Determining Disability, Incapacity and Blindness

- Each form is prepared in duplicate. One copy is filed in the case record.
- The date, name and address of the medical provider to whom the authorization is issued must be entered.
- The Worker must also include the address of the county office.
- Refer to item e. below for the number to enter as the case number.

e. Numbers Used on Medical Request Forms

The forms used for requesting medical examinations and reports are self-explanatory. For auditing and federal reimbursement reasons, the MA ID number or the Pending Medicaid Number must be used for any medical information requested. The following explains the numbers and when each is used.

(1) Pending Medicaid Number

The number is 80 followed by 7 zeros and the county number. For example, the Pending Medicaid Number for Kanawha County is 80-0000000.20. This number is used for an individual who is not a Medicaid recipient at the time the information is requested. This includes individuals who previously received Medicaid, but are not current recipients.

(2) MA ID Number

This is the number assigned by RAPIDS for Medicaid billing. This number is used when medical information is requested for a current Medicaid recipient only.

The local office must keep a log of all requests issued.

The log must contain the following information:

- MA ID number or Pending Medicaid Number and the county number
- Case name
- Patient's name

Determining Disability, Incapacity and Blindness

- Date of the request
- Name of the provider to whom the request was sent

2. Obtaining Initial Medical Reports

The following forms and instructions are used by the Worker to obtain initial medical reports.

NOTE: Medical reports must be requested within 7 days after the date of application. In addition, follow-ups must be done every 30 days, when the medical reports are not received.

a. **DFA-PHI-7**: Authorization for Information

When the instructions in the following sections specify that form **DFA-PHI-7** is included with a request for medical information, the date entered on the form must be no earlier than one month prior to the date it is mailed. The name of the provider must be placed on the form prior to the client's signature.

b. Physician's or Psychiatrist's Summaries

Form DFA-RT-8 and DFA-RT-8a are sent to request information from physicians and forms DFA-RT-15 and DFA-RT-15a to request information from psychiatrists/psychologists. If the physician or mental health professional fails to complete the form, a second one must be sent. The date the second one is sent must be noted on the DFA-RT-2.

The Worker must indicate which sections of the form are completed by the physician.

c. Initial Medical Report - Blindness

When an application is made for Medicaid due to incapacity or disability based on blindness, the Worker:

- Determines the ophthalmologist or optometrist of the client's choice who is an approved Medicaid provider.
- Makes an appointment with the ophthalmologist or optometrist and notifies the client in writing of the date and time.

- Completes form DFA-RT-6 in duplicate with "Eye Examination and Report on the Enclosed Form" checked. The original is sent to the optometrist or ophthalmologist, and a copy is filed in the case record.
- If the appointment is with an optometrist (OD), form DFA-B-14 is enclosed with the DFA-RT-6. Form DFA-B-14 is a report form for the optometrist.
- If the appointment is with an ophthalmologist (MD), form DFA-B-13 is enclosed with the DFA-RT-6. The DFA-B-13 is a report form for the ophthalmologist.
- d. Initial Medical Report, Incapacity and Disability

Sources of initial medical reports are listed in order of priority. The exception is that, under some circumstances, when incapacity or disability is being established, medical reports are first requested from SSA. See Section 12.5,B. If SSA reports are not available, the Worker then obtains the reports as found below.

- (1) Medical Information Available in the Case Record
 - (a) Medical reports from Children With Special Health Care Needs Program and the PAS-2005, Patient Medical Evaluation

In the following situations, the only initial medical reports needed are those available in the case record:

- The applicant is currently receiving services from the Children With Special Health Care Needs Program. In this case, copies of these medical reports are submitted to MRT.
- The applicant is residing in, or planning to enter, a nursing home.

In both of the above situations, no other medical information is needed unless requested by MRT.

(b) Other Medical Information

The case record is examined to determine if there are any past medical and/or psychological reports. If so,

all information which relates to the applicant's current impairment is submitted to MRT along with current medical report(s).

(2) Medical/Psychological Reports from the Division of Rehabilitative Services (DRS)

When the applicant is referred to the Department by DRS, or reports that he is receiving DRS services, copies of the DRS medical reports must be obtained.

Under terms of the agreement between DRS and the Department, DRS is expected to provide all available medical information when DRS refers the client to the Department.

Copies of medical reports are to be attached to the HS-3 used for the referral.

If medical reports are not attached to the HS-3, or if the client is not referred by DRS, but reports that he is receiving services from them, the Worker must ask DRS to forward available medical reports. The medical reports from DRS will usually eliminate the need for any other initial medical information and may include copies of specialist's consultations, psychological evaluations, etc.

(3) Reports from Hospitals and Physicians

If the applicant has recently received medical treatment, or is currently receiving medical care, it may be possible to obtain copies of medical reports from the hospital or physician.

All requests are sent with form **DFA-PHI-7**, Authorization for Information, signed by the applicant. If the application is made for a child, the person who made the application signs the child's name and his own and indicates his relationship to the child.

(a) Mental and Tubercular Hospitals

If the client has recently been discharged from a mental or tubercular hospital, the Worker must request a report about the individual's condition at the time of release. The request is made as follows: