

**DEPARTMENT  
POLICY**

The Disability Determination Service (DDS) develops and reviews medical evidence for disability and/or blindness and certifies the client's medical eligibility for assistance. DDS does not accept electronic medical records in the form of CDs or DVDs. See Exhibit - DDS AREAS for the phone number of the DDS office which handles each county or district.

**FIP, SDA, RCA and MA**

This item contains medical determination policy for:

- Establishing medical eligibility for assistance programs.
- Determining whether an institutionalized Medicaid (MA) client is capable of indicating intent to remain a Michigan resident.
- Disability and/or blindness.
- Employment-related activities disability deferrals per BEM 230A and BEM 230C.

**AUTHORIZED  
REPRESENTATIVE****FIP, SDA, RCA and MA**

An authorized representative is a person who applies for assistance on behalf of the client and/or otherwise acts on their behalf. The authorized representative assumes all the responsibilities of a client. See BAM 110 for authorized representative requirements.

**APPLICATION FOR  
SSA BENEFITS****FIP and RCA**

After a client has verified a disability lasting longer than 90 calendar days, clients must apply for or appeal benefits through the Social Security Administration (SSA). This is a condition of program eligibility; see BEM 270, Pursuit of Benefits.

**SDA and MA**

At program application or request for disability deferral, clients must apply for or appeal benefits through the SSA if claiming disability

and/or blindness. This is a condition of program eligibility; see BEM 270, Pursuit of Benefits.

## **SSA DETERMINATION**

### **FIP, SDA, RCA and MA**

SSA's final determination that a client is not disabled and/or blind supersedes DDS's certification. See BEM 260 for MA to determine when to proceed with a medical determination for these clients.

## **INCAPABLE OF INDICATING INTENT**

### **MA Only**

A complete medical determination is **not** necessary to determine whether an institutionalized client is incapable of indicating intent to remain a Michigan resident.

Obtain a statement from the health care provider with the client's diagnosis, prognosis and expected length of stay. Attach the statement and any existing medical packet to a DHS-49-F, Medical-Social Questionnaire, and forward to DDS for review.

DDS will respond on the DHS-49-A. Take appropriate action as required by BEM 220.

## **MEDICAL DETERMINATION PROCEDURES**

### **FIP, SDA, RCA and MA**

At application or medical review if requested mandatory forms are not returned, the DDS cannot make a determination on the severity of the disability. Deny the application or place an approved program into negative action for failure to provide required verifications.

### **Steps for Medical Determination Applications**

1. Client claims disability and/or blindness.

Approve the medical eligibility for FIP/SDA/RCA/MA if one of the following exists:

- If the client is eligible for Retirement, Survivors, Disability Insurance (RSDI) or Supplemental Security Income (SSI) based on disability and/or blindness:
  - Document verification in Bridges.
  - Approve medical eligibility for MA or FIP/SDA/RCA (**Stop here. Medical determination process is complete**).
  - **Note:** If the client reports SSI based on disability and/or blindness was terminated due to financial factors, continue medical eligibility. Documentation would consist of a copy of the Notice of Planned Action letter from SSA to the client or similar, written documentation. The client must meet all financial and non-financial factors for SSI-related MA; see BEM 260. Medical development and DDS certification are not initially required. Schedule the medical review 12 months from the date of SSI termination. At the time of review, go to Steps for Medical Determination Reviews in this item.
- FIP/SDA/RCA clients who are already receiving MA based on their own disability and/or blindness meet the medical eligibility up to the medical review date stated on the DHS-49-A as determined by the DDS 7/1/2015 and after. (**Stop here. The medical determination for FIP/SDA/RCA is complete. A new medical redetermination must be requested from DDS by the medical review date listed on the DHS-49-A**). The client must still meet all financial and non-financial factors for FIP/SDA/RCA.

**Example:** Client is active FAP and MA based on disability. The medical review date is 8/1/2016. On 7/15/2015, the client applies for FIP. Approve the client with the FIP employment and training deferral code of incapacitated (IN) until the medical review date of 8/1/2016. Complete the medical determination review for continued potential eligibility of an employment and training deferral.

2. For FIP/SDA/RCA applicants, interview the client per requirements in BAM 115. For MA, no interview is required.

3. The client or authorized representative must complete all sections of the DHS-49-F, Medical-Social Questionnaire. **This form is mandatory.**

If the client is in a hospital or long-term care facility, the facility may designate a person to complete the DHS-49-F provided the local office, facility and client agree to this option.

4. The client or authorized representative must sign the DHS-1555, Authorization to Release Protected Health Information, to request existing medical records. **This form is mandatory.**
5. For state-funded FIP/SDA only, the client must sign a DHS-3975, Reimbursement Authorization, as a condition of eligibility; see BEM 272, State-Funded FIP and SDA Repay Agreements.
6. Complete a DHS-3503-MRT, Medical Determination Verification Checklist, indicating the following verifications required:
  - DHS-49-F.
  - DHS-1555.
  - DHS-3975, Reimbursement Authorization (for state-funded FIP/SDA only).
  - Verification of SSA application/appeal.
7. Assist the client or representative in completing the DHS-49-F and DHS-1555 if the client or representative is unable to complete the forms. If the client is obviously handicapped (for example, totally blind, paraplegic, quadriplegic, double amputee), enter this information on the DHS-49-F. Document the attempt(s) made to assist the client in Bridges; see BAM 130.
8. Review the DHS-1555 and the DHS-49-F to make sure the appropriate sections are complete.
9. Send the completed DHS-49-F, the completed DHS-1555, and verification of SSA application/appeal, along with any medical evidence provided, to the DDS to begin the medical development process.

**Note:** The specialist is not required to gather medical evidence. If the client provides medical evidence, forward it to DDS with the DHS-1555 and DHS-49-F.

10. If any additional medical information is received after the completed forms are sent to DDS, forward the additional medical information to the DDS.

**Note:** For SDA and MA only, the DDS may put a case on medical hold for further development. A medical hold letter will be sent to the client or authorized representative and a copy will be scanned into Bridges by DDS. Once DDS issues a medical hold, enter the appropriate medical deferral information in Bridges.

### Steps for Medical Determination Reviews

1. Complete a DHS-3503-MRT, Medical Determination Verification Checklist, indicating the type of verification requested.
2. The client or authorized representative must complete all sections of the DHS-49-FR, Medical Social Questionnaire Update, at the time of a scheduled medical review. **This form is mandatory.**

If the client is in a hospital or long-term care facility, the facility may designate a person to complete the DHS-49-FR provided the local office, facility and client agree to this option.

3. The client or authorized representative must sign the DHS-1555, Authorization to Release Protected Health Information, to request existing medical records. **This form is mandatory.**
4. For state-funded FIP/SDA only, if SOLQ indicates that a client has not been automatically coded for repayment, the client must sign a DHS-3975, Reimbursement Authorization, as a condition of eligibility; see BEM 272, State-Funded FIP and SDA Repay Agreements.
5. Complete a DHS-3503-MRT, Medical Determination Verification Checklist, indicating the following verifications required:
  - DHS-49-FR.

- DHS-1555.
  - DHS-3975, Reimbursement Authorization (for state-funded FIP/SDA only).
  - Verification of SSA application/appeal.
6. Assist the client or representative in completing the DHS-49-FR and DHS-1555 if the client or representative is unable to complete the forms. If the client is obviously handicapped (for example, totally blind, paraplegic, quadriplegic, double amputee), enter this information on the DHS-49-FR. Document the attempt(s) made to assist the client in Bridges; see BAM 130.
  7. Review the DHS-1555 and DHS-49-FR, to make sure the appropriate sections are complete.
  8. Send the completed DHS-49-FR, the completed DHS-1555, and verification of SSA application/appeal, along with any medical evidence provided, to the DDS to begin the medical development process.  
  
**Note:** The specialist is not required to gather medical evidence. If the client provides medical evidence, forward it to DDS with the DHS-1555 and DHS-49-F.
  9. If any additional medical information is received after the completed forms are sent to DDS, forward the additional medical information to the DDS.

### Steps for DDS

1. Certify the client's disability determination. Record certification on the DHS-49-A.  
  
**Note:** The DDS will determine disability and/or blindness for retroactive MA months even if retroactive MA is **not** requested by the client at application. If the client subsequently applies for retroactive MA, refer to the DHS-49-A for the disability determination for those retroactive months.
2. Scan the DHS-49-A and the supporting medical evidence into Bridges.

## Steps for the DHS Specialist After DDS Decision

1. Enter the DDS decision into Bridges.
  - If approved, enter the DDS decision and disability review date in Bridges on the *Disability Determination - MRT* screen.
  - If **not** approved:
    - Eligibility for MA based on disability and/or blindness does **not** exist.
    - Eligibility for SDA based on disability and/or blindness does **not** exist, see BEM 261.
    - For FIP, see BEM 230A.
    - For RCA, see BEM 230C.

## Previously Denied DDS Medical Determinations

### FIP, SDA, RCA and MA

If a client's previous DDS and/or SSA medical determination was not approved, the client has to prove a new or worsening condition in order to start the medical determination process again. Request a DHS-49 for physical conditions and a DHS-49-D/E for mental health conditions. Clinical notes from the treating physician that the condition has worsened may also be used.

If the client verifies a new or worsening condition; see Steps for Medical Determination Applications in this item.

## Administrative Hearings

For all administrative hearing procedures see BAM 600.

## VERIFICATION REQUIREMENTS

**Medical  
Determination  
Applications**

- DHS-49-F, Medical-Social Questionnaire.
- DHS-1555, Authorization to Release Protected Health Information.
- Verification of SSA application.
- DHS-3975, Reimbursement Authorization (for state-funded FIP/SDA only).

**Medical  
Determination  
Reviews**

- DHS-49-FR, Medical-Social Questionnaire Update.
- DHS-1555, Authorization to Release Protected Health Information.
- Verification of SSA application or appeal.
- DHS-3975, Reimbursement Authorization (for state-funded FIP/SDA only).

**VERIFICATION  
SOURCES****Verification of SSA  
Application or  
Appeal**

- State Online Query (SOLQ).
- DHS-1552, Verification of Application for SSI from SSA.
- Correspondence from SSA.



**EXHIBIT - DDS  
COUNTY  
ASSIGNMENTS**

**Lansing DDS**

Clinton	Oakland - Central Administration
Eaton	Oakland - Madison Heights
Genesee-Clio	Oakland - Prisoner
Genesee-McCree	Oakland - Saginaw
Hillsdale	Oakland - Southfield
Ingham	Oakland - Waterford
Jackson	Shiawassee
Lapeer	Washtenaw
Livingston	

**Lansing DDS Phone: 1-800-366-3404**

**Lansing DDS Fax: (517) 241-8449**

**Kalamazoo DDS**

Allegan	Lenawee
Barry	Mecosta/Osceola
Berrien	Newaygo
Branch	Oceana
Calhoun	Ottawa
Cass	Saint Joseph
Ionia	Van Buren
Kalamazoo	
Kent	

**Kalamazoo DDS Phone: 1-800-829-7763**

**Kalamazoo DDS Fax: (269) 337-3090**

**Traverse City DDS**

Alcona	Huron	Oscoda
Alger	Iosco	Otsego
Alpena	Iron	Presque Isle
Antrim	Isabella	Roscommon
Arenac	Kalkaska	Saginaw
Baraga	Keweenaw	Saint Clair
Bay	Lake	Sanilac
Benzie	Leelanau	Schoolcraft
Charlevoix	Luce	Tuscola
Cheboygan	Mackinac	Wexford
Chippewa	Manistee	
Clare	Marquette	
Crawford	Mason	
Delta	Menominee	
Dickenson	Midland	
Emmett	Missaukee	
Gladwin	Montcalm	
Gogebic	Montmorency	
Grand Traverse	Muskegon	
Gratiot	Ogemaw	
Houghton	Ontonagon	

**Traverse City DDS Phone: 1-800-632-1097**

**Detroit DDS**

Conner Serv. Ctr.	Inkster
Fort Wayne	Macomb - Mt.
Glendale/Trumbull	Clemens
Grand River/Warren	Macomb - Sterling Hts.
Grandmont	Macomb - Warren
Gratiot/Seven mile	Monroe
Greenfield/Joy	Redford
Greydale/Grand River	Taylor Wayne Adult
Hamtramck	Medical Services

**Detroit DDS Phone:** 1-800-383-7155

**Detroit DDS Fax:** (313) 456-6837

**LEGAL BASE**

**FIP**

MCL 400.57 *et seq.*

**SDA**

Mich Admin Code, R 400.3151-400.3180

**RCA**

45 CFR 400.70 - 400.83

**MA**

42 CFR 435.531, .540, .541