SOAR Dialogue Phone Call March 17, 2011

(Attendance: Emily Carmody, TJ Reynolds-Emwanta, Aundry Freeman, James Davis, Kendra Norville, Kathryn Winston, Mike Hosick, Terri Clark, Spencer Cook, Grace Maynard)

- I. Introductions and Community Updates
 - a. Emily Carmody, NCCEH- Finished presentations at the state hospitals and working within the state hospital system about using SOAR to improve discharges
 - b. TJ Reynolds-Emwanta, PATH, Winston-Salem- several new clients this month, 2 approvals in the last week, one approval in less than 2 weeks
 - c. Aundry Freeman, Pisgah Legal, Asheville- 5 new clients this month, presumptive approval with full approval within 2 weeks on one case
 - d. James Davis, Men's Shelter of Charlotte, Charlotte- Still working on a case getting medical information and IQ testing for the applicant
 - e. Kendra Norville, DSS, Pitt County- recently got a presumptive approval within 2 weeks, recent Project Homeless Connect in Greenville provided new referrals
 - f. Kathryn Winston, Coastal Disability Partners, Wilmington- 4 wins in the last week, working on a case where the applicant has been hospitalized at Cherry Hospital for 12 months- DDS denied initial application, hospital will not discharge without benefits, filing reconsideration, questions about substance abuse despite having been sober in the hospital for over 8 months
 - g. Terri Clark, PATH, Cumberland County- working on 4 cases, just got a referral that may be a presumptive disability case, collaboration process with the local hospital is going well, hospital likes the referral form I created and we are creating a process flow chart for the hospital
 - h. Spencer Cook, PATH, Durham- Elizabeth Lumley and I did presentation to local SSA office for the Claims Reps, well-received and has made a noticeable difference in processing cases and getting them to DDS faster, looking at providing presentations annually for local SSA office
 - i. Grace Maynard, Urban Ministry Center, Charlotte- started 6 weeks ago, working with 4 people now, volunteers will be working with a couple of other individuals as well
- II. Announcements:
 - a. Electronic Records Express (ERE):
 - i. Recent national SOAR webinar had a presentation from SSA on the ERE program
 - ii. <u>www.socialsecurity.gov</u> has a page and walk-through of the program available
 - iii. Allows SOAR Case Workers to electronically upload files/records into applicant's DDS electronic file
 - iv. Takes the place of faxing paper records to DDS or turning the records into SSA
 - v. Works best if you have a scanner in your office to convert paper files into PDF files
 - vi. Reduces use of paper and faster way to get confirmation that records are in files

- vii. Aundry- I have been using this for a year now and it is wonderful
 - 1. Hospital gives CD of records
 - 2. All you have to do is download the CD on the computer and then upload onto the website
- viii. The contact at DDS for the ERE program is Ann Griffin Hall
 - 1. Please contact her to get a username for the program
 - 2. Ann can also answer questions regarding the program
- b. Upcoming National SOAR Conference
 - i. July 2011, Washington, DC through PRA
 - ii. Conference will focus mainly on community collaborations
 - 1. Workshops will focus on collaborating with systems
 - 2. Other topics will be quality assurance and training issues
 - iii. 110 slots available, 50 slots will be taken by SOAR state leads
 - 1. After registration is open, it will be first come, first serve for these slots
 - 2. Once registration opens, contact Emily Carmody because PRA will want SOAR state lead approval to register
 - iv. Fees for training
 - 1. PRA is not charging registration fee
 - 2. Attendees will need to pay for their travel and hotel
 - 3. Currently, training is at Fairmount Hotel
 - v. PRA will send out email once registration opens
 - 1. Emily will forward this email to the group
 - 2. Please contact Emily with any questions
- III. Issues in the state
 - a. Aundry- Had a concerning Medicaid hearing
 - i. Recently went to Medicaid hearing where individual was denied because individual did not call DDS after receiving a letter
 - ii. Client is homeless and did not call DDS
 - iii. Hearing was focused on the phone call issue
 - iv. Aundry was not the representative when the initial letter was sent out
 - v. Outcome of the hearing:
 - 1. Will let Aundry know in two weeks
 - 2. Hearing officer kept repeating that the applicant could always reapply
 - vi. No one in the group has had a similar experience at this time
 - b. Emily- Great use of the Dialogue group to check to see if concerning incidents are part of a pattern across the state
- IV. Presentation on Presumptive Disability (PD) by TJ Reynolds-Emwanta
 - a. TJ has been able to advocate for a number of PD decisions in her SOAR work
 - b. Please see attached presentation outline for content of presentation
 - c. Q and A

- i. Terri- I have a referral that has an active claim, started process before working with me, client has had 6 strokes since filing the application- can I go back and negotiate a PD for this applicant after the fact?
 - 1. TJ- since stroke is a PD listing, I would definitely ask for a PD decision
 - 2. TJ- explain current living situation, financial needs, medical needs
 - 3. TJ- If you have a MSR on file for the case, add a page to update current medical state
 - 4. TJ- make sure DDS has the most current records to show stroke history
- ii. Aundry- when do you put your request in for PD and to whom?
 - 1. TJ- I inform SSA when submitting application to give them a heads up about the possibility of a need for a payee
 - 2. TJ-I put in the request with DDS examiner
 - a. Tell them about the claimant (medical history, current living situation)
 - b. Point DDS Examiner towards MSR that I submitted
 - 3. TJ- always good to communicate with DDS examiner about other difficulties
 - a. If the person is currently in the hospital
 - b. If you are having trouble linking applicant to appropriate level of care (ACT Team) due to lack of benefits
 - c. DDS Examiner can use third party ADL evidence to show functioning issues
- iii. TJ- PD has really helped our applicants in getting housed because they can prove income and access more housing programs
- iv. Emily- In listening to the presentation, the three keys are:
 - 1. Efficiently reviewing records and writing reports
 - 2. Writing good medical summaries with doctors' supports
 - 3. Clear communication and advocacy with DDS
- v. Aundry- when do you submit outcomes for PD?
 - 1. Emily-Submit an outcome for the PD decision
 - 2. Emily-Submit a finalized outcome with the official decision
 - a. Note the new payment information in this outcome form
 - b. Emily will update outcomes in the database
- vi. Spencer- would you ask for PD for individuals who do not have a psychotic disorder? (i.e. Major Depressive Disorder, Bipolar Disorder)
 - 1. TJ- I have been trying to request it in every case, especially if they have more than one listing
 - 2. TJ- I would especially ask for PD in cases that involve:
 - a. Two listings from the blue book (ex. Diabetes and Depression)
 - b. HIV cases- usually takes their T-cell counts fluctuating
 - c. Several Strokes- even if drug related

- d. Individuals who are frequent patients in mental health facilities for long periods of time
- e. Severe mental health issues
- f. Individuals who are in and out of jail due to mental health issues or banned from shelters
- 3. TJ- school records can also expose that there are underlying issues since childhood
- 4. Kendra- got first PD by accessing school records to show needs from childhood
- 5. Emily- it never hurts to ask for PD
- V. Quality Review Issues
 - a. Emily- please state in the comments of your outcome reports if your cases are pulled for quality review
 - i. Please note whether it is an internal DDS quality review or at the regional level
 - ii. Regional level of review takes a longer time to complete
 - b. Emily- NCCEH wants to be able to track if there is an emphasis on SOAR cases for quality reviews
- VI. Next Phone Call, Friday, April 22nd, 10-11 am
 - a. Kristin Lupfer will be on the call to discuss Hospital Collaborations
 - b. PRA just released a new toolkit about collaborations with hospitals
 - i. Good examples of collaborations from various states
 - ii. Example of MOU that you can create with hospital
- VII. Future Topics
 - a. Please contact Emily if you have any ideas for discussion topics
 - b. Please contact Emily if you would like to present to the group about a topic