



Maryland Disability Determination Services Medical Relations News

2022

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GRATITUDE

Pause to Reflect

Over the past two years, I have worked on changing my focus away from the challenges at hand to think about our claimants and the barriers they face navigating the disability process. As with many, disability claimants encountered many more challenges due to critical closures and limited access to resources. You, our invaluable CE providers and your staff, helped make these individuals days a little bit brighter. When Maryland Disability Determination Services was ready to resume in-person consultative examinations, you were ready to help. You redesigned spaces to accommodate social distancing, creating a safe atmosphere for you, your staff and the claimants. As difficult as the past few years have been, we have seen so many show compassion, empathy, and offer a helping hand to others during this extraordinary time. Thanks to each of you for being a beacon of positivity for our claimants.

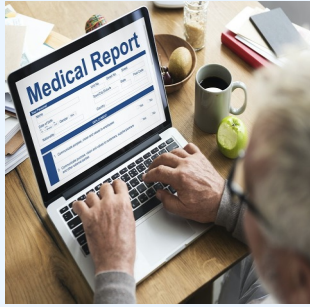
Disability Case Processing System

For the past year, the Maryland Disability Determination Services (DDS) has been utilizing Social Security Administration's Disability Case Processing System (DCPS) for the disability determination process. In March of 2021, we began working in a hybrid environment and transitioned to DCPS in November 2021. As of March 2022, we have only a handful of claims that remain in our previous legacy system. DCPS offers a modern, scalable and secure application capable of providing the flexibility and high performance that DDS needs to process disability claims timely and efficiently. The most substantial benefit is more-efficient case processing, which allows improved service to the citizens of the State of Maryland. We appreciate your patience during this past year, as we navigated learning a new system in a virtual environment and dealing with system integration of Electronic Records Express.

COVID Protocol

What to do if you test positive for COVID, have been exposed to COVID, or have COVID-related symptoms? The Social Security Administration (SSA) has provided a directive regarding COVID protocol, based on CDC's conventional standard guidance, recommending that the provider wait at least 10 days before resuming the performance of consultative examinations. Please notify the Medical Relations Office of any occurrence as described above, as claimants that were seen may have to be notified of potential exposure. As we see a decrease in COVID infections, and are moving toward an endemic, we will be certain to provide updates regarding COVID protocol and policy-compliant requirements. If you have any current questions, please reach out to me at (410) 308-4336 or elizabeth.c.mason@ssa.gov.

REMINDERS



Interpreter

- ♦ If there is a scheduled interpreter at the Consultative Examination (CE), please include a statement on your report that an interpreter was present

Block appointments

- ♦ If you are a block provider and there is an “open timeslot” in your schedule, do not assume it has not been filled

Acceptable report signatures

- ♦ Original written “wet” signature signed in ink
- ♦ An electronic signature submitted through the Electronic Records Express (ERE) attestation process
- ♦ **ERE is the only electronic signature approved by SSA as being policy compliant**
- ♦ The medical source who performed the examination is the only one who can sign the final report

Report and invoice submission

- ♦ Your report and invoice must be submitted within 14 days of the exam date
- ♦ If the CE is broken, please notify us within 24-hours via the ERE website, by calling the disability examiner or faxing the invoice to our toll free fax number: 866-891-7952
- ♦ Be sure to check the “broken appointment” box on the invoice
- ♦ If a CE is cancelled less than 24-hours before the exam date and time, the invoice can be submitted as a broken appointment and you will be reimbursed the broken appointment fee

Legal inquiry

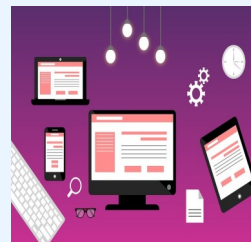
- ♦ If you receive a legal inquiry or subpoena regarding a claimant you examined for disability, please fax it to the MRO at 410-308-3068

Cancelling an appointment

- ♦ If you need to cancel an appointment, please notify the disability examiner and claimant

License and Credentials

- ♦ DDS must be notified if there are any pending disciplinary actions against your license or if you were excluded, suspended or otherwise barred from participation in the Medicare or Medicaid programs or any other federal or federally assisted programs
- ♦ You must have a current and active Maryland license in order to perform a CE
- ♦ Individual provider is responsible to ensure that support staff who participate in the conduct of CEs and any third parties who conduct other studies purchased by DDS, meet all appropriate licensing or certification requirements of the State



Receiving your CE authorizations via fax? Consider registering for the ERE website:

- ♦ No need to print paper
- ♦ The ERE queue is a current schedule
- ♦ Easy to upload the report and invoice
- ♦ More than one person has access to the CE authorization
- ♦ For more information, contact Cindi Cannon at 410-308-4349 or cindi.cannon@ssa.gov



Now that Maryland DDS has completed our transition to the Disability Case Processing System (DCPS), you are mostly likely familiar with the new CE authorization letters.

If you experience any problems with DCPS and the ERE website, please contact Cindi Cannon at 410-308-4349 or cindi.cannon@ssa.gov

ERE TIPS

- ♦ The ERE queue is your schedule
- ♦ Sort the queue by appointment date and time using the **appt date** field to see your daily schedule
- ♦ If there is a gap in your schedule, check the closed queue for a cancelled appointment
- ♦ The schedule **could** change daily as a claimant may call the examiner at any time saying they cannot keep their scheduled appointment
- ♦ CE authorizations on our paper cases cannot be sent electronically
- ♦ Although you will receive the authorization in the mail, you can still upload the report via the ERE website
- ♦ If a CE is cancelled, you will receive a system-generated email as notification
- ♦ The name will be moved to the Closed Requests queue with the status "cancelled"
- ♦ To avoid faxing, upload your invoice with the report
- ♦ The invoice must be the first page



UPLOADING REPORTS FROM THE ERE QUEUE

Administrative staff who access CE authorizations from the **CE provider's** ERE queue, cannot submit the report from that queue. Only the provider who performed the exam has the authority to upload the report from the ERE queue where the CE authorization was received.

The last step of a CE report submission is the Consultative Examination Authorization Agreement. By checking the box, you are agreeing that you were the provider who performed the consultative examination.

Consultative Examination Authorization Agreement



Please read this statement and indicate your understanding by checking the "I have read and agree to the above" checkbox below. When you select "Submit", you will generate an electronic signature and submit your response.

I am certifying, under penalty of perjury, that I have been authorized or contracted by the Disability Determination Services to examine the claimant. I have a valid license and have not been federally excluded. The report is accurate. By checking the "I have read and agree to the above" checkbox below, I am certifying that I personally conducted, or personally participated in conducting, the consultative examination and have electronically signed the report contained within.

☐ I have read and agree with the Agreement above.

Checking the box generates the electronic signature page. This is the last page of the report when it is imported to the claimant's electronic case file. The signature page includes:

- the claimant's SSN
- request ID (from the barcode page)
- site ID (code for Maryland DDS)
- sender's name
- date of submission

The "sender's name" is the name associated with the ERE account from which the report was uploaded.

For this reason, only the CE provider can submit a completed report from their ERE queue. Administrative staff can submit a report with a wet signature via fax to our toll free fax number: 866-891-7952

For more information, email Cindi Cannon at cindi.cannon@ssa.gov



Cooperative Disability Investigations Program

The CDI Program was established in 1997 to prevent and detect fraud in SSA's disability programs. There are currently 46 CDI Units nationwide covering 40 states, the District of Columbia, the Commonwealth of Puerto Rico, the U. S. Virgin Islands, Guam, American Samoa and the Northern Mariana Islands. The units consist of staff from the Office of the Inspector General (OIG), SSA, DDS and local law enforcement partners that investigate questions of fraud in the SSA disability program. The goal of the CDI Units is to obtain evidence of fraud before benefits are paid.

What is considered fraud?

- Making false statements on a disability claim
- Concealing facts or events on an application for Social Security benefits
- Misuse of benefits by a representative payee
- Malingering
- Filing multiple applications

Detecting fraudulent claims benefits State programs such as Medicaid, food stamps and other State Assistance programs in addition to the SSA disability program. In Fiscal Year 2021, there were projected savings of more than \$86 million in SSA's disability programs and approximately \$76.5 million in non-SSA programs nationwide.

Since the program began in 1997, there have been a projected total savings to taxpayers of approximately \$7.7 billion in SSA's disability programs and related Federal and State benefit programs.

Baltimore CDI Unit investigation

A 36-year-old woman was receiving disability benefits for a psychological disorder. An investigation was initiated based on information received that she was working as a home health aide and billing the State of Maryland while receiving disability benefits under a different identity. During the investigation she admitted she had two social security numbers using one to work and one to collect disability benefits. A criminal complaint was filed and she was sentenced to one-year unsupervised probation and ordered to pay restitution to SSA in the amount of \$39,200.



When performing the consultative examination, you have the opportunity to observe the claimant and report possible fraud.

For example:

- Did the claimant give good effort?
- Do the claimant's alleged and portrayed symptoms match the allegations?
- How did the claimant present themselves?
- Did the claimant bring an assistive device that showed usual wear and tear or did it appear that the device was brought only for the evaluation?

If you suspect that the claimant is not being truthful or exaggerating limitations, please do one of the following:

- **Contact the disability examiner**
- **Contact John Quattrociocchi, CDI Unit Manager at 410-308-4441**
- **Contact the Medical Relations Office at 410-308-4335**
- **Call the Disability Fraud Hotline at 1-800-269-0271**



CE Provider Recruitment Needs

- * Spanish speaking Speech Language provider
- * Ophthalmologists/Optometrists: Southern MD
- * Orthopedists: Eastern Shore
- * Audiologists: Western MD, Frederick MD, and Rockville MD

Maryland DDS Consultant Recruitment

As part of the disability adjudication process, the Maryland Disability Determination Services (DDS) employs Physicians, Psychiatrists and Psychologists. These are professional positions responsible for providing consultative medical services and a review of medical records in accordance with regulations of SSA.

These positions are posted on the Maryland State Government website. For more information, please use the link below:
<https://jobapscloud.com/MD/>

Filter Open Jobs

Keyword: Physician or Psychologist
Location: Baltimore County
Department: MD State Department of Education

For additional information, contact Caroline Mason, Medical Relations Director, at 410-308-4336

CE Report Monitoring

When a new physician joins our panel, we provide a virtual platform orientation or face-to-face orientation, and



follow up with regular communication to ensure that the CE provider is off to a good start. For the first several months, DDS monitors the new provider very closely. This entails checking timeliness and reading reports submitted to ensure a quality CE report. Once the initial period is over, DDS continues to monitor every provider as mandated by SSA.

To that end, the DDS reviews a minimum of 5% of all CE reports. On a daily basis, various staff members at our agency review your reports to ensure that each contains all information relevant to the examination and authorized testing. The review includes checking for accuracy as well. In-house Medical and Psych Consultants, Operations' Supervisors, Quality Assurance Specialists and the Medical Relations Office staff check reports for completeness, timeliness and internal consistency. Our staff provides feedback about the physical exam, testing, prognosis and conclusions as well as many other factors.

In addition to in-house monitoring, our agency sends surveys to claimants for feedback about their experience during the evaluation. The claimant can comment on several factors to include: cleanliness of and accessibility to the office, timeliness of the appointment, courtesy of the doctor and staff as well as overall satisfaction with the experience. We gain useful information from the returned surveys and often receive compliments about YOU, our providers. As always, we are committed to providing the best customer service to our citizens.

