Revision # 102

CATEGORY: MEDICAL EVIDENCE REIMBURSEMENTS

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Summary: Clarified the effects of an SSI/SSDI denial on an individual's eligibility for Aged, Blind, or Disabled (ABD) cash assistance and Medical Care Services (MCS).

SSI FACILITATION - SSA DETERMINATIONS AND APPEALS

Revised March 13, 2012

Purpose: This section contains information regarding actions that are necessary when a Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI) determination is made by the Social Security Administration (SSA).

WAC 388-449-0150 When does my eligibility for the Aged, Blind, or Disabled (ABD) cash benefits end?

SSI/SSDI Approvals

- 1. When disability is approved at the Initial or Reconsideration level, the Department of Disability Determination Services (DDS) notifies the Social Security Administration District Office (SSADO).
- 2. The Disability Quality Branch (DQB) reviews a percentage of DDS approvals and denials for quality assurance and has the authority to overturn DDS decisions.

- 3. Approvals by an Administrative Law Judge (ALJ) at the Hearing level or the SSI Appeals Counsel at the Post-Appeal level are binding and are not reviewed by the DQB.
- 4. The SSADO conducts a financial eligibility review before final approval of SSI benefits.
 - a. The eligibility review usually involves a mandatory interview with the applicant.
 - b. SSI Facilitators may need to assist with the SSA financial review process process.
 - c. The applicant cannot enter SSI/SSDI pay status until the financial review is completed.
 - d. Terminate ABD cash assistance if the client fails to complete the mandatory SSA financial eligibility review.
- 5. SSA sends the client written notice of SSI/SSDI once the financial eligibility review is completed.
- 6. SSA also sends notice of approval to Office of Financial Recovery (OFR) along with the interim assistance reimbursement amount to which the Department is entitled.

NOTE:

Contact OFR at 1-800-562-6114 if an individual receives the entire retroactive SSI payment. OFR will attempt to obtain any interim assistance reimbursement to which the Department is entitled.

WAC 388-449-0150

WAC 388-449-0150 When does my eligibility for the Aged, Blind, or Disabled (ABD) cash benefits end?

- 1. The maximum period of eligibility for ABD cash is twenty four months before we must review additional medical evidence. If you remain on ABD cash at the end of the twenty-four month period, we determine your eligibility using current medical evidence.
- 2. If your application for SSI is denied:
 - a. We review your eligibility for the ABD cash program;
 - b. We stop your benefits if you do not provide proof you have filed an appeal with SSA within sixty days of a SSI denial for not being disabled.

3. We stop your benefits after the final decision on your application for SSI/SSA benefits or if you fail to follow through with any part of the SSI/SSA application or appeals process.

This is a reprint of the official rule as published by the Office of the Code Reviser. If there are previous versions of this rule, they can be found using the Legislative Search page.

Review of ABD Cash Assistance Following SSI/SSDI Denial

- 1. Eligibility for ABD cash assistance ends when a final disability determination is made at the SSI Post-Appeal level, **or** when an unfavorable disability determination is made at the Initial, Reconsideration, or Hearing level and the person fails to file a timely appeal.
- 2. ABD cash assistance may also end following an SSI/SSDI denial when:
 - a. The client no longer meets ABD income and resource requirements; or
 - b. The client no longer meets ABD disability criteria.
- 3. When SSA denies an application at the Initial, Reconsideration, or Hearing level, the SSI Facilitator reviews the SSA determination and all available medical evidence.
 - a. If SSA denied the application due to income or resource issues, the SSI Facilitator notifies financial regarding the denial and financial reviews the case to determine if the client continues to meet ABD income and resource requirements.
 - b. If the client no longer appears to meet ABD disability criteria, the SSI Facilitator or Disability Specialist requests current medical evidence and initiates an early ABD Disability Review.
 - c. If the client appears likely to meet ABD disability criteria, the SSI Facilitator determines an early ABD Disability Review is not necessary and continues with the SSI Facilitation process.

NOTE:

The Department may initiate an early Disability Review at any time, if new information is received indicating the individual may no longer meet ABD Disability Criteria.

- 4. Terminate cash assistance and facilitation services when the person no longer meets ABD cash program financial or disability criteria per WAC <u>388-440-0060</u> and WAC <u>388-449-0001</u>.
- 5. Authorize MCS medical only if the ABD termination is based on an SSA disability denial at the Initial, Reconsideration, Hearing, or final determination at the Post-Appeal level and the client meets incapacity criteria defined in WAC 182-508-0010 and 182-508-0120.
- 6. Do not authorize MCS if the ABD termination is based on an SSA denial for failing to follow through with the SSI application process (e.g. failing to provide information requested by SSA, failing to attend a required SSA interview, or failing to attend a Consultative Examination appointment).

NOTE:

Effective July 28, 2011, SSA will no longer process new SSI or SSDI applications when there is a pending claim under the same title at any stage of the application of appeal process (e.g. Initial, Reconsideration, Hearing, or Post-Appeal).

Appealing SSI/SSDI Denials

- 1. DSHS requires clients to appeal SSI/SSDI denials through the Post-Appeal stage as a condition of eligibility for ABD cash assistance.
- 2. An ABD recipient cannot choose to withdraw an active appeal in order to file a new claim without losing cash assistance, including instances when withdrawal is recommended by their legal representative.

Filing Request for Reconsideration

Reconsideration is the first level of appeal when an SSI/SSDI application is denied.

- 1. Always request Reconsideration when an ABD recipient's SSI/SSDI application is denied, including instances when an early ABD Disability Review is initiated.
- A Reconsideration Request must be in filed within 60 Calendar days or the SSA denial unless there
 is good cause for the missed deadline. Only SSA can determine whether there is good cause for a
 missed appeal deadline.
- 3. Ensure the <u>SSA-561-U2</u>, Request for Reconsideration, is filed within 60 calendar days of the SSI denial, along with a signed and dated SSA-827 and any new medical evidence.

Filing a Hearing Request

The Hearing is the second level of appeal when an SSI/SSDI application is denied.

- 1. Recommend that the client contact a legal representative.
 - a. CSO staff should not recommend a specific attorney.
 - b. When SSI/SSDI is approved, the ALJ may award up to 25% of the client's retroactive lump sum payment or \$4000 (whichever is less) to the legal representative.

- c. Legal representatives may also charge for expenses incurred while representing the client.
- 2. If the client obtains legal representation, the attorney will file a Hearing request along with the SSA-1696-UH, Appointment of Representative form.
- 3. When a client does not choose to obtain a legal representative or the client is in danger of missing the appeal deadline, the SSI Facilitator assists the person with filing the written Hearing request.
- 4. The SSI Facilitator does not attend or act as a legal representative at the SSI Hearing.

A person has the right to select an attorney, friend, or other individual to represent them. They also have the right to decline assistance and represent themselves at the SSI Hearing.

- 5. A written Hearing request must be filed within 60 calendar days of the SSI/SSDI Reconsideration denial and must include:
 - a. The <u>HA-501-U5</u>, Request for Hearing by Administrative Law Judge;
 - b. A signed and dated SSA-827; and
 - c. Any new medical evidence.

Post-Appeal

- 1. When an SSA denial is upheld by an ALJ, eligibility for ABD cash assistance ends unless the individual provides proof an SSI/SSDI Post-Appeal has been filed with the Appeals Council.
- 2. If the client has a legal representative, the representative may file the request for an Appeals Council review.
- If the client does not have a legal representative or the legal representative chooses not to request Appeals Council review, the SSI Facilitator may assist the client with filing the written Post-Appeal request.
- 4. The Post-Appeal request must include an HA-502-U5, Request for Review of Hearing Decision/Order, a signed and dated SSA-827, and any new medical evidence.
- 5. Terminate ABD cash if the client does not file the Post-Appeal request within 60 calendar days of the SSI/SSDI Hearing denial.

Death of a Client

- 1. Pursue the SSI application when an ABD recipient dies and SSA has a signed:
 - a. Initial application; and

- b. DSHS 18-235, Interim Assistance Reimbursement Authorization (IARA).
- 2. Send written notice of death and intent to pursue the application and a copy of the signed IARA to SSA and DDS.
- 3. When the application is at the Hearing or Post-Appeal level at the time of the ABD recipient's death:
 - a. Notify the Office of Hearing and Appeals that the State has a lien on the claim; and
 - b. Include a copy of the signed IARA.
- 4. Leave the SSI Tracking screen open in ICMS and continue the application/appeal until SSA approves or denies the case.

LINKS

Social Security:

- SSI
- SSDI
- SSA Forms

Search IESA Clarification Database

Email <u>Shane Riddle</u> with comments or questions about the content of the SSI FACILITATION section of the Social Services Manual. For problems with the website, see info below.