

12.11 ACTION FOLLOWING RECEIPT OF THE FINAL MRT DECISION

Upon receipt of the notification of MRT's final decision, the Worker records receipt of the form and the decision in eRAPIDS. Additional action depends on the content of the information on the notification form.

A. SSI-RELATED MEDICAID AND M-WIN

1. Client Is Blind Or Disabled

If the applicant was found to be disabled or blind and the case was not presumptively approved, the application is approved, or the individual is added to the AG, whichever is appropriate.

If the case was presumptively approved, or the individual was already added, a recording of the final decision must be made in eRAPIDS.

2. Client Is Not Blind Or Disabled

If the applicant is found not to be disabled or blind, the application is denied, the case closed or the individual is excluded from the AG after advance notice.

A copy of the ES-RT-3 and/or DFA-RT-3M must be attached to the notification letter sent to the client.

B. WV WORKS

1. Parent Is Incapacitated

If the ES-RT-3 and/or DFA-RT-3M indicates the parent is incapacitated, and the case was not presumptively approved, the application is approved.

If the case was presumptively approved, a recording of the final decision is made in eRAPIDS.

2. Parent Is Not Incapacitated

If the ES-RT-3 and/or DFA-RT-3M indicates the parent is not incapacitated, eligibility for other Medicaid is evaluated.

Determining Disability, Incapacity and Blindness

A copy of the ES-RT-3 and/or DFA-RT-3M is attached to the client notification letter.

3. WV WORKS

a. Individual Is Incapacitated

If the ES-RT-3 and/or DFA-RT-3M indicates the individual is incapacitated, the individual is temporarily given good cause for not participating in work activities for the period of time determined by MRT, not to exceed 12 months. A re-evaluation must be completed at the end of the good cause period or by the end of the 12th month, whichever is earlier.

NOTE: Even though MRT was involved in the determination of incapacity, the Worker and/or Supervisor may make the determination at the subsequent re-evaluation(s). However, once a MRT decision is made, it cannot be overridden by the Worker and/or Supervisor until the MRT good cause period expires or additional medical information is received. When the Worker and/or Supervisor make the decision upon re-evaluation, MRT must be notified by memorandum.

b. Individual Is Not Incapacitated

If the ES-RT-3 and/or DFA-RT-3M indicates the individual is not incapacitated, the individual is not given good cause for not participating in work activities. The client must be contacted immediately to begin participation.

A copy of the ES-RT-3 and/or DFA-RT-3M is attached to the client notification letter.

C. ACTION WHEN MRT DECISION CONFLICTS WITH THE SSA DECISION

When a MRT disability or blindness decision conflicts with the decision made by SSA, the following procedures apply:

- SSI-Related Medicaid And M-WIN

Procedures outlined in 12.7 are followed.

D. ACTION WHEN THE WORKER AND SUPERVISOR DISAGREE WITH MRT'S DECISION TO DENY

If the Worker and Supervisor disagree with MRT's decision to deny incapacity, disability or blindness, the case is submitted to MRT for reconsideration. An explanation of why the Worker and Supervisor disagree with the denial is entered on the DFA-RT-2.