Section Eight

Ethics

Objectives
1. Understand ethical considerations a practitioner must make.
2. Negotiate ethical dilemmas.
3. Practice effective professional conduct.
Applying the Information in This Handbook

There is an incredible amount of information contained in this handbook pertaining to SSA disability benefit programs, their associated work incentives, and the delivery of benefits planning, assistance and outreach services. The question now becomes, how should this information be applied in day-to-day practice? Benefits specialists face numerous situations in their work requiring a high degree of discretion, judgment, maturity, and the ability to balance competing demands. Solutions to benefits problems are not always cut-and-dried and there are times when benefits specialists must rely on their own internal moral compasses to achieve resolution. It is not enough just to know the material, although a firm grasp of the content is essential. A benefits specialist must be able to use the material in a consistently responsible manner.

As in all professional counseling fields, benefits planning and assistance involves helping people resolve problems with highly critical and sensitive life issues. Benefits assistance provided to persons with disabilities is further complicated by the heightened vulnerability of persons with disabilities and the complexity of the information applied. Because of these facts, benefits specialists must commit to upholding stringent ethical standards and principles in the performance of their work. These principles can be grouped into 5 main categories:

1. Maintaining professional competence
2. Protecting consumer confidentiality
3. Serving consumer interests and respecting consumer choices
4. Avoiding conflicts of interest
5. Maintaining personal integrity

Principle 1 — Maintaining professional competence

Benefits specialists deal with critical issues relating to personal finances and health care coverage that can have a profound impact on a consumer’s economic and physical well being. A serious error can have a disastrous effect on an individuals’ ability to pay for food, housing, utilities, or essential medical services. It is important that benefits specialists recognize the power they wield through the information and advice they give. In order to provide sound advice, benefits specialists must attain and maintain a high level of knowledge and skill and apply this knowledge and skill effectively.
Professional competence also includes the wisdom to recognize the limitations of one’s knowledge and when consultation or referral is appropriate. It is important to understand that a benefits specialist could never achieve 100% competency in all areas and on all topics. The material is far too complex and changes too frequently to ever master it completely. In order to identify those areas in which external consultation, referral, or additional training may be necessary, benefits specialists must conduct a thorough assessment of skills and competencies. A self-assessment tool for benefits specialists is contained in Appendix L, which can assist with this task. The results of the self-assessment should direct the benefits specialist in his/her professional development.

Finally, professional competence includes diligence in providing professional services in a courteous, prompt, planful and thorough manner. Every transaction with a consumer is a reflection of the benefits specialists’ professional competence.

Principle 2 — Protecting consumer confidentiality

In order to provide effective services, benefits specialists often are required to gather a wide range of financial and personal information about the consumer. In some cases, information about the individual’s disability may also be collected including medical and/or psychiatric records. All of this information must be kept strictly confidential and may not be disclosed to any external party without express written permission from the consumer. To accomplish this, the benefits specialist will need to use a standardized release of information form that has been carefully reviewed and signed by the consumer. These releases should be obtained at the initial meeting at which time the consumer should be informed that information would only be shared with external parties if approved by one of the signed releases. Remember that it is never permissible to release confidential information obtained from another source (such as the SSA) to anyone else, even with a signed release. Benefits specialists must also be aware of other ways that confidential information can be inadvertently exposed including email fax transmission and conversations with others.

Principle 3 — Serving consumer interests and respecting consumer choices

Benefits specialists must remain focused on serving the best interests of the consumers at all times. In most cases this equates to maximizing financial benefit from working while minimizing the negative impact of earnings on benefits. To accomplish this, the benefits specialist must use his/her knowledge and expertise to inform the consumer of all positive and negative effects of any chosen path and offer advice about the best course of action to pursue. While the benefits specialist may offer advice about strategies for maximizing positive employment effects, he/she ultimately must respect the choices made by the consumer. There will be times that consumers make choices contrary to the
advice of the benefits specialist. Sometimes these choices are not in the best interests of the consumer in the opinion of the benefits specialist. The benefits specialist will have fulfilled his/her responsibility as long as all information has been provided to help the consumer understand the issues and make a fully informed choice. The specialist’s job is to work toward the goals sought by the consumer, not what the specialist deems to be appropriate. Similarly, the specialist must remain clear about who the primary consumer is. The benefit specialists’ job is to advocate for what the consumer desires, not what the parent, payee, job coach, residential services provider, vocational rehabilitation counselor, or SSA claims representative thinks is best. There will be times when it is very difficult to balance the competing desires of all involved parties.

Principle 4 — Avoiding conflicts of interest

A potential conflict of interest arises any time the benefits specialist, or his/her employer, has a real or apparent conflict with the best interest of the consumer. The clearest example of a conflict of interest would be where the SSA or another agency that is responsible for determining the consumers’ right to a particular benefit employs the specialist. Another example would be where the specialist is related to or has a business relationship with the person at the SSA or another agency that is responsible for deciding issues related to the consumers’ case. A third example is where the specialist, or his/her employer, is in a position to benefit monetarily from the consumer’s work activity and benefit status.

The best approach is to avoid any real or perceived conflicts of interest when providing BPA&O services. In cases where a potential conflict of interest exists, the specialist should disclose the potential conflict and continue to work with the consumer only if he/she agrees to do so despite the conflict. The disclosure and subsequent approval to continue services should be confirmed in writing to avoid future misunderstandings.

Principle 5 — Maintaining personal integrity

Consumers and their family members often place benefits specialists in a position of tremendous trust and confidence. The ultimate source of such trust is the benefits specialists’ personal integrity. In deciding the proper course of action in any counseling situation, a benefits specialist must always rely on his/her own internal moral compass. While the benefits specialist is obligated to zealously pursue the interests of the consumer, this goal must be met within the bounds what is otherwise legal and ethical. The benefits specialist is not expected to pursue the consumers’ interests if SSA’s (or other government entity) laws, regulations, and policies clearly preclude what the consumer is seeking. Whenever is appears that what the consumer wants and what the benefits specialist knows is proper are in conflict, the specialist should make it clear that he/she is not willing to pursue the desired course of action. While
benefits specialists are ethically obligated to inform the consumers of actions that are potentially illegal or improper as well as the consequences of pursuing such courses, they may not ethically report confidential information to the SSA or any other agency. If a consumer insists on pursuing an improper course of action, the best for the benefits specialist to inform the consumer that he/she must discontinue services.

Planning for such issues in advance and entering into written agreements with consumers at the outset of the counseling relationship may avoid many ethical dilemmas. This agreement should spell out the consumer’s rights under the benefits specialists’ code of ethics as well as responsibilities for complying with all applicable SSA laws, regulations and policies.

From the previous discussion it is clear that a great many ethical issues come into play when providing BPA&O services. The following scenarios further illustrate the difficult nature of some of these ethical issues. Read each scenario and work in small groups to strategize on how they should best be handled to uphold the standards previously described.

Scenario 1: An SSDI recipient who has been your client for several months and is now working full time and earning more than the current SGA amount. You have been working closely with his parents and have provided lots of information and training on various work incentives. The parents realize that the consumers’ TWP is nearing an end. They ask you to assist them with claiming that the consumer is significantly subsidized in employment, even though your assessment is that the consumer works at a competitive level and is not supported by an agency. The parents explain that they really need to keep the consumer on disability benefits as he recently moved into an apartment that he would not be able to afford without the SSDI check.

Scenario 2: A dual SSDI/SSI recipient accepts a volunteer opportunity working in a church day care. After some months, the church offers to give the consumer a periodic contribution from the congregations’ collection funds to thank the consumer for all she has done to help the children and as a charitable contribution toward her living expenses. The consumer informs you of this arrangement and tells you that she has asked that the contributions be made in cash and that she does not intend to report it to the SSA, as it is not really earned income.

Scenario 3: The employer offers an SSI recipient who has been working part time for some months a full time position. The consumer is capable of maintaining full time employment but tells you that she does not want to accept a full time position because she does not want her SSI check to reduce any further.
Scenario 4: An SSI recipient who also receives HUD rent subsidy, food stamps and TANF payments with Medicaid for her two children tells you that she earns extra money by giving manicures to friends, relatives and neighbors. She has never reported this as income even though she sometimes earns as much as $300 in a month. She is fearful of reporting this income because of the combined effect on all of the cash and in-kind transfer benefits she receives.

The benefits specialist is expected to maintain professional relationships with an array of stakeholders including consumers, family members, and employees of the SSA or other agencies. It is important that the benefits specialist approach all of these relationships with the highest degree of professionalism.

It is good practice to treat all beneficiaries/recipient as any successful business would treat its customers. When meeting for scheduled appointments, make sure timeliness is observed and allow sufficient time for the meeting. If an appointment must be cancelled or changed, let the consumer know about it at as early as possible. Remember that the consumer’s time is just as valuable as your own. These practices should apply to all those you meet with, including agency personnel or SSA representatives.

Much of the benefit specialists’ work may be conducted over the telephone. A good rule of thumb is to return phone calls within one business day. It is a good practice to use your voice mail messaging system or agency receptionist to let callers know that you are out and when you will return. This information will help callers gauge when they can expect a return call. For benefits specialists with very challenging schedules, telephone appointments can be an efficient way to conduct business. It is also a good method for limiting the number of conversations with consumers who call frequently.

Despite the active use of the telephone and the increased use of e-mail, letter writing is still the primary method of conveying or confirming important information. Correspondence should be dated, appropriately formatted, signed by the sender with title indicated, and printed on agency letterhead. Always proofread correspondence before sending it to make certain that it contains no typographical or content errors. Always retain a copy of correspondence for the case record.

When using fax machines, be sure to keep a copy of the cover sheets as proof that documents were transmitted. When using e-mail, follow the same rules as for agency correspondence. E-mail culture seems to allow formality in communication, but remember: this is a method of professional communication and should be treated as such. Most e-mail messages sent and received should be printed out with a copy retained in the case record.
Finally, remember that you must work in close partnership with SSA representatives and other agency personnel to serve the best interests of beneficiaries/recipient. You will not be successful in this endeavor if you do not achieve and maintain positive professional relationships with these persons. It is essential that benefits specialists are polite when communicating with other professionals. The benefits specialist is only one player in the equation and must not try to work in isolation of all the other stakeholders. It is only by pulling together all relevant players and working together as a team that quality BPA&O services can be provided.

The first thing to do after completing this training is nothing. By that we mean that you need to go back to your state project and let the information you have just been bombarded with sink in a little bit. The next step is to start gathering the information you need on all of the relevant state benefits programs and begin to learn it. Finally, you will need to devise a professional development plan based upon the results of your self-assessment to gain mastery of the content or techniques you identified as needing improvement (see Appendix L). To remain effective, benefits specialists must engage in an ongoing process of skill upgrade. Get used to the fact that you will never “graduate.”
Section Nine

State Specifics
Section Ten

Supplemental Materials