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TO: **Income Maintenance Supervisors**  
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**W-2 Agencies**  
**Workforce Development Boards**  
**Job Center Leads and Managers**  
**Training Staff**  
**Child Care Coordinators**

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BEM/DWS OPERATIONS MEMO					
No:	07-39				
DATE:	07/26/2007 <b>REVISED 08/21/2007</b>				
FS	<input type="checkbox"/>	MA	<input checked="" type="checkbox"/>	SC	<input type="checkbox"/>
CTS	<input type="checkbox"/>	CC	<input type="checkbox"/>	W-2	<input type="checkbox"/>
FSET	<input type="checkbox"/>	EA	<input type="checkbox"/>	CF	<input type="checkbox"/>
JAL	<input type="checkbox"/>	JC	<input type="checkbox"/>	RAP	<input type="checkbox"/>
WIA	<input type="checkbox"/>	Other	EP	<input type="checkbox"/>	*
<b>PRIORITY: HIGH</b>					

SUBJECT: **Medicaid Disability Determination Automation**

**EFFECTIVE DATE:** **New Effective Date October 22, 2007**

### **PURPOSE**

This memo provides information on the newly developed automated process for sending and receiving disability request and response information between CARES Worker Web (CWW) and the Disability Determination Bureau (DDB) for new Medicaid (MA) disability determinations.

### **BACKGROUND**

Given the number of cases that need to be reviewed by DDB on an annual basis and given the new technologies available to Income Maintenance (IM) agencies, DDB and the Bureau of Eligibility Management (BEM) began meeting to discuss how to best share information, reduce IM and DDB workload while improving customer service and tracking of disability determinations. In addition, since paper documents have moved to the Electronic Case File (ECF) and work continues to reduce paper document handling, the decision was made to automate the information sharing between DDB and IM workers.

## **PROCESS CHANGES**

Effective **October 22, 2007**, the automated interface process between CARES and DDB will begin and is expected to have the following impact:

- Process the Medicaid disability applications (MADA) timely and effectively.
- Eliminate sending the “red folder” between DDB and the IM agencies.
- Reduce the workload of IM agencies’ and DDB staff.
- Allow Division of Hearings and Appeals (DHA) staff access to DDB related documents in ECF.

At this time, these changes only impact new DDB requests and do not impact the re-determination process; however, the implementation of this effort will allow for the automated redetermination process in the future. Therefore, follow the current process for redetermination applications and medical release authorization forms.

### AUTOMATED REQUEST AND RESPONSE PROCESS

All of the following conditions must be met before a request can be sent electronically to DDB:

1. One of the following questions on the CWW Disability page for the individual must be answered Yes and the corresponding verification code entered as ? or Q?:
  - Has individual been established blind by DDB?, or
  - Has individual been established disabled by DDB?, or
  - Has individual been established Medicaid Purchase Plan (MAPP) disabled by DDB?, and
2. The new “Send Medicaid Disability Application?” question must be answered Yes, and
3. The new Application type must be New application – Electronic, and
4. The Electronic Application Status must be Initiate Request or resend, and
5. Eligibility (SFEX) must be run and the case in Pend (EBD) status for an SSI-related MA category. Refer to the Presumptive Disability Determination section later in this memo for more information on cases in Open status.
6. The completed MADA, medical authorization release forms, supporting medical documents / reports provided by the customer and authorized representative forms (if applicable) are scanned, indexed and released to the appropriate folder in ECF (this must be done within 10 business days of the EBD eligibility determination).

### **CARES Send Process**

A nightly CWW process will look for cases with a pending disability determination for an individual, a corresponding unprocessed DDB request (Yes) and the presence of the associated forms in ECF for the corresponding individual. Once all of these conditions are met, CARES will make an electronic request to DDB.

Along with other items, the following information from CARES will be sent electronically to DDB:

- CARES Case number
- Claimant PIN, MCI ID, SSN or Pseudo SSN
- SSN Type indicator
- Claimant Gender, DOB, Address and Telephone number
- Authorized Representative Name and Address
- Application Date
- County number
- Case Type (New application)
- Blind, Disability, MAPP Disability or Presumptive Disability request
- Case Worker Name and phone number

In addition to sending the individual information, CARES will also send images of ECF documents associated with the disability request (MADA, medical authorization release forms etc.) for each request. These images, along with the CARES information, will allow DDB staff to view all the related information for an application and to start processing these electronic applications timely.

### **DDB Process**

Once a disability determination decision is made, DDB will send back the decision information to CARES electronically and release any reports and other documents used to make the determination to the ECF.

Beyond this electronic exchange of data, the DDB processes remain the same.

**NOTE** ➤ IM workers will have access to DDB documents in the ECF as long as they have update access to any given case.

In addition, DDB receives notice of all appeals from the clients and evaluates the decision when necessary. If a denial is reversed and a favorable decision is made, DDB will send that information electronically back to CARES as well.

### **CARES Receive Process**

For all decisions received back from DDB, CARES will automatically update the disability decision information on the CWW Disability page for the corresponding individual.

The following decision information will be automatically populated on the CWW Disability Page:

- Determined Blind, or determined disabled, or determined MAPP disabled
- Decision Date
- Diary Date if determined disabled
- Onset Date if determined disabled

In addition, an alert will be issued to the worker to re-determine eligibility (run SFEX) for the case. The Disability Page will also be scheduled for the worker to review before confirming the case. Any associated images received from DDB will be stored in a corresponding "DDB Documents" folder in ECF for worker review if necessary.

FORM CHANGES AND ELIMINATION

The following changes have been made to the Medicaid – Disability Application (MADA) HCF10112:

- Section IX has been eliminated from the form. Remember to double check that the form was completed in its entirety.

The following forms will be eliminated as part of this project automation:

- Medicaid Purchase Plan Transmittal of Medicaid Disability Application (HCF 10120)
- Request for Medicaid Presumptive Disability Decision (HCF 10125)

The information formerly contained on these forms is already captured in CARES and will be sent electronically to DDB.

OTHER CARES / DDB PROCESS DETAILS**Disability Applications Pending At Implementation**

If an application is pending prior to implementation of the new process but the outstanding verification is received on or after the implementation date of **October 22, 2007**, submit all new applications electronically using the new process. For those applications sent to DDB prior to implementation, DDB will handle those following the current (manual) process and a response will not be returned electronically. If an application has already been sent manually, do not send another one electronically.

If the agency receives additional documentation after the initial application materials have been sent electronically to DDB, the worker should scan those documents into the ECF and then fax a copy to DDB at 608-266-8297. By faxing the new documents, DDB will be notified that additional information has been received.

**Presumptive Disability Determination**

A presumptive disability determination can be made by the agency or by DDB. If the agency makes the initial presumptive disability determination and confirms the customers' eligibility (case will be in Open status), an electronic application must still be sent to DDB. In addition to completing the Presumptive Disability questions, there must be a <? Or Q?> in either the *Has individual been established blind by DDB?* or *Has individual been established disabled by DDB?* field. The worker must then follow the process outlined in this memo in order for the electronic process to be successful.

A nightly CWW process will look for the cases that have a pending disability determination for an individual, a corresponding unprocessed MADA application (Yes) and the presence of the associated forms in ECF for the corresponding individual. Once all of these conditions are met, CARES will make an electronic request to DDB.

If the worker is not doing the initial Presumptive Disability determination and wants DDB to make the determination, follow the new automated process as outlined in this memo. The Presumptive Disability determination response from DDB will not be automated at this time; DDB will call the worker when a decision is made. The decision information must be entered manually on the Disability page and eligibility determined based on the new information.

## SYSTEM CHANGES

To support this new automated process, the following changes have been made to the Disability page in CWW:

The screenshot shows the 'Disability' form with the following fields and callouts:

- Effective Period:** Begin Month: 07 / 2007, End Month: MM / YYYY, Last Updated: 07/12/2007. Delete Reason: [dropdown]
- Additional Information:** Individual: WILLIE HUDSON 48M PP.
  - Has individual been established blind by Disability Determination Bureau? Yes [dropdown], Verification: Q? - QUESTIONABLE NOT YET VERIFIED [dropdown]
  - Has individual been established disabled by Disability Determination Bureau? Yes [dropdown], Verification: Q? - QUESTIONABLE NOT YET VERIFIED [dropdown]
  - Has individual been established Medicaid Purchase Plan (MAPP) disabled by Disability Determination Bureau? No [dropdown], Verification: [dropdown]
  - Presumptive Disability? No [dropdown], Verification: [dropdown]
  - Presumptive Disability Type: [dropdown]
  - 1** Presumptive Disability Determination Date: MM / DD / YYYY [calendar icon]
  - Is individual considered disabled for FoodShare (DDB Disabled, Blind, Presumptive Disability, MAPP Disabled, VA Disabled or RRB Disabled)? Yes [dropdown], Verification: MC - MEDICARE CARD [dropdown]
- Disability Determination Bureau (DDB) Application Status:**
  - 2** Send Medicaid Disability Application? Yes [dropdown]
  - 3** Application Type: NE - New Application - Electronic [dropdown]
  - 4** Electronic Application Status: IR - Initiate Request [dropdown] **6**
  - 5** Date Sent to DDB: MM / DD / YYYY [calendar icon], Date Received from DDB: MM / DD / YYYY [calendar icon]
- Disability Dates:** **7** Onset Date: 07 / 01 / 2007 [calendar icon], Diary Date: MM / DD / YYYY [calendar icon]
- FSET Exemption:** Is this individual currently incapable of working: Yes [dropdown], Verification: OWL - OTHER ACCEPTABLE WRITTEN STATEMENT [dropdown]

**① Presumptive Disability Determination Date** – Workers will enter the date the presumptive disability determination was made. Currently, this date field is not connected to the system but used for tracking purposes only; this field will be activated in a future phase when the redetermination functionality is implemented. At conversion, this field will remain blank.

**② Send Medicaid Disability Application** – Yes and No are the values for this field. Yes will allow CARES to send the Application and related medical documentation to DDB. A No entry means that no DDB application needs to be sent to DDB; for example, when the customer submits the proof of disability to the worker. At conversion, this field will be defaulted to Yes.

**③ Application Type** – Values for this field are:

- New Application – Electronic – Select this value for a new disability application.
- Redetermination – Manual – Select this value to track all Redeterminations sent manually to DDB.
- New Application / Redetermination – Manual - This value will be entered at conversion for all existing disability applications currently in CARES.

**④ Electronic Application Status** – Values for this field are:

- Initiate Request – Select this value when a new disability determination application is sent to DDB. This field will be blank at conversion for all existing disability applications currently in CARES.
- Sent – Updated by CARES nightly after the electronic request is successfully sent to DDB.
- Hold – Select this value when the application should be delayed waiting for additional or required documents from the customer.
- Resend – Select this value to have the electronic request resent when corrections have been made based on a No-Decision response returned by DDB.
- Received – Updated by CARES nightly after the electronic response is successfully received from DDB.

**⑤ Date Sent to DDB** – This date field is updated by CARES nightly after the electronic request is successfully sent to DDB. This field can be updated by the worker for applications sent manually to DDB.

**⑥ Date Received from DDB** – This date field is updated by CARES nightly after the electronic request is successfully received from DDB. This field can be updated by the worker for applications sent manually to DDB.

**⑦ Diary Date** – The current Review Date field has been renamed to better correspond to DDB terminology. This date field is updated by CARES nightly after the electronic request is successfully received from DDB. This field can be updated by the worker for applications sent manually to DDB.

ALERTS

Based on the information returned from DDB, certain alerts will be generated and sent to the worker:

Alert number	Alert Text	Worker action
423	DDB-No Decision received	A "No Decision" response sent by DDB means that DDB was unable to make a decision on an application. DDB will complete a Disability Determination Worksheet (DDWSH) with notes explaining why a determination could not be made. Access the ECF and review the notes on the worksheet from DDB, make corrections as needed, and re-send the application to DDB.
424	DDB Approval received	Review the information on the Disability page and determine eligibility based on the information.
425	DDB Denial received	Review the information on the Disability page and determine eligibility based on the information.
426	DDB Approval – Onset date changed	Review the information on the Disability page to make sure there is eligibility from the new onset date.
427	DDB Reversal – Approval received	Review the information on the Disability page and determine eligibility based on the information.
428	DDB Reversal – Denial received	Review the information on the Disability page and determine eligibility based on the information.
429	DDB Waiting for documents to be scanned	Check the ECF and scan any missing documents.

ECF

A new restricted folder titled "DDB Documents" will be created in ECF to store the DDB related documents. This folder will have the same security attributes as the existing "restricted folder." With this new automation, new document types have been defined in ECF to better identify documents being sent to and by DDB:

**Scanning Doc Types**

"MADA"– MADA Application

"ADDD"– Authorization to Disclose Information for DDB

"ADDMD"– Additional Disability Determination Medical Documents for DDB

"REP"– Authorized Representative form code (No change)

**Receive Doc Types**

"DDDOC"– Disability Determination Documents from DDB. This could include documents formerly referred to as MDE documents.

"DDWSH"– Disability determination worksheet from DDB

**NOTE** ➤ Agencies who have not already scanned the contents of existing red folders will still need to do so. As part of the backfile conversion, red folders should be scanned using the doc type "DDB".

Because this new process does not include redeterminations, any documents related to a redetermination should continue to be scanned as a "DDB" doc type. At conversion, all DDB new and existing document types will be moved from the existing restricted folder to the new "DDB Documents" folder as part of this process. Refer to the ECF Handbook for more information about these changes.

## ***CONTACTS***

BEM CARES Information & Problem Resolution Center

★Program Categories – FS – FoodShare, MA – Medicaid, SC – Senior Care, CTS – Caretaker Supplement, CC – Child Care, W-2 – Wisconsin Works, FSET – Food Stamp Employment and Training, CF – Children First, EA – Emergency Assistance, JAL – Job Access Loan, JC - Job Center Programs, RAP – Refugee Assistance Program, WIA – Workforce Investment Act, Other EP – Other Employment Programs.

DHFS/DHCF/BEM/JE