

Department of Social and Health Services  
Olympia, Washington

## **ELIGIBILITY A-Z MANUAL REVISION**

Revision # 643  
Category / Medical RE-DETERMINATION  
Issued **October 1, 2008**  
Revision Author: Melissa Mathson  
Division CSD  
Mail Stop 45470  
Phone (360) 725-4563  
Email [mathsmc@dshs.wa.gov](mailto:mathsmc@dshs.wa.gov)

### **Summary**

Clarifying information and suggested letter text regarding GA-X recipients whose SSI denial was upheld at hearing and did provide proof of an appeal with SSA.

<http://www.dshs.wa.gov/manuals/eaz/sections/MedicalRedetermination.shtml>

### **EX-PARTE REVIEW FOR ELIGIBILITY**

For all others, search ACES, DMS and EJAS for evidence of a claim of disability or pregnancy.

**GA-X recipients, whose SSI denial is upheld at hearing and who did not provide proof of an appeal, are not eligible for disability medical. Review for claim of pregnancy but do not refer for a disability determination,**

**If the final SSI determination is unfavorable or the client fails to follow through with appeals process: review for claim of pregnancy but do not refer for disability determination.**

If nothing is found in the electronic record, SOLQ, the DMS system, or EJAS, the termination can proceed and the re-determination is considered complete. This is called an “ex-parte” review.

Conditional text on the termination letter tells the client that we have looked at all other programs.

**Document the process and the action taken in the ACES Narrative. Remember, if the re-determination process is not documented, we cannot prove that we re-determined medical and the case will be found in error even when we have taken the correct action.**

LETTERS

Automatic Eligibility:

Allow system generated approval letter 002/10 or 002/12. No additional text is required; however some informational text may reduce questions.

The child listed above is entitled to continued medical through the month that they turn 1 year of age.

The child(ren) listed above are entitled to the remaining months of a 12 month continued medical eligibility period.

The person listed above is pregnant and is entitled to continued medical through the 60 day post-partum period.

The person listed above is eligible for continued medical. They are related to SSI because of age or a disability.

Ex-parte of Record for evidence of disability:

No disability claim in record; Allow system to terminate. Letter 006-01 has a text block stating that we have looked at all other programs. If other members of the terminated AU are being approved for medical, add free form text

Other members of your household will get a separate letter about their continuing medical benefits.

Record shows SSA disability application in process: System will generate the 006/01 termination letter. Add free form text. Suggested text:

You can no longer get medical benefits under the (TANF, Family Related; General Assistance) program. However your record shows that you have applied to Social Security(SSA) for disability benefits. Your medical coverage is being continued while SSA decides if you can receive disability payments. Please let us know as soon as SSA tells you their decision.

The system will generate letter 002/12 approval for medical letter when the S02 program is finalized. Suppress this notice as the continued medical is addressed as free form text on the termination letter.

If processing an S08 case, follow office procedures. The approval letter explaining the program and stating the premium amount must be sent to the client.

Record shows claim of disability, but no evidence: System will generate the 006/01 termination letter. Add free form text. Suggested text:

*You can no longer get medical benefits under the (TANF, Family Related; General Assistance) program. Your record shows you claim to have a disability that prevents you from working, but we do not have any medical information in our records to support that claim. Please bring in all medical documents you have about your disability so that we can determine whether you can get medical benefits due to a disability. Please respond within 15 days. If we do not hear from you, we will not look at the disability medical program; we will not continue your medical benefits.*

The system will generate letter 002/12 approval for medical letter when the S02 program is finalized. Suppress this notice as the continued medical is addressed as free form text on the termination letter.

If no response to above letter: Generate another 006/01; add free form text. Suggested text:

*We asked for medical information so we could see if you can get disability medical benefits. We have not heard from you. If you are disabled, you may apply for disability benefits through the Social Security Administration (SSA) or apply for disability medical benefits from any of our offices.*

If client does respond with medical evidence, follow office procedures for a DDDS referral. Screen and finalize SSI related S02/S95/S99. Add free form text to letter 002/12. Suggested text:

*Your disability claim has been referred to the Division of Disability Determination Services (DDDS). If more medical evidence is needed to make the determination, they will contact you. Your medical coverage will continue while this decision is being made.*

**If a GA-X client's SSI denial was upheld by an Administrative Law Judge and the client has not filed an appeal with the SSA Appeals Council. Generate 006/01; add free form text. Suggested text:**

*An Administrative Law Judge has upheld your SSI denial and you did not provide proof that you filed a timely appeal. You are no eligible for SSI related medical benefits from the GA-X program.*

If the client's income places them into a pending spend-down add freeform text to the spend-down letter. Suggested text:

*Your disability claim has been referred to the Division of Disability Determination Services (DDDS) to decide if you can receive medical based on a disability. We told you that your medical would continue while DDDS makes the disability decision. However, your (income/resources) puts you above the Categorically Needy (income/resource) limit. You must incur the stated amount in medical expenses before medical coverage can begin.*

SSI termination/no response to review request:

Add free form text to Letter 006-01; Suggested text:

*Your SSI medical coverage has ended and we asked for a review so we could look at other medical programs for you. You did not return the review and we could not establish eligibility for any other medical program.*