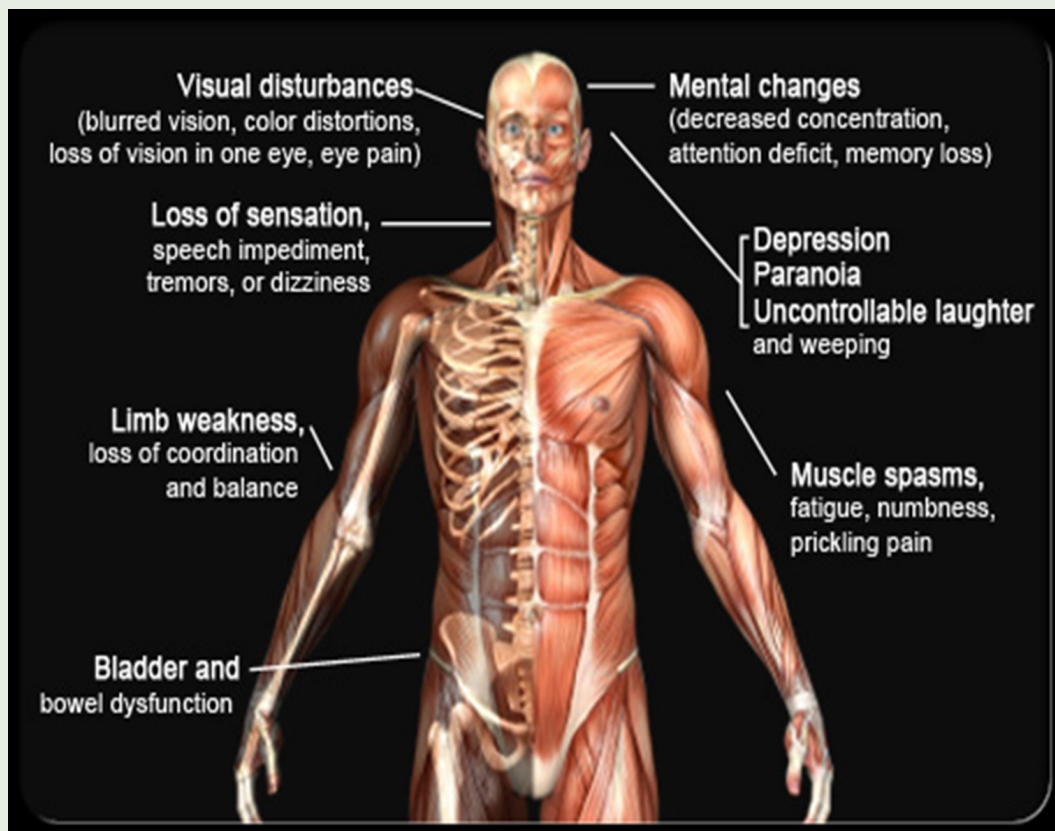
The members of the NCDDD panel urged adjudicative staff to bring issues to their agency administrators, as specifically as possible. The directors' frequent contact with each other and the federal government is one of the easiest ways to make sure that any major problems are identified quickly. The panelists affirmed that they are always there to advocate for DDS staff across the country and to work for the betterment of the disability program.



Multiple Sclerosis: The GREAT MICMIC

Dr. Scott Pritchard, Lead medical consultant in Oregon and long time NADE member, gave a presentation on multiple sclerosis at this year's NADE Conference. In his virtual presentation, he discussed the history of MS, and other clinic names, diagnosis, symptoms and risk factors. I was surprised to learn that some risk factors include genetic predisposition, low levels of Vitamin D, and childhood obesity. Dr. Pritchard titled his presentation "The Great Mimic" because initial symptoms are varied, vague and extremely difficult to link to specific cause which are often also attributed to other disorders. Initial symptoms can include numbness, tingling, muscle weakness, fatigue, depression and difficulty swallowing or speaking. He explained the phenomenon of Lhermitte's sign, which is an electrical shock sensation shooting down the spine. As a disability analyst one of the things that I find most confusing when looking at claims is the difference between relapse-remitting, secondary progressive, primary progressive, and progressive relapsing types of MS. Dr. Pritchard's slides were really helpful explaining the different types and how they may affect people throughout the course of their lifetime. He also provided information on medications to treat certain specific symptoms of MS, reviewed the Multiple Sclerosis Listing, and limitations.

Dr. Pritchard's use of engagement with humor and insertion of a random picture of dogs or waterfalls is always appreciated.



Community Reintegration for Spinal Cord and Brain Injury Patients, Brittany Catalano Huber, MBA, MS, ORT/, Craig Neuro Rehab Hospi- tal

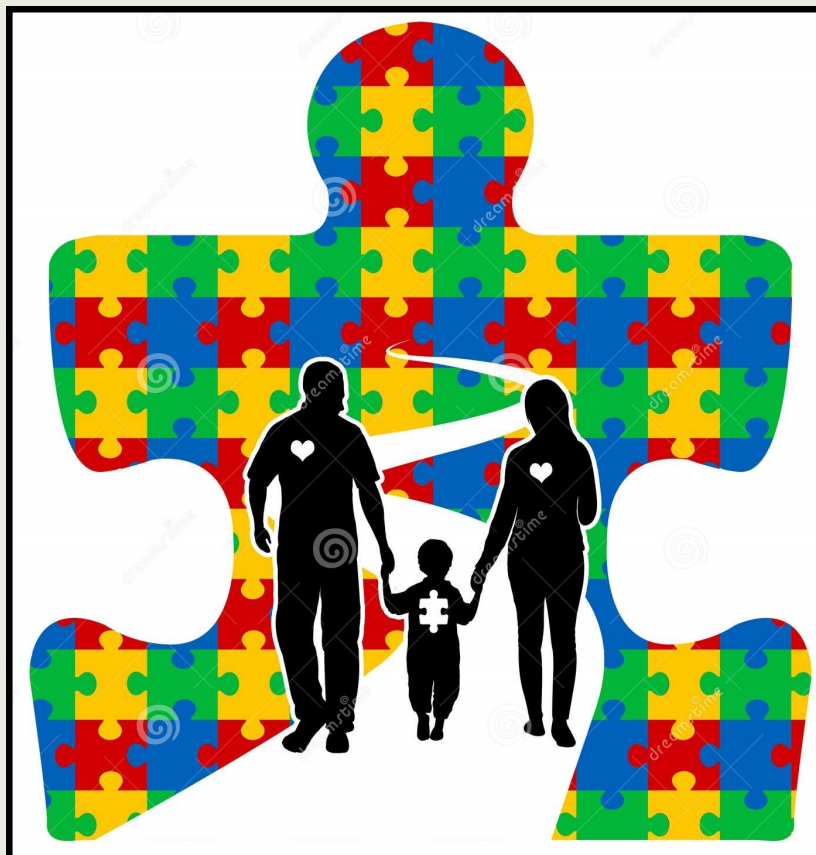
Craig Rehabilitation Hospital was founded in 1907 specializing in spinal cord injuries starting in 1955 and Traumatic Brain Injuries in 1977. Craig hospital is a non-profit and has an annual budget of \$5 million dollars for SCI/TBI rehabilitation research. The hospital treats patients as young as 15 years old, however, patients referred must be in stable condition to travel for admittance to inpatient therapy services. 42% of patients come from vehicular accidents. Rehabilitation services include occupational, speech and language therapy services to help facilitate growth, learning strategies and communication abilities. Psychologists and neuropsychologists are on hand to address social, emotional, cognitive and behavioral concerns. On average patients stay between 2-4 months and receive five hours of therapy six days a week.

They offer rehab focused intervention to enhance the quality of life of their patients by supporting and encouraging the pursuit of vocational and productive goals. Their patient therapy program includes caregiver and family training with the goal of discharge planning. Their interdisciplinary approach embraces community reintegration for transitional services so patients can return to activities such as work and school. This includes adaptive driving training, vehicle modifications and adaptive transportation equipment. Outpatient therapies are available to former patients including telehealth options to ensure a successful recovery process.



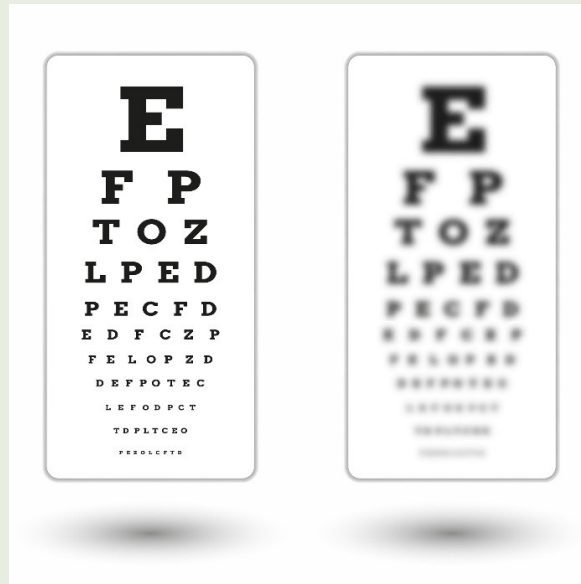
COLORADO AUTISM SOCIETY

We had many excellent speakers at our 2025 NADE Conference, including a presentation on Autism by Jennifer Korb, the Executive Director of the Colorado Autism Society. The Autism Society focuses on advocacy, funding, and representation, including inclusive community events, access to post-secondary education, and online resources. Jennifer spoke about characteristics of people with Autism and specific techniques to support them. Autism impacts social skills, communication, relationships, and self-regulation. Common traits that show up in medical records include atypical communication, poor eye contact, repetitive behaviors, rigid thinking, sensory processing issues, and difficulty expressing needs. There are no known causes of Autism, although it is believed that genetics and environmental factors play a role. Boys are four times more likely to be affected than girls and it is currently the fastest growing developmental disorder in the US, likely due to improved testing methods resulting in the impairment being caught earlier. Symptoms are different for everyone and include varying levels of severity. Although intellectual disability is frequently associated with Autism, 51% have above average intelligence. Many well-known actors and actresses are autistic and even the most impacted have many strengths. Jennifer reminded us that when addressing someone with Autism, we should break down complex questions into individual components, use visuals, use special interests to motivate, and validate/listen. There are affiliates in most states, and we highly recommend looking for ways to support your local Autism Society!



Beyond the Eye Chart: Adjudicating Visual Impairments

By Ebony Grissett, SC DDS



At this year's NADE conference, Trista Meininger, a Policy Analyst from Colorado DDS, delivered an insightful and engaging presentation on the complexities of adjudicating **visual impairments**. Meininger emphasized that evaluating cases involving vision loss requires careful consideration and should not be oversimplified.

Meininger began by sharing her experience with visual aids, referencing her own need for glasses since the eighth grade and her desire for the iconic Sally Jessy Raphael red frames. This anecdote underscored the importance of understanding the functional relevance of visual aids in claimants' cases, rather than viewing them as mere accessories.

Critical Aspects of Vision and Their Workplace Impact

Ms. Meininger covered a wide range of topics during her presentation; however, I will focus on three key aspects she discussed: depth perception, accommodation, and visual fields. She explained how each plays a vital role in workplace safety, productivity, and the assessment of residual functional capacity (RFC).

Depth Perception

Depth perception enables individuals to perceive the world in three dimensions and judge distances between objects and people. Meininger noted that impaired depth perception can make tasks such as navigating stairs, driving, or operating machinery more hazardous. While some individuals with monocular vision may lack strong depth perception, they may still be able to read normal print, use a computer, and navigate typical office settings. However, their limitations must be carefully considered in the context of specific job requirements.

Accommodation

Accommodation refers to the eye's ability to shift focus between objects at varying distances. Difficulties with accommodation can impact reading, computer work, and any task requiring frequent changes in focus. Meininger explained that such individuals may experience eye strain, headaches, or reduced efficiency, particularly when working with small parts or needing to shift gaze rapidly. While they may be capable of handling moderate to large objects and avoiding normal workplace hazards, precision tasks and frequent focus changes can present significant challenges.

Field of Vision

Field of vision encompasses the total area visible when looking straight ahead. Visual field loss occurs when the pathway from the eyes to the brain is damaged, resulting in reduced or absent vision in certain areas. Meininger stressed that a reduced field of vision can limit awareness of surroundings, increasing the risk of accidents, especially in dynamic or crowded environments. Claimants may miss visual cues or hazards outside their central line of sight, which can affect their ability to perform certain job functions safely.

Comprehensive Assessment of Functional Capacity

Meininger concluded by reminding attendees that vision loss is complex, and multiple factors must be considered when assessing a claimant's ability to work. Evaluators should consider the claimant's capacity to work with large or small objects, follow written instructions, and avoid ordinary workplace hazards. Each case must be evaluated on its own merits, with all available evidence considered to ensure a fair and accurate determination of RFC.

NADE AWARD WINNERS 2025

- The Frank Barclay Award – Christy Allen, CADE
- President's Award (NADE Chapter of the Year) –
Colorado Association of Disability Examiners (CADE)
- The Lewis Buckingham Award – Jennifer Nottingham, NVADE
- The Earl B. Thomas Award – Jana Vaughn, NVADE
- The Charles O. Blalock Award – Laurie Blakely, NVADE
- The NADE Award – Stacy Wood Rustrum, OrADE
- The John Gordon Award (Supervisor of the Year) –
Richard Burk, CADE
- The Marty Blum Award – Ryan R. Harris, CADE
- Consultant Award – Allie Wright PsyD, NVADE
- Director's Award – Mary Ann Garren, ARKADE



The Marty Blum Award – Ryan R. Harris, CADE



President's Award (NADE Chapter of the Year) – Colorado Association of Disability Examiners (CADE)



The NADE Award – Stacy Wood Rustrum, OrADE



The Lewis Buckingham Award – Jennifer Nottingham, NVADE



The Frank Barclay Award – Christy Allen, CADE



Director's Award – Mary Ann Garren, ARKADE



The John Gordon Award (Supervisor of the Year) – Richard Burk, CADE



NADE Medical Consultant Award, Allie Wright, PsyD



NADE 2025-2026 Committee Chairs

Awards -Melvin Carr

CDIU- VACANT

Constitution, Bylaws & Strategic Planning- Tonya Scott

Elections & Credentials- Todd Deshong

Hearings Officer- VACANT

Medical Consultant- J. Scott Pritchard DO

National Disability Professionals Week- Marcia Golden

Non-Dues Revenue- Julie Kujath

Organ Donation/Transplant- Joellen Chapman

Professional Development-Amber Barnes- Sharyn Perry Co-Chair

Professional Relations Officer- Keith Hearnberger EdD

Retirees- Terri Klubertanz

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If you are interested on serving on a committee, please contact Amber Barnes.



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The NADE Communications director will be giving out prizes for your photos and Newsletter at the NTC conference! Submit them all year long but indicate that you want them for the contest!



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