

## **SOAR Dialogue Highlights**

### **6/19/14**

Attendees: Emily Carmody, Melissa McKeown, Pamalia Davis, Candice Chilton, Tracy Miller, TJ Reynolds-Emwanta, Daphne Drew, Randy Glazier, Liz Blass, Cecelia Colson, Joyce Allen

#### **Introductions and Updates**

- Emily Carmody, NCEH, Raleigh- Scheduled the next SOAR Training for August 27-28, 2014 in Raleigh.
- Melissa McKeown, Union County Community Shelter- Still looking for a SOAR case
- Pamalia Davis, Housing for New Hope, Durham- Three cases at DDS, one case currently scheduled a CEU and two cases that will most likely get approved
- Candice Chilton, LATCH, Durham- Received the first couple of approvals
- Tracy Miller, Cumberland County, Fayetteville – One approval last week—the applicant got \$6000 in back pay, waiting on a couple of decisions
- TJ Reynolds-Emwanta, Centerpoint Human Services, Winston-Salem- Recently opened up the referral process and receiving 4-5 referrals a week, presenting about SOAR to Centerpoint's Board about Medicaid reimbursements, and have had a couple of approvals including a woman who was in the hospital for 11 months—now in housing and doing well
- Daphne Drew, ECBH MCO- no updates, still waiting on two decisions
- Randy Glazier, Women's Center of Wake County, Raleigh- Working on a case that picked up half way through the process, applicant has disappeared
- Cecelia Colson and Liz Blass, Pisgah Legal Services, Asheville- Business as usual, SSA issues have gotten a little better
- Joyce Allen, Disability Advocates, Raleigh- Went to CE exam with applicant

#### **Announcement**

Please submit any outstanding outcomes by June 30<sup>th</sup> so they can be counted for the annual report to the national SOAR program.

#### **Strengthening SOAR Cases with Medical Evidence**

How do you use medical records in SOAR cases?

- Medical evidence is the heart of your SOAR case!
- Key information for SSA that is in medical records:
  - Duration- will the disabling condition affect someone for 12 months or has already affected them for 12 months
  - Date of Onset- Can push onset date back with historical medical records to show when an individual was unable to work because of disability—this affects back pay for SSDI
  - Listing Information:
    - Medically Determinable Impairment- SSA needs to see that the individual has been diagnosed with a condition by a doctor or PhD psychologist

- Symptoms- Medical records show what symptoms the person is experiencing which is important for the listing
  - Substance Use Information-
    - Medical records can show instances of sobriety where symptoms were present
    - Look at drug panels and blood alcohol levels from ER visits to see if the applicant is sober and presenting with symptoms
    - Records from inpatient treatment can show how sobriety affects the disabling condition
  - Side effects of current treatment and how that impacts functioning
    - Drowsiness, low energy, etc. from medication
      - Don't have to know which exact medication creates the side effect
      - Can report that treatment regimen (all medications) has side effects
      - Website <http://www.rxlist.com/script/main/hp.asp> shows medication side effects
    - Treatment protocols that limit physical functioning- dialysis, oxygen tanks, etc.
    - Can always include the caseworker's observations about the impact of side effects on functioning
  - Functioning-
    - Some functioning issues show up in medical records
      - Missing appointments
      - Not being able to follow treatment instructions
- Be sure to turn in all medical records that you receive to DDS- don't edit the medical records

What do you do when an applicant has multiple diagnoses or if you are unsure a diagnoses is correct?

- Important to look at the symptoms the person is experiencing and see what listing that would meet
  - Blue Book listings are made in clusters and are more vague than other diagnoses
    - For example, affective disorders listing covers depression, bipolar disorder, etc.
    - Rather than knowing the precise diagnosis- SOAR caseworkers need to look at showing how an applicant meets a listing
  - Symptoms can show what listing they meet even if there are several diagnoses made for those symptoms
- If the multiple diagnoses cover symptoms that are more than one listing, then cover all the diagnoses and state which listings they meet in the Blue Book

How do you get around paying for medical records?

- Medical record companies sometimes charge a per page fee to get access to medical records
- Many hospitals and treatment providers contract their records management to large companies
- Speaking to Medical Records Departments directly and in-person can go a long way to get around paying fees
  - Important to state that you are not taking a fee for the case

- Highlight that we are helping individuals who are in homeless
- Make sure you state that you are not an attorney
- If there is no way to get a medical record due to cost:
  - Include a blurb about the treatment episode in your report with a summary of the treatment
  - DDS can request those records
  - Important to not rely on this all the time because there could be important information in those records that you need to include in your report or address with DDS
- If you receive a bill, be sure to call the phone number on the bill to explain who you are and what you are doing.
- Send a letter that explains you are not taking a fee for the case
  - Can be helpful to have a form letter that you use whenever you request records
  - Explain that if approved, the medical provider may be able to back bill Medicaid for services provided to the applicant

How do you get the doctor to sign off on your report?

- A doctor's signature makes the Medical Summary Report medical evidence
  - Provides context for DDS examiner
  - Creates medical evidence that fills in the gaps for an applicant's treatment history
- Some doctors are hesitant to sign MSRs:
  - Concern about using drugs if they get benefits
  - Concern about developing reputation as someone who gets people benefits
  - Previous bad experiences with SSI/SSDI benefits
- Some doctors see the dire need for patients and will cooperate fully
- To reach out to physicians:
  - Make sure to meet with the doctor to discuss what their concerns are in order to be able to address them—don't assume you know why they won't sign the report
  - Reassure physicians that you have expertise in SSA applications and that you don't apply for everyone
  - Explain that you are assisting individuals who are truly vulnerable who need to get off the streets
- If a doctor refuses to sign, you can still submit the report without a signature
  - Won't be weighted as much as medical evidence but can still provide context
  - Try every effort possible to get signature and be sure to submit report no matter what

Stay Tuned for upcoming advocacy around expanding medical treatment sources with SSA

- Yvonne Perret is advocating with SSA to expand medical treatment sources to NP, PA and LCSWs
- Comments may open up in the fall—Emily will let SOAR caseworkers know about how to write in to SSA about expanding treatment sources

**Next SOAR Dialogue Call is July 17th at 10 AM.**

**Register for the call by following this link: <http://www.ncceh.org/events/763/>**