

SOAR Dialogue Highlights

3.16.2017

Announcements:

Since Emily Carmody is on maternity leave, the April and May SOAR dialogue calls are cancelled. The next SOAR dialogue call will be in June.

Changes to acceptable medical sources (Candice Chilton, presenter)

- In January 2017, SSA published its final rule on changes to how medical evidence will be evaluated. The new rule expands the list of acceptable medical sources. The rule is on NCCEH's website at <http://www.ncceh.org/caseworkers/>
- The rule goes into effect March 27th. If protective filing date is on or after the 27th, your case will be evaluated based on new rules.
- The list of acceptable medical sources has been expanded to include nurse practitioners, audiologists, and physician assistants.
 - LCSWs are still not approved. Licensed marriage and family therapists, regular RNs, LPCs, physical therapists and counselors still not included – all these sources will still be non-medical sources.
- The rule also differentiates between “signs” and “symptoms”:
 - Signs are objective observations from a medical source. Start using the word “signs” in medical summaries if this applies.
 - Symptoms are a description by the person or non-medical source.
- Other items from rule:
 - Psychiatrists and psychologists are still the only sources accepted for mental disorders.
 - If limitations are described as “mild” by acceptable medical sources, they would not be concluded to be severe enough to make a person disabled.

Outreach to medical professionals: how do you engage medical professionals in the SOAR process?

- WakeMed: all referrals are internal, so don't have to do much outreach
 - Candice has many internal referrals as part of the Duke health system, but she still has to do some outreach to providers to make sure they're knowledgeable about what is going on. She uses the EPIC system especially. Outreach to Duke providers helps them provide the best notes and evidence they can.
 - Candice usually contacts doctors the day before an appointment so that patient is fresh in their mind.
- Southlight does outreach in Raleigh. Starting to do more formal presentations to get more people engaged in the process. Great suggestion to reach out right before the appointment.
- Candice: Education sessions are our most important tool. For example, a psychiatric department wasn't doing assessments in a way that was helpful for SOAR applications, so the SOAR program did a presentation on SOAR generally but zeroed in on mental status exams to address this problem.

Other strategies Candice uses in Durham:

- Education sessions for providers
- Emailing provider before the appointment
 - Used to do form letters, now tries to tailor each letter to each doctor and patient.
- Try to help clients access providers that are helpful in the SOAR process, but only when clients need to see new providers – they don't try to get clients to change providers if they're already seeing someone if they're doing well in that practice.
- Provide bluebook listing to providers so they know what language to be used and generally educate doctors about the bluebook.
- Identified "MD champions" at FQHC – key providers that have been helpful, gave them additional training, and asked them to work with other MDs to get them involved in the SOAR process.

Question: What outreach and education are people doing to get the newly acceptable medical sources involved (e.g. Nurse Practitioners and Physician Assistants)?

- Candice just started reaching out to new providers. They created excitement about expansion of medical sources – worked with a champion Nurse Practitioner – she got excited and spread the word. They're going to continue to work to let each provider know.
- Vinett: They collaborate with Advance Community Health, who also have access to EPIC – when a patient has an appointment with them they are able to print off information beforehand, so that's very helpful.

A note on engaging new medical sources: the Nurse Practitioner or PAs still need to be working within their scope of practice. Rules in place for MDs are still in place for PAs and Nurse Practitioners.