

APPENDIX A

PRESUMPTIVE APPROVAL - SSI-RELATED MEDICAID **AND M-WIN**, AGE 18 OR **OLDER**

DISABILITY OF THE SKELETAL SYSTEM AND MUSCLES

The severity is determined by a physical examination, laboratory tests and x-rays.

- Rheumatoid arthritis with a history of joint pain, swelling of major joints, and limitation of motion of joints.
- Severe osteo or degenerative arthritis resulting in limitation of motion of both hips or both knees, or a combination of one hip or one knee. Severity results in difficulty in ambulation and may necessitate surgery (arthrodesis) of the hip and knee.
- Injuries to the spine with cord involvement, resulting in paraplegia or quadriplegia.
- Amputation of two limbs, amputation of a leg at the hip, or amputations due to vascular insufficiency or diabetes mellitus, with inability to use a prosthesis effectively.
- Non-union of a fracture of a major extremity, requiring continuing surgical management, with function not expected to be restored fully.
- Osteomyelitis of a major joint, as confirmed by x-ray, with persistent drainage, swelling and redness that has not responded to medical treatment.
- **Cerebral palsy, muscular dystrophy, or muscular atrophy and marked difficulty in walking (e.g. use of braces), speaking or coordination of the hands or arms.**

DISEASES OF THE RESPIRATORY SYSTEM

These are confirmed by x-ray spirometry or pulmonary function studies, in addition to physical examination.

- Active pulmonary tuberculosis, verified by a positive culture and x-ray, which is expected to result in at least a 12-month disability
- Severe chronic obstructive **pulmonary** disease (C.O.P.D.), or pneumoconiosis.
- Cor Pulmonale, enlargement of the right ventricle of the heart due to respiratory disease, in combination with congestive heart failure

DISEASES OF THE HEART

This will be established through physical examination, x-ray, EKG, treadmill tests, and other appropriate tests for cardiac function.

- Congestive heart failure with cardiac enlargement, vascular congestion or pulmonary edema,
- Angina pectoris, confirmed by abnormal resting EKG, with chest pain relieved by nitroglycerin,
- Persistent heart block with recurrent arrhythmia as confirmed by abnormal EKG's,
- Two myocardial infarctions within a 6-month period, necessitating use of nitroglycerin to relieve chest pain,

KIDNEY DISEASE

This is based on laboratory findings and a urological examination.

- Kidney disease, resulting in the need for removal of one kidney, and treatment of disease in the remaining kidney.
- Kidney disease requiring the need for a dialysis machine or renal transplant.

DISEASES OF THE BLOOD

This is confirmed by laboratory findings and physical examination.

- Acute leukemia, as established by bone marrow examination or blood smear.
- Chronic leukemia with recurrent hemorrhaging, low blood platelet count or organ enlargement.
- **Human Immunodeficiency Virus (HIV) infection with T-cell count under 400.**

NEUROLOGICAL DISORDERS

This must be confirmed by physical examination, preferably by a neurologist, with appropriate testing.

- Cerebrovascular accidents, with speech impairment or paralysis of two extremities, continuing for a period of four (4) months after the stroke
- Parkinson's Disease with tremor, rigidity and impairment of mobility
- Cerebral Palsy with I.Q. of 59 or less, with speech impairment, motor deficiency in two extremities, or poor muscular coordination (ataxia)
- Multiple Sclerosis with moderate motor deficits in two extremities or poor muscular coordination (ataxia)
- Muscular Dystrophy with an incoordinate weakness or paralysis of shoulder area and limitation of arm motion

MENTAL DISORDERS

These must be verified by psychological testing or psychiatric examination.

- Chronic brain syndrome with a deterioration in intellectual functioning, such as marked memory defect or slow, confused or disoriented thinking
- Chronic Schizophrenia with persistent depression, hallucinations, withdrawal from daily activities or illogical association of ideas
- Mental deficiency with I.Q. of 59 or less, as established by psychological testing. If the I.Q. is above 59, there must be a combination of low I.Q. and another documented mental or physical impairment.

MALIGNANT DISEASES

These must be documented by physical examination, laboratory findings and post-operative notes, if available.

- Cancer of any organ of the body that has been diagnosed by a physician as being inoperable and not expected to respond to radiation or chemotherapy

- Cancer that has spread from one organ of the body to another (metastasis), such as cancer of the lung which has spread to the brain.
- Recurrence of cancer after the initial successful treatment, with a medical opinion that the second treatment period will require at least twelve months.

ACQUIRED IMMUNODEFICIENCY SYNDROME (AIDS)

This must be documented by a physical examination and laboratory findings.

HIV Positive and diagnosed by a physician as having AIDS based on the patient's having a disease indicative of AIDS or a T-helper/inducer lymphocyte (T-cell) count under 400.

Some common indicator diseases are: pneumocystis carinii, kaposi's sarcoma, bacterial infections, HIV encephalopathy, lymphoma of the brain.