

6.6 Disabilities (physical, mental & learning disabilities)

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(some time-limited core)

Legal References:

- [RCW 74.08A.250](#)

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6.6.1 What are medical conditions?

This section includes information about medical conditions (physical, mental, emotional disorders or learning disabilities) that can interfere with a participant's ability to work, prepare for work or look for work. Substance abuse/chemical dependency, which can also interfere with participation, is covered in the following section of the handbook, Substance Abuse [6.7](#).

- A physical disorder (XM) often affects a participant's ability to perform physical tasks in a normal day-to-day setting. For example, a participant might not be able to see, hear, move freely or lift weight. The impact of a physical disorder can often be mitigated by use of adaptive accommodation such as a ramp for a participant who uses a wheelchair.
- Mental and ~~emotional~~ behavioral disorders (XG) can affect a participant's ability to think clearly or respond appropriately in a work setting. For example, the participant may seem mentally preoccupied, have trouble following directions or have difficulty in getting along with others in the workplace.
- A learning disability (XJ) is a neurological condition that impedes a participant's ability to receive, store, process or express information. It can affect one's ability to read, write, communicate, or compute math.

6.6.2 Guiding Principles

~~We cannot~~ approval of deferrals or exemptions can only occur without medical evidence that documents what the participant can and cannot do.

Our goal is to promote consistent decisions, increased participation and better outcomes for WorkFirst participants with physical, mental or emotional conditions.

Use these guiding principles when you learn to support participants with a medical conditions:

- Make decisions based on the medical information provided by the participant.
- WorkFirst helps participants define and manage limitations and build on strengths.
- Disability and WorkFirst staff work together to get the best participant outcomes.
- Mitigate limitations and make participation as supportive full-time as possible, ~~as soon as possible~~.
- Encourage and help participants with chronic and severe disabilities make long-term plans (such as accessing SSI, Social Security Disability or DVR).

6.6.3 Basic Process

As shown in the [Medical Evidence Evaluation Basic Flow Chart](#), WorkFirst ~~staff will~~ use a consistent process to respond when ~~we become aware that~~ a participant shares they may have a physical disorder (XM), a mental or emotional-behavioral disorder (XG) or a learning disability (XJ). Throughout the process, ~~we the participant can receive accommodate accommodations limitations and require the participant to support activity engagement. participate as before moving to full-time as possible participation.~~

~~WorkFirst staff~~ Start by obtaining medical evidence ~~so we know what to determine what~~ the participant can and cannot do. ~~Get the~~ Obtaining the medical evidence is the first step even if ~~you know~~ the participant has applied for SSI on his or her their own. ~~We need the e~~ Evidence is needed to determine whether the participant qualifies for a WorkFirst deferral or exemption, and to assist with participation planning, including whether ~~we will they need will receive a referral for SSI facilitate facilitation the participant's SSI application.~~

~~Once the evidence is in, triage the case with a social service specialist as needed, and assign the case as follows~~ WorkFirst staff will review the medical evidence to determine the next steps:

- ~~The WFPS Case Manager handles the case when a physical, mental or emotional behavioral health condition (XM or XG) is expected to last 3 months or less shared by the participant.~~
- ~~As conditions get longer term or more complex, social service specialists may handle the case to make decisions and establish~~ The Case Manager develops the IRP requirements with the participant with consideration of ~~to~~ needed accommodations or limitations to participant requirements.

- Participants with short term physical, mental or behavioral health conditions will have IRPs that address the short-term barriers before moving to work related activities.
- Participants with severe and chronic medical conditions ~~are~~will be assessed for SSI and, if they want to work ~~or be retrained, we~~may be referred ~~to~~be referred to DVR for services.
- The ~~SSI Facilitator~~SSIF helps viable candidates apply for SSI and monitors their progress.

6.6.4 How do I get medical evidence?

When the participant reports, or appears to have, a medical, mental or ~~behavioral~~emotional condition that interferes with their ability to participate, ~~again~~WorkFirst staff work with participants to obtain medical evidence to determine what the ~~participant~~ty can and cannot do. Types of providers you may use are found in [WAC 388-310-0350](#).

~~WorkFirst sStaff o~~Obtain the following information from the participant up front, ~~in order to~~so we ~~can~~ follow up as needed:

- A signed consent form, DSHS [14-012](#), so ~~we can share~~information can be shared, including any accommodations the participant needs to support activity engagement participate.
- For conditions reported to last less than 3 months, a [DSHS 10-353](#) form or alternative type of medical information documenting what the participant can and cannot do.
- For conditions expected to last 3 months or longer, a [DSHS 10-353](#) form (when needed) **and chart notes** to determine what the participant can and cannot do with their impairments. However, ~~WorkFirst staff~~we must accept ~~an~~alternative types of evidence, as described in the IRP, if that is what the participant turns in.
- When the participant reports and verifies a disability that appears to be severe and chronic, gather objective medical evidence, as needed, which is described in [WAC 388-449-0015](#).
- An IRP requiring the participant to obtain medical evidence.

Note: If staff don't have access to Barcode, they may use a hard copy of the [DSHS 14-050](#), Statement of Health, Education and Employment form, in case the medical evidence shows the participant may be a viable SSI candidate.

~~We may augment this medical evidence later if it appears the participant may qualify for SSI.~~

6.6.5 How do I complete the medical evidence IRP?

~~WorkFirst staff c~~Complete the IRP using the OR eJAS component code requiring the participant to obtain medical evidence within 30 days ~~and o~~Offers to help the participant obtain the evidence as needed. ~~S~~Get supervisory approval must be obtained before ~~you give~~the participant may be given more than 30 days to obtain medical evidence.

If needed, ~~time can be you can~~ extended ~~ed the time~~ in 30-day increments with supervisory approval, if ~~the following is done: you also do the following:~~

- Document why more time is needed in eJAS notes.
- ~~Offer to assist~~ See if you can help the participant ~~to~~ get evidence sooner.
- ~~Consider referring the participant to a social service specialist for help in obtaining evidence.~~

The **OR** IRP template requires the participant to provide the DSHS 10-353 form or alternative medical evidence that provides the:

- Diagnosis,
- How long their medical condition is expected to last,
- Specific limitations stemming from their medical condition,
- Treatment plans, and
- The number of hours per week the participant can work, look for work, or prepare for work.

The **OR** IRP template also requires chart notes for the current medical condition unless the condition is expected to last for 3 months or less.

6.6.6 How do I pay for medical evidence?

~~We may use~~ WorkFirst support services ~~are available~~ to pay for medical evidence when existing medical evidence is ~~insufficientinsufficient~~, and the participant would incur a cost to obtain the necessary examinations or testing.

~~We~~ ~~WorkFirst staff~~ may purchase exams or testing to:

- Determine if a participant's impairments are appropriate for an SSI referral; or
- Support a SSI application when:
 - Recommended by the contracted ~~doctor~~ physician, or
 - Following an SSI denial if it was overlooked and appears necessary to establish SSI eligibility.

Note: If the participant has worked with a psychologist or psychiatrist, ~~we may be able to get~~ sufficient information for an SSI referral ~~may be available~~ from existing chart notes.

Do not use WorkFirst support services to purchase medical evidence when:

- Exams or testing can be paid by Washington Apple Health or are available from free clinics.

- DDS or DVR is expected to purchase the exams or testing as part of their eligibility determination process.

Washington Apple Health should normally cover the cost of the medical exam and form completion. However, the medical professional may charge for copies of the participant's chart notes. It may be appropriate to pay for missed doctor appointments when [our staff](#) set up the appointment for the participant and the participant was not able to give the doctor a 24-hour cancellation notice.

See categories 34 (testing/diagnostic) and 37 (medical exams/services) in the [WorkFirst Support Services Directory](#) for the types of medical exams and services ~~we that~~ can [be](#) purchased ~~d~~-using support services.

6.6.7 How do I evaluate evidence and establish participation requirements?

[WorkFirst staff](#) ~~r~~Reviews the DSHS 10-353, WorkFirst Documentation Request for Medical/Disability Condition and any chart notes. If the participant provides alternative medical evidence, contact the doctor as needed to obtain the key information below.

1. Determine if there are any conditions listed that limit the participant's ability to work, prepare for work or look for work. If not, do an [n full-time](#) IRP as described on the [medical participation requirements chart](#).
 2. Complete or update the participant's EA screening as needed and determine if there are countable activities where ~~accommodations may be needed. we can avoid or accommodate the limitations. If so, d~~document the condition, provide needed ~~accommodations~~[accommodations](#), and do an [n full-time](#) IRP with appropriate activities.
 - ~~3.—Refer complex and longer term cases to a social service specialist, using the RR eJAS referral code until the participant has a deferral or exemption.~~
- Determine the participant's hourly participation capacity based on the medical evidence and set participation requirements as shown on the [medical participation requirements chart](#).
 - ~~5.—See [WorkFirst Handbook 6.8](#), Exemptions, if the medical evidence shows the participant's medical condition is chronic (will last 12 months or more) and severe (they can participate 10 hours or less per week).—), ~~We will~~[WorkFirst staff](#) ~~will~~ need to decide whether to refer the participant to SSI and the participant may qualify for a WorkFirst exemption or long-term deferral.~~
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 - If the participant has filed an SSI application on their own, but does NOT have a chronic and severe condition, let the SSIF know so they can track the SSI application. However, ~~do we will~~ not get additional medical evidence or provide formal SSI facilitation.

- Some ~~participant's~~participants may have a DVR Plan. If so, coordinate their IRP with their DVR Plan. (See [Social Services Manual](#) and [Reporting DVR Plan Hours](#).)
- Share information about any accommodations the participant needs to participate with the WorkFirst partner or contractor [upon referral for services and activity engagement.](#) ~~when you refer the participant to them for activities.~~ This is allowable with the signed [DSHS 14-012](#) Consent form.
- Establish the deferral or exemption end date based on the participant's medical evidence, not to exceed 12 months.
- Review the case when the deferral or exemption expires to determine whether the participant may require another deferral or exemption. If so, **obtain new medical evidence** following the process above and update the EA Plan as needed.

6.6.8 eJAS codes

Depending upon the participant's situation, use these eJAS codes:

- **OR** (obtaining medical evidence) - used on the IRP to require medical evidence.
- **RR** (review medical evidence) - used when a participant is referred to a ~~social-service specialist~~Case Manager ~~for for a~~ IRP and SSI decisions. The code is kept in place until the exemption or IRP is done.
- **XM** (temporary physical incapacity, medical treatment)
- **XJ** (learning disability services)
- **XG** (mental/behavioral health services or treatment)

6.6.9 ~~6.6.9~~ Disabilities - Step-by-step guide

WorkFirst Staff:

1. ~~The WFPS or WFSSU~~WorkFirst staff uses an IRP with the OR eJAS component code to request medical evidence (the [DSHS 10-353](#) and chart notes or an alternative type of evidence listing diagnosis, duration, specific limitations, treatment plans and the number of hours per week the participant can work, look for work or prepare for work). Also obtain a signed [DSHS 14-012](#) and the [DSHS 14-050](#) .
2. Completes an EA screening or plan update to determine accommodations the participant needs to access services and/or participate.

~~The WFPS/WFSSU~~WorkFirst staff, based on the medical evidence and EA screening, determines:

- Whether limitations we can be mitigated or accommodated, limitations and whether the participant can participate full-time.

- Whether to refer to ~~a social service specialist~~ the Case Manager with the RR eJAS component code for case management or a possible SSI referral.
- Participation requirements- (See the [medical participation requirements chart](#) for more details-).
 - Opens the appropriate “X” eJAS component codes based on the duration of the disability, but not to exceed 12 months, and [adds appropriate component codes eJAS codes](#) for other required activities.
 - Updates the IRP and provides needed support services.

If the participant is suspected of having a learning disability-LD, the participant is referred to participant to their WFSSS Case Manager who uses the eJAS Learning Nneeds Screening to:

- [Uses all available information, participant observation, and Learning Needs note type in eJAS to D](#)determine if a learning disability-LD may be the primary barrier to employment, [using all available information, observation, and Learning Needs note type in eJAS](#); and,
- If [a Learning Disability appears to exist](#)so, [contacts](#) the local Learning Disabilities Association of Washington, local community college or other learning disability-LD provider to determine if it would be appropriate to refer the participant for further evaluation and additional services. Enter **RO** when making a referral for learning disability-LD services. Enter **XJ** if the participant is [participating-engaged](#) in learning disability-LD treatment.