# Disability Digest

A newsletter from the State of Washington Division of Disability Determination Services

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### **Contract Monitoring & Compliance**



Throughout the year we will monitor your contract to ensure contract compliance. At any time, we may contact you to provide evidence of insurance, licensure, etc. Please respond to our requests in a

timely manner to avoid disruption of the services you provide. Based upon State requirements, if you do not provide the information requested, we may need to terminate your contract for default.

Based upon this year's monitoring activities, here are some questions that may be helpful to assist you in ensuring you are in compliance with the contract:

- Is my license current and active, and not revoked, suspended or sanctioned by any State licensing authority for any reason?
- Are all of my support staff used in performance of exams meet the appropriate licensing and certification requirements of the state, and are not excluded, suspended or otherwise barred?
- Do I maintain both malpractice and slip and fall policies in the minimum amounts DDS requires?
- Are my reports submitted within 14 days from the date of an exam?
- Do my reports adhere to the evaluation and report guidelines?
- Is confidential information stored in locked file cabinets or desk drawers, and appropriately destroyed?

If you have questions pertaining to your contractual agreement with us, please contact Uyen Kashani at <u>Uyen.Kashani@ssa.gov</u>, or at (360) 664-7437.

# **CEU Staffing Changes**

Dawn Cary and Paul Wood have accepted promotions to adjudicator positions and no longer work in the CEU as of 9/1/2014. We wish them the best of luck. We have hired three new schedulers. One in each of our offices. They are Jodi Chapple—

Spokane, Lance Mitchem—You can also 562-6074
Scruggs—Seattle. Once they are able to assist you, we will formerly introduce you. If you have any scheduling questions, and/or concerns please email will let all contents of the search of the se

562-6074 and ask to speak to a scheduler.
Once we have our new team members trained we will let all of you know via email, and we will introduce them in our next newsletter.

You can also call 1-800-

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### It's All in the Details

Our Medical Consultants, have provided us with some helpful hints and reminders regarding specific information we're looking for in our mental evaluations.

Ask specific questions to get detailed answers. For example, when asking a question like, "Why you stop working?" the did claimant may respond, "Because of my panic attacks." We need to also know, was there a particular event at work, did the claimant just stop going, were they fired or quit? Another example, how often do they have panic attacks? Ask when the last attack was, what triggered the attack, how long it lasted, what helped it go away, and how many happen per day, or per week? The more information we have about the frequency, duration and last occurrence of these attacks or events is helpful in our claims process.

**Symptoms.** Let the claimant give you their own description of their mental impairment. Include the claimant's specific responses of current symptoms in your reports. When determining disability, we consider all of the claimant's symptoms, including pain, and the extent to which their symptoms can reasonably be accepted with consistent the objective medical evidence. and other We also evidence. consider the intensity, statements about

persistence, and limiting effects of their symptoms. Information that you provide in your report about the claimant's symptoms (e.g., what may precipitate or aggravate their what medications, symptoms, treatments or other methods they use to alleviate them, and how the symptoms may affect their pattern of daily living) is an important indicator of the intensity and persistence of their symptoms, and helpful in adjudicating claims.

Provide specific answers to MSE questions. Instead of saying, "Claimant failed on three proverbs" or "Claimant could not perform serial 7s," indicate exactly what questions were asked and the claimant's specific responses. Why were they unable to perform serial 7's? If the claimant cannot perform serial 7's, be sure to administer serial 3's.

Questions regarding Drug Addiction and Alcohol. When a claimant states that they are currently clean and sober but admit to a history of DA&A or the evidence presented would indicate this, questioning should be more thorough. Here are some good questions to ask: How was the claimant able to accomplish sobriety? What treatment groups did they attend? Do they have a sponsor? If no DA&A treatment, how were they able to accomplish sobriety without this? Can they

identify a family member, friend or associate who has noticed that they are now sober? Do they have a new social support group or new living situation away from DA&A? How does the claimant maintain confidence that they can remain sober? Any periods of relapse? When was your last drug use or drink? How has sobriety changed their life?

Why ask all these questions? The claimant who has truly worked toward sobriety will quite willingly talk about these issues in specific terms and this information is important for adjudicating claims.

Activities of Daily Living: Some claimants very briefly describe what a typical day is like for them, but we would prefer even more detailed information. Here are some clarifying questions you can ask: If a claimant says they cook and clean, do they prepare elaborate homemade meals from a recipe or do they just microwave or make sandwiches? Do they do laundry or any deep cleaning, or just sweeping and vacuuming? Do they do any yard work, pulling weeds, mowing lawns, gardening?

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## **Questions to Ask When Determining Capability**

All mental consultative examinations require your opinion whether you feel the claimant is capable of managing his/her own funds. Past or present substance abuse can be an indication that a claimant needs assistance managing funds. These questions may help you in determining whether a claimant would be capable of managing his/her funds.

- What bills do you have to pay each month?
- Do you pay your own bills each month? If no, who does this?
- Do you ever forget to pay them?
- Do you buy your own groceries and decide what to purchase?
- What things besides food do you shop for each month?
- Do your friends or family help you figure out how to manage your funds?
- If you have a checking account, have you ever written a check for insufficient funds, if so, do you know how this happened?

### DSM-5

Just a friendly reminder that all the revised diagnostic criteria in the DSM latest edition of the DSM (DSM-5) in examinations and reports. There are no changes to the way that we expect CE vendors to conduct evaluations and write reports due to

psychiatric and psychological CE -5. While a diagnosis or set of diagnoses providers should now be using the are necessary for our program, the most important thing is that your CE reports contain descriptive information regarding the signs and symptoms exhibited by the claimant.





PII is any personal information maintained by an agency that can be used to distinguish or trace one's identity. To help safeguard PII, store paper information in a secured area that is only accessible to authorized personnel and limit access to authorized users, this includes electronically. Do not send PII by email, ensure PII is appropriately destroyed when no longer needed and always train and remind support staff to safeguard PII. If PII loss is suspected, you must immediately report it to the DDS. If you suspect PII loss outside of normal business hours, leave a voicemail or email your DDS contact. If theft is involved, contact local law enforcement and always apply State laws and licensing board requirements when reporting PII loss and notifying affected claimants.

### State of Washington



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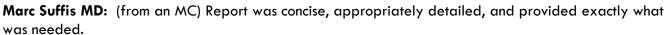


# Kudos for your excellent work!

**Derek Leinenbach MD:** (from a claimant) The doctor was nice, professional, and caring.

**Dennis Pollack PHD:** (from PR) Thank you for locating and sending in an old report from a previous case while you were on vacation.

**Jay Toews EDD:** (from an adjudicator) Excellent report that provided well thought out and supported conclusions.



**Michael Leachman MD:** (from an MC) Excellent report that was easy to interpret regarding a complicated vision impairment.

**Derke Leinenbach MD:** (from an MC) Diagnostic conclusions and the recommendations were well written, thorough, detailed, and logical.

**Samuel Coor DO:** (from an adjudicator) Report are always submitted timely, usually the same day as the appointment.

**Majid Azzedine PHD:** (from an MC) Excellent analysis that really nailed what was going on with the claimant. Was consistent with the MER and really explained why things haven't improved significantly.

