

## **SOAR Dialogue Phone Call**

**December 15, 2011**

(Attendance: Emily Carmody, James Davis, Diedtress Jackson, Katherine Pullicino, TJ Reynolds-Emwanta, Terri Clark, Elizabeth Lumley, Dan Ferrell, Sheila Crump, Linda Flowers)

**I. Introductions and Community Updates-**

- a. Emily Carmody, NCCEH- Just held a SOAR training in Durham this week for 27 attendees, in the last month we held three Documenting Disability trainings for physicians in state hospitals
- b. James Davis, Sheila Crump, Linda Flowers, Men's Shelter of Charlotte- no updates at this point
- c. Diedtress Jackson, Durham Center Access- three approvals in the last month, feeling more comfortable about SOAR
- d. Katherine Pullicino, Onslow Carteret LME- Voc Rehab in the area is interested in participating in SOAR and getting staff trained in SOAR, looking for community members to be involved because I cannot do cases at this point
- e. TJ Emwanta, PATH, Forsyth County- I have been doing presentations about SSI/SSDI benefits and SOAR, has improved coordination and cooperation with getting Medical Summary Reports signed, better communication with doctors in the community, 6 referrals this month and 6 applications to file this week, two approvals and two denials
- f. Terri Clark, PATH, Cumberland County- 1 approval that was sent to a regional audit and 1 denial (started 3 months prior to referral, Terri to file Reconsideration), PATH team is transitioning over to another department, Terri to follow up with an email with more information
- g. Liz Lumley, LATCH, Durham- Got two approvals since got back from maternity leave, one of the applications was reopened from 2009- applicant to get over \$40,000 in back pay, one application was a Recon and was overturned in two weeks

**II. Ethics/Questions Check In**

- a. No ethical questions this month
- b. TJ- Turn-around time with Derrick Martin
  - i. A recon case that has been pending for months with no paperwork from Derrick
  - ii. Derrick has not returned phone calls
  - iii. I check in with Ann Griffin Hall to check on the case
  - iv. Emily- I will call Lisa at DDS today to report these issues
    - 1. Similar feedback for a number of months
    - 2. Ask to have another DDS Examiner for SOAR Recon cases
    - 3. Lisa has spoken to him a couple of months ago about similar issues
  - v. TJ- It has been at DDS for several months and I have not received a "Howdy" letter
  - vi. Emily- Communication is an important piece in the SOAR process
    - 1. Other SOAR DDS Examiners are good at providing communication

2. If SOAR caseworkers have questions about records/cases/decisions, you can contact Ann Griffin Hall to make sure that records you submitted were considered
3. Ann can reopen file to make sure decisions are made with the evidence
4. Liz Lumley- I was able to have a case reopened by Ann after she saw that a majority of the evidence was not considered

III. How to Prepare Applicants for SSI/SSDI income

- a. What happens when someone is awarded benefits?
  - i. How do you prepare applicants for new income and back pay awards?
  - ii. How do you help individuals with a history of substance abuse?
- b. Emily- What are some situations you have run across that have changed the way you do things now?
  - i. Diedtress- I just recently had an applicant who was awarded \$22,000
    1. Collaborated with case managers and treatment team
    2. Connected the applicant to professional payee service
    3. Emily- working with the service team is a great idea for collaboration
  - ii. James- Had a gentleman who was awarded benefits under MR listing
    1. Was not mandated to have a payee
    2. Was in a transitional housing program but kept messing up his money
    3. I gave the SSA form to his MH provider to complete
    4. Now he is in process of getting connected to a payee service
    5. Emily- SSA-787 Form
      - a. On the NCCEH website page for SOAR Caseworkers
      - b. Treating physicians can complete and sign to mandate a payee with SSA
      - c. Not an indefinite status, SSA and doctor can reevaluate after a period of time
      - d. Submit to the SSA office
      - e. Emily- how did it go over with your applicant
        - i. James- Had three conversations with applicant, would agree and then retract
        - ii. Third conversation with MH providers went better because he saw that he was having issues with managing money
      - f. Emily- in our culture, money can be an uncomfortable conversation but it helps when the applicant is aware of their issues with budgeting
      - g. Emily- Anyone else use the 787 Form?
        - i. TJ- I use it in conjunction with my Medical Summary Reports

1. When I'm discussing the MSR, I ask the doctor's opinion about a payee
  2. If they feel the applicant needs a payee, I have the doctor sign the form
  3. That way when benefits are awarded they are automatically assigned a payee
  4. I discuss with the applicants early on about needing a payee due to homelessness or substance use
  5. Recently, a doctor told me he wouldn't sign a MSR if the applicant did not have a payee
    - a. I put it in the report and the doctor signed the 787 form
    - b. However, the applicant's spouse who had a history of substance abuse became the payee
    - c. Now they have disappeared
- c. Two questions: How do you talk to the applicant about what a payee is? AND How do you help the applicant choose a payee who can be trusted?
  - i. Dan Ferrell- If you are the 1696 Representative, then the applicant does not have to approve a request that DDS evaluate for the need of a payee.
    1. Emily- Has the group had a good experience with relying on DDS for evaluations?
      - a. James- I spoke to DDS and the examiner agreed that the applicant needs a payee
      - b. Emily- Sometimes communication gets lost with DDS recommending a payee but SSA not mandating it
      - c. TJ- I have had an issue with that in Winston-Salem
        - i. SSA would call applicants and based on people "sounding normal" on the phone letting them not have a payee
        - ii. I've worked that out with SSA now
        - iii. At the initial appointment to submit applications at the SSA office, I let the Claims Rep know that this person needs a payee.
        - iv. If you let them know ahead of time, you can bypass the situation.
    2. Emily- James, have you spoken to SSA about these issues?
      - a. James- I've been working with the manager at the SSA office around these issues.
      - b. James- Working to get a training scheduled with the SSA office to address some of these issues.

- c. James- We do mostly phone interviews to submit applications so I don't have an opportunity to let the local CRs know that this person needs a payee.
- ii. Emily- Has anyone had any success in talking to their applicants about a payee and the applicant actually requesting a payee?
  - 1. Terri- I've had some success in this.
    - a. My Recon case now is asking for a payee because he is in recovery and does not want to manage money right now.
    - b. Usually I put that in the MSR.
    - c. A case with a husband with MR whose wife managed the household budget
      - i. The husband requested that his wife continue to manage his funds.
    - d. One case where it was a problem
      - i. Applicant awarded and people came out of the woodwork
      - ii. I had to step out of the situation because my job was over and I handed it over to the team.
      - iii. This applicant battled with his payee and worked the situation to where he would not have to have a payee.
      - iv. Hard when it is not a good match and there are limited sources with payees.
  - iii. Emily- I often found that conversations about payees and money went better than I thought they would.
    - 1. I would often bring up the topic when we were discussing functioning
      - a. Questions about budgeting where a nice lead in
      - b. If at that point there related a history of budgeting issues, then I discussed how payees work.
      - c. Explain payee role:
        - i. Work to develop budget with applicant
        - ii. Applicant has a voice within the payee system to work out a payment system that is good for them
        - iii. Can be a good way to get your rent/bills paid on time
    - 2. Terri- Most conversations went well because applicants were aware that they needed help.
    - 3. James- I've had problems with a payee service that I was using
      - a. I've now found a new one to use
      - b. Old payee service was
        - i. Disrespectful to applicants
        - ii. Would not provide money for move in expenses
        - iii. Would not pay bills for applicants, just gave a set amount of money to an applicant every week

iv. Emily- James brings up a good point about our need to advocate with payees to make sure they are respecting our SOAR clients and living up to their responsibilities.

1. TJ- We had an issue like that in Winston-Salem with one of the largest payee services in the county

- a. Assistant at the service was not doing their job in paying bills, etc.
- b. I contacted an agency who was familiar with guardianship to see if they could be a payee for individuals that they do not have guardianship over
- c. Now, they have changed their rules to become a payee for PATH clients
- d. They have been a great resource for us

2. Emily- Nonprofit agencies can become a payee with SSA.

- a. If you have an agency in your community that works well with our target population, then talk to them about becoming a payee.
- b. They will need to know that it is a commitment of administrative time (records, audits, etc.)
- c. Good way to create more resources in the community

v. Emily- What about family members?

1. Diedtress- I had an applicant who was comfortable with his brother being his payee.

- a. Right now it is working out.
- b. We established that he wanted the brother during the application process.
- c. Emily- did you talk to the brother about what it means to be a payee?
  - i. Diedtress- Yes and the local office helped to explain the role

2. James- I often encourage applicants to go with a professional payee service because some of their issues are rooted in their family issues.

- a. Emily- Yes, and going through the application process can also show some examples as to why certain family members should not be payees.
- b. James- One of the biggest issues we see at the shelter is guys who have family members as payees.
  - i. They spend the first of the month with the family
  - ii. Then the rest of the month at the shelter because the money is gone.

3. Emily- Has anyone had any success in intervening with family members?

- a. James- Not before the SOAR training, but we are targeting now in the shelter.
  - b. James- Want to make sure that guests with income can get out of the shelter and into housing.
  - c. Emily- I had a conversation with a cousin of an applicant who wanted to be a payee for an applicant.
    - i. I discussed the responsibility of receipts and audits with SSA.
    - ii. After that discussion, the cousin let me know he did not feel like it would work for him to be a payee.
- d. Emily- What are some other questions about preparing people for benefits?
  - i. Emily- I had an email from someone who stated that they were thinking about requiring payees.
  - ii. Emily- The agency is contemplating requiring everyone who is awarded benefits to have a payee for the first six months to get them through the transition period of having income.
    - 1. Some in the group feel this is a good idea.
    - 2. What is the reason for the agency to do it?
      - a. Emily- Out of concern after watching individuals relapse or get taken advantage of.
      - b. Linda- I have some issues with that because we need to empower individuals to make their decisions.
      - c. Emily- I was also wondering if this would hurt engagement with applicants.
      - d. Linda- I would rather work with people where they are.
    - 3. Terri- We should respect the dignity and value of a person.
      - a. It is a good idea to mandate when you have a person who needs it after working with them and their doctor.
      - b. As a blanket policy, it may not be necessary for everyone.
      - c. Better to make people feel like they have a choice.
      - d. May do more harm than good.
    - 4. Katherine- I agree. We need to respect the individual that if it is all possible they need to be able to make that choice.
- e. Emily- This topic often brings up issues of control.
  - i. It is hard because as a SOAR caseworker we work closely with individuals to get benefits they deserve.
  - ii. However, we cannot shadow them for the rest of their lives to make decisions for them.
  - iii. James- I have been working with a couple of gentleman that were made to have a payee by SSA, but they only had physical issues.
    - 1. No substance abuse history
    - 2. Not history of budget issues.

3. Emily- How did that go?
  - a. James- I have a hearing for one coming up.
  - b. James- The other guy had a family member become his payee and left the shelter.
  - c. Emily- Please keep us posted as to how that process goes.
- f. Please feel free to email me with any further questions you have about this topic.

IV. Announcements:

- a. I will be out of the office from December 22<sup>nd</sup> to January 2<sup>nd</sup>
  - b. Please submit SOAR Outcomes to Emily by January 1<sup>st</sup> for Quarterly Reports
  - c. Happy Holidays!
- V. Next Phone Call, Thursday, January 19, 2011, 10-11 am
- a. Register for the next call by following this link: <http://ncceh.org/en/cev/532>