AIDS Walk 2011

Thanks to everyone who walked with Partnership Project at AIDS Walk on Sunday! Team Partnership was the biggest ever. Thanks to CAP for putting on such a successful event! Mark your calendars for next year—September 23rd!

Support Partnership Project and Lincoln Restaurant

On Wednesday, November 2nd dine at Lincoln restaurant and 10% of your food bill will be donated to Partnership Project. (This event was previously scheduled for 10/16 but has been rescheduled to November 2nd.)

NEW STATEWIDE PLANNING GROUP NEEDS YOUR VOICE

For the past year, members of the Oregon HIV Care Coalition and the HIV Prevention Statewide Planning Group have been working towards a common goal of integrated statewide HIV planning. We are pleased to invite you to submit a membership application to the newly convened Oregon HIV/Viral Hepatitis (VH)/Sexually Transmitted Infections (STI) Integrated Planning Group.

Attached you will find a cover letter, which provides additional information regarding this new group, as well as the membership application. The application is also available here. Please submit your application to Warren Scott at warren.scott@state.or.us or by fax at 971-673-0178 by November 4, 2011.

Please also help us pass along this opportunity to persons living with, affected by or at risk for HIV/Viral Hepatitis (VH)/Sexually Transmitted Infections (STI) and other interested stakeholders.
When Does Kidney Disease Become Disabling?

Many people work for years with moderate symptoms of kidney disease. The disorder may not progress, or may eventually result in limitations which affect the ability to work on a full-time basis. That is when a disability benefit application should be considered.

Kidney disease can cause impairment of renal function and functional capacity. The question of disability turns on the severity of symptoms.

This disease has many causes, among which are high blood pressure and diabetes. It is hereditary, and some ethnic groups are more prone to be affected.

It can trigger edema, pain, neuropathy and weight fluctuation. Kidney disease is typically controlled by medication, but tends to worsen as years go by. The illness is considered as a “Genito-Urinary Impairment” under the regulations. The disabling condition must have lasted, or be expected to last for a continuous 12 months.

If a patient is under dialysis treatment, or needs a kidney transplant, the claim should be granted quickly at the application level. The new Compassionate Allowance policies for some kidney cancers also allow rapid favorable decisions.

Social Security considers a patient disabled for 12 months after transplant surgery because of immunosuppression and the danger of rejection. We can help you be sure everything is lined up to facilitate a quick decision. As always, it is important to get it right the first time.

On a more subtle level, renal disease can be the basis of severe neuropathies that can qualify a claimant for benefits. If hands or feet are significantly impaired by numbness or pain, most jobs are impossible to perform.

SSA considers symptoms, physical findings and laboratory results. Medications for this constellation of illnesses have significant side effects, including high blood pressure, profound fatigue, nausea, diarrhea and weight loss. Steroids have their own set of daily side effects, and can cause long-term bone loss. These side-effects need to be documented for consideration.

If the kidney condition does not exactly meet this regulation’s criteria, Social Security must also consider whether the impairment fits into a “combination of impairments” that are disabling.

Careful analysis is required to evaluate whether the limitations from kidney disease and medication side effects can result in an award of benefits. We would be glad to consult with you about any of your patients or clients who are experiencing these conditions.

New Conditions Added to Compassionate Allowance List

- Aortic Atresia • Mitral Valve Atresia
- Single Ventricle • Eisenmenger Syndrome
- Heart Transplant Graft Failure
- Hypoplastic Left Heart Syndrome
- Left Ventricular Assist Device (LVAD) Recipient
- Pulmonary Atresia • Tricuspid Atresia
- Endomyocardial Fibrosis
- Heart Transplant Wait List, 1A/1B
- Primary Cardiac Amyloidosis
- Left Ventricular Assist Device (LVAD) Recipient

Call our office if we can help your client quickly receive disability benefits due to any of these conditions.

1 http://www.socialsecurity.gov/disability/professionals/bluebook/6.00-Genito-Urinary-Adult.htm
Photosensitivity and HIV

Photosensitivity is an abnormal inflammatory skin reaction to ultraviolet (UV) light. It can present as a rash that may be flat or raised (in papules or small bumps); it may appear in patches, as plaques, or just a red are; it may be itchy. The affected areas are often sun exposed areas such as the arms, face, the “V” of the neck and chest areas. In addition to patient history, a skin biopsy may be helpful to make an official diagnosis of photosensitivity.

Rates of photosensitivity reactions are increased in people living with HIV. Bilu et al\(^2\) specifically found increased rates of photosensitivity reactions in people with HIV related to race (African Americans were 6.68 times more likely to have the reaction versus other races), antiretroviral treatment status (with those ON treatment being at greater risk), and CD4 count < 350 cells/mm\(^3\).

Not only has HIV itself been associated with increased risk of photosensitivity, but some of the medications we use for prophylaxis and treatment of HIV may also increase the risk of photosensitivity. For example, sulfamethoxazole/trimethoprim and dapsone are each used to prevent PCP pneumonia in patients with a CD4 count < 200 cells/mm\(^3\) and have both been associated with photosensitivity. In addition, some protease inhibitors (darunavir, fosamprenavir, and tipranavir) have a component that may also be associated with photosensitivity reactions. Saquinavir is another protease inhibitor and has been specifically associated with photosensitivity.

Many of the patients that have experienced photosensitivity reactions were taking antiretroviral regimens that included emtricitabine, lamivudine, tenofovir, and/or zidovudine (nucleoside reverse transcriptase inhibitors). Anecdotally, raltegravir may also be associated with photosensitivity, although this is not included as a potential adverse event in the package insert.

Even though summer seems to have officially ended, clients should still be reminded about sun protection. A sunny day in the middle of winter or a trip to a sunny climate may end in a photosensitive reaction if clients forget about sun protection.

**Sun Protection Recommendations\(^1\):**
1. Wear a sunscreen with a **minimum of SPF 30**
2. **Avoid the midday sun** (from 10 am – 3 pm generally)
3. **Wear protective clothing** and a wide-brimmed hat
4. Consider UV blocking window film for car and home windows if needed

---

\(^1\) Ofori, AO. Overview of cutaneous photosensitivity. In: UpToDate, Dellavalle, RP (Ed), UpToDate, Waltham, MA, 2011.

Open Season for Medicare Prescription Drug Program

The next open season for enrollment in the Medicare Part D prescription drug program will run from October 15 to December 7. Newly eligible Medicare beneficiaries, and current beneficiaries who are considering changes to their Medicare Part D plan, should mark their calendars for October 15.

The Medicare Part D prescription drug program is available to all Medicare beneficiaries to help with the costs of medications. Joining a Medicare prescription drug plan is voluntary, and participants pay an additional monthly premium for the coverage. While all Medicare beneficiaries can participate in the prescription drug program, some people with limited income and resources also are eligible for Extra Help to pay for monthly premiums, annual deductibles, and prescription co-payments. The Extra Help is worth about $4,000 per year. Learn how to apply online for the Extra Help at www.socialsecurity.gov/pubs/10525.html.

IF IT’S NOT .GOV, IT’S NOT SOCIAL SECURITY

By Alan Edwards    Social Security Public Affairs Specialist

When you go on a road trip, you need to follow the signs to arrive at the right place. Going online can be very much the same. Look for the “.gov” at the end of the web address — if it isn’t .gov, it isn’t the real Social Security website — www.socialsecurity.gov.

Countless consumers nationwide are victimized each year by misleading advertisers who use "Social Security" or "Medicare" to entice the public to use their services. In many cases, these companies offer Social Security services for a fee, even though the same services are available directly from Social Security, free of charge. These services include:

- updating a Social Security card to show a bride's married name;
- replacing a Social Security card; and
- getting a Social Security number for a child.

These for-profit businesses may cleverly design their websites, so when people use Internet search engines, their advertisement pops up. They may even make their advertisement look similar to the real Social Security website. And some of these sites, at first glance, appear to be affiliated with Social Security. But upon closer examination, these are for-profit companies charging individuals for a service that is provided free by Social Security.

For instance, a quick Google search on “replacing a Social Security card” brings up paid advertisements for websites that charge a fee just to get an application for a new card. That service is absolutely free from Social Security.

The law that deals specifically with misleading Social Security and Medicare advertising prohibits people or non-government organizations, like for-profit businesses, from using words or emblems that mislead others. Their advertising cannot lead people to believe that they represent or are somehow affiliated with or endorsed or approved by Social Security or the Centers for Medicare & Medicaid Services (Medicare). But that doesn’t stop advertisers from trying.

For more information, you can read our publication What You Need to Know about Misleading Advertising at www.socialsecurity.gov/pubs/10005.html.

When you go to www.socialsecurity.gov, make sure you look for the “.gov” sign along the way.