

Disability Claims Solutions, Inc.



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Tidbits:

- DCS, Inc. begins new 2010 strategies to assist insureds with successful resolutions. Yea!
- Insurers use surveillance indiscriminately to support claim denials even when it's totally misplaced.
- Lindanee's Blog a big hit in 2009.
- Discovery of XMRV needs a wait-see before claiming a definite victory for the diagnosis of CFS.
- Unum Group named "Best of..." for really dumb things.
- Successful awards of SSDI for Lyme patients.
- Please note our office hours for 2010.

New Strategies for DCS, Inc. in 2010

New Year always means a fresh start with revisions of old resolutions, and great expectations for achieving new goals for the year ahead. By and large expectations set by DCS, Inc. for 2010 are the result of actions taken by disability insurers in 2009.

When WE know how disability insurers deny claims, WE KNOW what to do about it.

In 2009 DCS, Inc. encountered complex and enthusiastic efforts on the part of disability insurers to target and deny claims unfairly.

Unum's attempt to remove non-attorney claims professionals from the claims process failed after a successful fight on the part of DCS, Inc. to disclose Maine's AG's self-interest in supporting Unum.

We also watched as Unum Group trashed the Multi-State Settlement Agreement and went back to the old Provident days of disregarding any medical opinions other than their own. Many insureds reported multiple claims abuses and hardship denials as a result of Unum once again acting as the "rogue" of the disability insurance industry.

Sun Life Financial was named the most egregious disability insurer because of its refusal to pay claims entirely. Sun Life appeared to render only one decision in 2009—Deny, deny, deny.

2009 also saw Met Life emerge as a major player aggressively using surveillance and RN consultants to

deny claims. In the past Met Life had been one of our recommended insurers, but in the midst of economic recession, Met aggressively managed claims and leaned more toward Unum strategies. We were sorry to see that.

Northwestern Mutual and Principal proved themselves to be the aristocrats of the disability industry and actually paid claims fairly.

Congrats!

Still, Prudential, CIGNA, Aetna, The Standard, and The Hartford also caused a great deal of hardship for insureds, but then again, they always did.

Based on our experience in dealing with all of the disability insurers in the United States, DCS, Inc. will be publishing new and revised claims strategies for insureds for 2010.

Surveillance Re-emerges as a Major Activity to Deny Claims

In 2009 Unum Group actively engaged in surveillance, some of which was completely misplaced, even funny, were it not for the fact the surveillance was used to deprive insureds of benefits.

For example, Unum stated in a denial letter surveillance showed a male insured "socializing with a woman and was probably dating." *Depressed insureds aren't allowed to date? Gee.*

Another example was a Unum denial letter stating an insured with migraine headaches wore sunglasses while inside McDonalds and removed them when leaving a field visit. Interestingly, this insured does not own a pair of sunglasses. Still, wearing or not wearing sunglasses is not justifiable cause to deny a disability claim.

Due to Unum's increased abuse of "watching insureds"

it made the decision NOT to disclose actual surveillance until it has an opportunity to depose the insured about it under oath, presumably in litigation.

This could leave ERISA insureds blindsided when attempting to overturn an appeal.

Still, surveillance is an activity that insureds need to reckon with very carefully. Don't worry, DCS, Inc. will have a publication for claims surveillance. Stay tuned.



In order to change the disability claims processes used by insurers to deny claims unfairly, insureds will need to "step up" and report abuses to federal and state regulators.

When insureds begin to understand insurers deliberately instill fear to produce compliance and silence, only then will the current system begin to change.

Everyone with a claim has a voice, and we're hoping in 2010 insureds begin to use it and help change the system.

Insurers need to be held accountable, but without insureds speaking out, that's just not going to happen.

The discovery of XRMV in Chronic Fatigue insureds is not an end-all to the question of whether or not CFS is a physical disease. Much more needs to be done by researchers before CFS, and the test for XMRV, can be said to prove the existence of CFS.

Lindanee's Blog a Big Hit for 2009

<http://lindanee.wordpress.com>

In connection with the incorporation of a sister non-profit organization, (The National Coalition of Disability Insureds), DCS, Inc. began Lindanee's Blog as an effort to keep insureds informed, but also to support insureds who may wish to comment and help others.

To date the Blog has received over 25,000 views after only three months up and running. Clients and non-clients read the articles on the Blog, but said a definite "no" to making comments.

Apparently, insureds currently receiving disability benefits are too fearful of losing those benefits if they are identified by their disability insurer.

Although we understand the fear insureds may have because of possible insurance moles snooping around the Internet, fighting criminal insurance companies quickly becomes a lonely place when DCS, Inc. is the only one willing to fight. It is also pretty sad to come face to face with the kind of fear insureds have that keep everyone so quiet and fearful of losing.

Nonetheless, Linda continues to write editorials and articles of interest to disability insureds and will begin to target insureds who have NOT yet filed a claim for disability for assistance in supporting others. Perhaps this group will feel more comfortable in supporting the cause of fair and equitable disability claim review. We sure hope so.

Although Lindanee's Blog may seem a pretty negative place at times, it has generated 25,000 views in three months. We think that's an excellent start!

Chronic Fatigue and XMRV in Disability Insureds

Many insureds wrote and called DCS in 2009 extolling the new discovery that patients diagnosed with Chronic Fatigue Syndrome were actually infected with an infectious virus called xenotropic murine leukemia or XMRV.

Dr. Mikovits, a research director at the Whittemore Peterson Institute in Reno concluded that Chronic Fatigue, which had in the past been considered a psychiatric disease, is in fact an infectious disease.

XRMV, a retrovirus, is a member of the same family of viruses as the AIDS virus. XRMV is in a group of viruses what carries genetic information in RNA rather than DNA, and they insert themselves into the hosts' genetic material and stay for life.

While the discovery of the XRMV virus appeared to insureds as a solution to proving a total disability due to Chronic Fatigue Syndrome, upon closer examination DCS wasn't so sure.

There is no doubt but that a certain percentage of insureds have been diagnosed with CFS when in fact their physicians opted for CFS when no other known cause of sickness was apparent in the patient.

Upon inspection DCS feared CFS would essentially become as Lyme Disease giving the CDC reason to claim without a positive test for XMRV, the insured was healthy.

Of course, disability insurers are likely to demand a positive on the test for XMRV before paying any CFS claim.

We suspect any test for XMRV would actually exclude 50% of patients currently diagnosed with Chronic Fatigue Syndrome, possibly taking around 40% or more of disability insureds off claim.

Even though Dr. Mikovits and other notable scientists cautioned they had not yet proved that the virus causes CFS was caused by XMRV many insureds put all their eggs in the

XMRV basket of proof for disability claims.

You can be sure if in fact XMRV is determined to be the cause of CFS, all disability insurers will be asking for test-positive results before paying the claim.

If you are an insured who has been mis-diagnosed with CFS, a negative test result will result in a denied claim.

When you consider the above, the discovery of XMRV is a double-edged sword. If the insured's diagnosis of CFS was accurate a positive test determines a solid diagnosis,; if not, a negative result leaves the question of why the patient is sick still to be determined.

DCS is of the opinion disability insureds shouldn't be rushing to have the test until further evidence is documented and the results have been scientifically proven. Insureds need to also remember that a "diagnosis" does not always equate to "disability."

Gosh, Unum Did Something Right.....?

In November 2009 the Chattanooga Free Press gave Unum Group accolades for having been named by Newsweek as being one of the greenest companies in America.

Whew, for a moment there I thought this news was going to be phenomenal. So, Unum Group recycles and attempts to save the environment. If you ever saw the expensive landscaping of the Congress St facility in Portland, ME, you'd get that right away.

First of all Chattanooga is the location of the headquarters of Unum Group where controlling the press is still pretty easy.

Secondly, in 2009 Unum was awarded a Healthy Life-styles Award. This wasn't really a difficult thing to do since Unum either put their older employees out on voluntary retirement or fired them. The average company age for a claims handler is now somewhere between 25 -30 and everyone appears healthy. Thank goodness.

Third, Unum was also named the Best Large Employer in Maine. I really had to laugh at this one since Unum IS THE ONLY largest employer in Maine. Second and third largest employers are Bath Iron Works and Fairchild Semiconductor.

Finally, Unum was named the best place to work in insurance. Hmmm...I wonder if they asked Unum employees about that. Comments by Unum employees in 2009 suggest results entirely different. Way to go Unum, you finally did something right that's not really important at all.

The Best of...

I always wonder when organizations get named the best of something. Either the company has a darned good publicist, or a very good marketing team. It isn't hard to get in the news these days if you know the right people.

Filing for SSDI When You Have Lyme Disease

Those who are disabled from Lyme disease certainly have an uphill battle when applying for SSDI or SSI. Lyme disease is a disorder which can involve any number of different body systems i.e. musculoskeletal, cardiovascular, and neurological and often manifests as exacerbations and remissions sometimes over a period of years.

To our knowledge Lyme disease is not currently listed in the social security administration's impairment listing manual often referred to as the "blue book." Impairments listed in the "blue book" normally qualify an individual for SSDI.

Of course the individual must also meet social security's general eligibility requirements. SSA makes decisions based on two major factors: mental and/or physical requirements and work history.

The definition of disability for SSDI holds that a mental or physical impairment be disabling, and severe enough to have prevented an individual

from working for the past 12 months, or that which can be expected to prevent working for twelve months, or may result in death.

Even though the SSA's blue book doesn't list Lyme, sufferers may apply for benefits if the individual's medical records document the severity of the impairment including loss of function.

In general, social security does not make decisions on a diagnosis, but on the restrictions and functional limitations a person has that results on their inability to work based on their training, education and experience the person had in the past.

Because Lyme disease is not listed in the "blue book", it is even more important for those with Lyme disease to do the following.

Make sure all treating physicians understand the importance of documenting actual functional limitations in the actual patient notes.

Many physicians actually write "non-descriptive" patient notes which later are determined to be useless for SSDI purposes.

If a Lyme patient is suffering from neurological deficits that result in loss of balance and coordination, this should be clearly indicated in the patient record as attributable to Lyme disease.

Likewise, memory lapses, disorientation, blurred vision, muscle aches and arthralgias should also be noted in the records as having been caused by Lyme.

We also recommend individuals should keep journals of symptoms, medications, tests, and daily fatigue. Although not proof positive, these journals have been accepted by SS as proof of inability to sustain work on a consistent basis.

By and large, Lyme patients should make sure physicians are documenting symptoms as attributable to Lyme along with actual functional limitations.

If Lyme patients do not have medical treatment sources that establish the existence and severity of their condition, they may be placed in the position of receiving SSA decisions based on scant medical evidence and/or one-time consultative exams performed by SS third-party physicians. Thorough, timely and accurate medical reports clearly documenting evidences and symptoms due to Lyme disease is essential.



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Mon—Wed 9:00 a.m.—4:00 p. m.

Thurs—Fri

Dedicated to writing appeals and other communications on behalf of insureds. Please email or call only when an emergency.

Disability Claims Solutions, Inc. works with insureds, physicians, employers and attorneys to provide information advocacy concerning the disability claims process.

This newsletter is the property of Linda Nee and Disability Claims Solutions, Inc. It is not intended to be a substitute for medical or legal advice and all issues relative to a person's health should be discussed in detail with a physician who is licensed to practice medicine. Likewise any issues of a legal nature concerning any disability claim should be obtained from an attorney licensed to practice law.

As always, please feel free to contact me with any questions you may have concerning this information.

CLIENT CORNER:

I would like to wish everyone a Happy New Year and the best of everything for 2010. Also, I'd like to draw your attention to the office hours indicated above since I still need time to do the letter writing and composing of detailed reports for insureds....which I believe is the most important part of my job. The more talking on the phone, the less time there is to do "the real work." Thanks for your understanding on this issue. Please continue to call me for emergencies, though.

I'd also like to remind all of our clients to check into the Blog every now and then and keep up with what's going on. There is a great deal of interesting information to be had on the Blog, and we highly recommend a look-see from time to time.

I will be discussing my new claims strategies with our clients on a 1 on 1 basis since each claim and client situation is unique.

All of our clients have done an excellent job this year chasing medical information and presenting forms to their physicians. This isn't always an easy task when not feeling well and we appreciate the team efforts made to honor our requests.

We truly appreciate all of our clients and the hundreds of people who email and call each year with questions. DCS is honored you found us on the web and contacted us. We look forward to helping you with the complex process of having a successful disability claim in 2010.

Best Wishes,

Linda