

SOAR Dialogue Highlights 6/16/20

Introductions

- Sarah Murray- NCCEH
- Kelli McQueen- Community Link
- Kathy Walker, Pisgah Legal
- Alicia Merrill- Pisgah Legal- heard from national group of attorneys- SSA will take one page 1696 during the pandemic
- Lori Beullah- Community Link
- Nyasha Pettway- Charlotte
- Rita Rabie- Charlotte
- Pamalia Davis, VOA, Durham
- Connie Ness, Raleigh
- Natasha Posey, Southlight, Raleigh- started phase 2 plan to virtually meet with clients
- Monica Lee, Raleigh
- Jane Duralia, Hickory- working on 5-6 cases
- Christina Heggins, Mecklenburg- Keri Scholz at SSA has been promoted but local caseworkers should continue to send faxes, 2 additional SOAR liaisons will take her place eventually
- Rex Mercer- Orange County
- Robyn Burge- Passage Home

Announcements

- Be sure to submit SOAR outcomes to Sarah! Annual outcome data will be due by June 30th
- Developed process with DDS and SSA to try to address issue of 1696s not getting uploaded. Have a meeting with DDS this afternoon to address concerns re call center raised last month.

SOAR Applications and Substance Use

Overview

Substance use is over-represented in the population served by SOAR. Many applicants have easier access to drugs and alcohol than healthcare and medicine to medicate disabling condition. An applicant can be approved for benefits if they have a history of substance use and/or if they are currently using.

DDS's main question is, "Is the substance use material to the disabling condition?" This means that if substance use is removed, an applicant would still have an eligible disabling condition that impacts functioning and impedes an applicant's ability to work.

Applicants can also be approved for benefits for physical and/or mental health conditions that were caused by prolonged substance use (ex. liver failure, alcohol induced dementia, etc.) as long as the conditions will not reverse if the applicant stops using.

This is really important- see a lot of MSRs, especially from newer caseworkers that forget to address

this. If you list any kind of substance use as a dx or see it in any medical records, important to address this in the MSR.

Discussion from caseworkers:

Helpful to make statement that substance use is not material to the current disabling condition...lab reports show no current use (connect to exact medical records- citing medical records. Need to say why it is not material.

What to do if SA came early in?

- Get into weeds of what preceded SA beginning- usually trauma or loss
- Look at school records
- Third party function report- can help timeline and things that led to start of SA
- May find some periods of sobriety

Any issues of getting records re substance use?

- Can say that in the MSR that you attempted to get the records

How can you tell if substance use is not material to a case?

- Always ask for times of sobriety (pay attention to prison/jail time)
- Place of substance use in applicant's life
- Go through medical records for inpatient stays

How to address substance use in electronic records that say use is active when the applicant is actually sober?

- Repetitive line when used in past record, copy/pasted, point out in MSR
- Speak to agencies where you see medical records from a lot
- Look for clean tests in records
- Doing training for providers so they understand how this affects clients
- Medical records can be wrong- it's ok to point this out to DDS
- Helpful when can speak to providers

If you cannot tell if an applicant's substance use is material to the disabling condition, how do you offer treatment?

- Dig deeper, more conversations, more records
- Sometimes hard if client is still using to really say that it is not material
- Sometimes substances assist them in functioning (eating, sleeping better, maintain calm)
- May have to send client to other treatment first
- Play devil's advocate with own MSR

Open discussion:

SOAR training update/clarity re online course

Next SOAR Dialogue Call will be July 21st at 10 AM: <https://www.ncceh.org/events/1428/>