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In This Issue of the Patient Voice

Applying for Disability Benefits DPN Resource Neuropathy and Fall Prevention Medical Necessity Denials

Social Security Disability Benefits and Neuropathy

By Deanna Power

Sometimes caused by nerve damage, sometimes diagnosed without a known cause, neuropathy and its symptoms can make preforming day-to-day activities challenging. If you find that your neuropathy is keeping you from work, there could be financial assistance available. Social Security disability benefits are a resource for qualified disabled people in need.

What are Disability Benefits?

Social Security disability recipients receive a check directly deposited into their bank account from the Social Security Administration (SSA). They are also eligible for Medicare, Medicaid, or both. There are two forms of disability benefits available. Medically qualifying is the same for both, but each has its own technical qualifications.

The first type of benefits, Social Security Disability Insurance (SSDI) is only for disabled adults who were October 2018

The NAF invites you to invites you to share your personal stories, experiences, questions, news and tips, with our readers and the neuropathy community. Your story may be published in an upcoming Patient Voice newsletter! Simply email us at info@neuropathyaction.org.

Neuropathy and Fall Prevention

Falls are the leading cause of nonfatal injuries that are treated in medical offices in the United States. While falls are more common in older adults over the age of 65 years of age, falls do occur at any age. Falls lead to temporary or chronic decrease in quality of life, higher health care costs, and might lead to decreased life span. Besides the physical consequences of falls, individuals who fall are more likely to demonstrate fear of falls in the future thus limiting activities formerly enjoyed in order to prevent a possible fall.

There are several physiologic factors that have been found to contribute to risk for falls: vision, peripheral sensation, muscle force, reaction time, and postural sway. These factors can be summarized in various systems contributing to balance and mobility. First, adverse changes in visual system such as reduced acuity, depth perception, contrast sensitivity and especially narrowing of the visual field have been associated with increased risk for falls. While visual system responds to light, the vestibular stet responds to movements of the head. The vestibular system in conjunction with the visual information helps us discern whether the world or we are moving. The third system, somatosensory, is sensitive to touch, vibration, and pain. Individuals with neuropathy have decreased ability to use information provided by this system and therefore might rely more on the visual and vestibular system, considering those are intact. Second, in addition to the aforementioned sensory systems, cognition and motor systems also dictate balance and mobility success. Studies show that

once a part of the workforce. This is because the SSDI fund is taken from taxpayers. If you did not contribute to the fund, you cannot benefit from it. If you receive SSDI benefits, you will be enrolled into Medicare 24 months after the onset of your disability. The second type of benefits, Supplemental Security Income (SSI) is available for people of all ages. There are no work requirements, but there are strict financial limitations. If you have a high amount of saved cash or assets, or have a highearning spouse, you will not qualify for SSI benefits. In most states, you are automatically enrolled onto Medicaid after being approved for SSI benefits.

Medically Qualifying With Neuropathy

The SSA compares every application it receives to a medical guide called the Blue Book. The Blue Book lists hundreds of conditions that could potentially qualify for disability benefits. The Blue Book also describes which symptoms or test results must be present for an applicant to be approved. Neuropathy is listed in the Blue Book. The listing requires that you experience extreme occurrences of one of the following:

- Tremors
- Paralysis
- Partial paralysis
- Or involuntary movement in two extremities that makes walking or using your hands difficult.

If you do not meet experience one of these symptoms, you could still qualify for disability benefits. You can do this by having your doctor fill out a residual functional capacity (RFC) evaluation. An RFC will go through all of your symptoms caused by neuropathy, and how they limit you from preforming all the work you would otherwise be qualified for. maintenance of fluid intelligence, the ability to problemsolve, reason, or to think abstractly, help individuals to find solutions to new movement challenges. Further, muscular strength, endurance, and power, and flexibility all aid in successful prevention of falls.

In order to control balance, three postural strategies can be employed: ankle, hip, and step. These strategies can be developed by carefully designed fall prevention program, however, the ankle strategy is the most challenging one to use for individuals with neuropathy because adequate sensation in the feet in order to feel the surface beneath is necessary. Hip and step strategy then become viable options for fall prevention and require adequate range of motion and strength in the hip region as well as adequate lower body muscle strength, power, range of motion, and central processing speed to initiate the step in time.

Moreover, prescription medication can contribute to fall risk. Studies have shown that individuals who are taking four or more medications are four times more likely to fall when compared to peers. Moreover, certain medications have side effects that can heighten the risk for falls and cause dizziness, weakness, decreased alertness, and orthotic (postural) hypotension. Most classes of psychotropic drugs such as antidepressants, neuroleptics, hypnotics, benzodiazepines, and sedatives have this effect. Additionally, environmental hazards contribute to yearly incidence of falls. Keeping environment free of obstacles has been an effective way of reducing prevalence of falls. A myriad of home safety issues and home modifications, including a downloadable home safety checklist are available on <u>www.stopfalls.org</u>.

Tips to reduce risk of falling:

- Participate in physical activity that specifically addresses variables related to prevention of falls (strength, flexibility, reaction time, postural training etc.)
- Keep environment free of fall hazards
- Have your vision checked regularly
- Be aware of medications that might alter your balance

Exercise caution:

Individuals who have peripheral neuropathy should take proper care of feet to prevent foot ulcers and blisters. Feet should be kept dry and the use of polyester or blend socks in addition to silica gel or air midsoles is highly recommended.

- Silvie Grote, MS, MA, ACSM-RCEP

Sources:

ACSM's Guidelines for Exercise Testing and Prescription. (2014). Chapter 10: Exercise Prescription for Special

How do I Apply for Benefits?

If you with to apply for benefits, your first stop should always be the SSA's website. It will give you all of the information you'll need to apply. Birth certificates, work history, and your household income are just a few of the materials you'll need to apply. When filling out the application, be sure to write down as many details about your neuropathy as possible. The more meticulous you are, the higher your chances are for getting approved.

If you are applying for SSDI benefits, you can complete the entire application online. If you are applying for SSI benefits on the other hand, you will need to complete the application in person at your local SSA office. The SSA has offices in every state.

If you are denied benefits, do not lose hope! Nearly 70% of applicants are initially denied, but there is a hearty appeals process available for you. The first step of the appeals process is filing for reconsideration, which consists of submitting a simple form online asking for the SSA to evaluate your claim again. If this is denied, you can present your case in front of a judge at what's called an ALJ hearing. If the judge denies your claim, you can appeal that decision. Finally, you can take the claim to federal court.

With good medical documentation and careful note taking, your claim will hopefully be approved quickly!

NAF Launches DPN Awareness Poster in English and Spanish

The NAF released the results of a national Diabetic Peripheral Neuropathy (DPN) patient Quality of Life (QOL) survey. Out of 978 total survey responses the majority of patients reported that they were misdiagnosed multiple times before they were accurately diagnosed with Populations.(9th ed.). New York: Lippincott Williams & Wilkins.

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Medical Necessity Denials?

Over the years the NAF has heard many stories from patients where they have had a medication, treatment, procedure or hospitalization denied because their health plan said it was not "medically necessary." The NAF believes that a provider's recommendation should be deemed "medically necessary" if the recommendation is reasonable and the recommendation comports with community standards of care. Additionally the NAF believes that no care may be denied on the grounds it is not "medically necessary" except by a physician gualified by education, training and expertise to evaluate the specific clinical issues. Additionally, patients and their providers must have the right to a transparent appeal process and obtain a free, timely, external review of any adverse benefit decision based on "medical necessity" or a claim the service is "investigational" or "experimental."

If you are having trouble getting your medications, treatments for "medical necessity" reasons please let the NAF know about your experience. Contacting the NAF can potentially benefit you in two ways. First, the NAF can potentially help you work with your insurance company to get the medications and therapies you are entitled to. Second, the NAF will keep track of the problems patients face, identify patterns and work to improve the system for everyone. Please contact us at <u>info@neuropathyaction.org</u> or at (877) 512-7262. DPN (59%). More than 52% reported that it took more than a year to be accurately diagnosed. Of these individuals, more than 49% reported that it took over two years to be accurately diagnosed. The majority of survey respondents reported that they currently experience nerve pain (64%). Given these results the NAF is now launching a poster in both English and Spanish to be hung in providers' offices in hopes of bringing awareness to this disease. Our goal is to bring additional awareness to DPN and help the general public better recognize the symptoms and warning signs of DPN. We also hope the flyer sheds light on the importance for patients to have meaningful conversations with their healthcare providers about how to better recognize and manage DPN symptoms. The poster can be viewed in English and Spanish below.

English Version

Spanish Version

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