## DEPARTMENT OF HEALTH SERVICES

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November 27, 1996

Letter No.: 96-64

TO: All County Welfare Directors All County Administrative Officers All County Medi-Cal Specialists/Liaisons

## **Reminder of County Procedures Regarding Presumptive Disability Determinations**

Ref.: Article 22, Section C-3, Medi-Cal Eligibility Procedures Manual (MEPM)

The purpose of this letter is to remind counties of the importance of establishing Presumptive Disability (PD) decisions in accordance with federal regulations as specified in Article 22, Section C-3, of the MEPM.

PD is granted to those individuals who are otherwise eligible and meet certain conditions listed in the MEPM. These conditions are clearly outlined on the "PD CATEGORIES" chart in Article 22, Section C-3, 3 of the MEPM. PD determinations are temporary pending a final disability determination by State Programs-Disability Evaluation Division (SP-DED).

PD determinations can be initiated in either of two ways:

- 1. Before sending a disability packet to SP-DED, the *county* may establish a PD when an applicant's alleged impairment **matches** one of the impairments in the "PD Categories" chart. Any alleged impairments that are not on the chart cannot be established as a PD by the counties.
- 2. At any point in the disability evaluation process, *SP-DED* can establish a PD when an applicant's medical condition and medical records indicate that there is a strong likelihood of a disability allowance. SP-DED is not limited to the impairments on the "PD Categories" chart.

If the Social Security Administration has denied the disability on the same impairment(s) during the past 12 months, a PD *cannot* be established. This can be determined through direct verification from Social Security Administration (SSA). Federal regulations specify that final SSA disability decisions are controlling and binding over a State Medi-Cal disability decision/case.



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In the calendar quarter ending June 30, 1996, SP-DED received 81 cases which were granted PD by the counties. Twenty-one cases (or 25 percent) should not have been approved as presumptively disabled. The types of errors found included the following:

- the impairment is not listed on the "PD Categories" chart;
- the impairment that the PD is based on was not written on the Disability Determination Transmittal form (MC 221);
- an SSA and/or Supplemental Security Income disability denial had been rendered within the past 12 months;
- SP-DED reversed (i.e., denied) a high number of cases upon a formal disability evaluation which the county had granted as presumptively disabled; and
- PD was granted from the month of application.\*

\*Some counties have been erroneously granting PD from the application date. However, the appropriate beginning date for a PD determination is the month in which the EW completes the PD determination on the MC 221.

## **County Action**

If a county wishes to initiate PD for an applicant, the following step-by-step guidelines must be followed:

- Ask the applicant if he/she has applied for disability through SSA, and whether a decision was rendered or is in the approval process. If "yes" to either question, the eligibility worker (EW) should investigate further (see second bullet). If he/she answers "no", then proceed to the third bullet.
- Request verification of the SSA/SSI disability application status or a copy of the SSA/SSI disability decision from the applicant or from SSA.
- Check the "PD Categories" chart carefully, keeping in mind that if the impairment does not match the list *exactly*, then **DO NOT** PD the case.
- Always obtain corroboration of the disability from the applicant's physician. (See MEPM Section 22C-3--Determining Presumptive Disability--No. 1 Background.)

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- Ensure that the MC 221 contains a statement as to why the EW initiated the PD, in other words, specify the disabling condition that prompted the PD, and include a copy of the physician's letter/note/corroboration with the DED packet. The corroborating evidence must be signed and dated by a doctor and his/her title should follow the signature.
- If the applicant has applied for SSI through SSA, it is likely that SSA has already initiated a PD and the applicant is temporarily eligible for SSI-based Medi-Cal. SSA follows the same criteria/PD categories as Medi-Cal when initiating a PD. However, please be aware that a PD by SSA is not a final disability decision and counties should not treat that decision as a final determination. Counties should continue to pend the case until SSA or SP-DED renders a formal disability determination.

Because of the high error/DED reversal rate on county-initiated PDs, the lack of online access to SSA's computer system, and the controlling nature of SSA disability decisions over Medi-Cal's, it is **IMPERATIVE** that PD decisions are made with the utmost care and attention.

If there is a medical emergency, the counties are still able to initiate an "Urgent Case" process which is specified in Article 22, Section C-3, 2C of the MEPM, to expedite the disability determination. The "Urgent Case" procedure can be used for any type of impairment and should not be confused with the PD process.

If there are any questions, please contact Helen Cahueque of my staff at (916) 255-0955 or (916) 657-1527.

This ACWDL will be followed by procedures.

Sincerely,

ORIGINAL SIGNED BY

FRANK S. MARTUCCI, CHIEF Medi-Cal Eligibility Branch