

**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 **CD4** 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 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 **CD4**) count under 400.

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