The purpose of this memo is to implement a change in the Presumptive Medical Disability Determination (PMDD) referral process and related policy changes. The revised process impacts both Medical Assistance and General Assistance (GA). These changes are effective five (5) business days following the issuance of this memo.

These changes will be incorporated in the Kansas Economic and Employment Support Manual (KEESM) during the next revision scheduled for October 1, 2010.

I. BACKGROUND

A restructuring of the Presumptive Medical Disability Team (PMDT) has necessitated a change in the Presumptive Medical Disability Determination (PMDD) referral process. To accommodate these changes, the following efficiencies agreed upon by SRS and KHPA have been implemented.

II. TELEPHONE CONSULTATION (TC)

Applicants will no longer be required to complete a Telephone Consultation (TC) as a condition of eligibility. KHPA case development staff will retain the discretion to contact applicants as necessary to obtain additional information, but a TC for each applicant is no longer mandated. This eliminates the need for SRS eligibility staff to schedule a TC.

Since a TC is no longer required, the existing ES-3903 (Presumptive Medical Disability Determination Telephone Consultation Guide) has been revised, repurposed, and renamed the Presumptive Medical Disability Determination Questionnaire. This form shall be used to capture the individual’s specific medical information as described below.

III. REFERRALS
A. Appropriate Referrals – In order to simplify the PMDD referral process and to ensure that only appropriate referrals are initiated by SRS eligibility staff, the following guidelines apply.

1. Otherwise Eligible – Only applicants who appear to be otherwise eligible will be referred for a disability determination. A referral should not be completed until SRS eligibility staff are reasonably certain that the applicant is not ineligible for a reason other than disability. Staff will have considerable discretion in making this determination.

2. Timing of Referrals – SRS eligibility staff are no longer required to submit referrals immediately upon receipt of application. Referrals should be submitted once all information necessary to determine eligibility has either been received or has already been verified. This normally will delay the referral for the length of time it takes the applicant to return requested information in a timely manner. SRS eligibility staff will promptly complete the referral to the PMDT upon receipt of all requested material (excluding the ES-3903 and ES-3904 which are to be mailed directly to the PMDT by the applicant).

Exceptions: In certain instances, it may be appropriate to complete a referral where all necessary information has not yet been provided. SRS eligibility staff have the discretion to complete a referral with incomplete information if necessary to prevent an unreasonable delay in the disability determination process. An example is where the applicant is making a good faith effort to obtain requested information but needs additional time, and it appears likely that the information will ultimately be provided.

3. Other Guidelines – The SRS eligibility worker is responsible for determining which cases to refer as well as the specific program involvement based on the application/request for General Assistance (GA) and/or medical assistance. A referral should not be completed in the following situations:

a. Otherwise Eligible - A referral should not be completed on an application that may be denied for a reason other than disability - such as excess income or resources, or failure to provide requested information.

Example 1: A medical-only application is received from an individual who reports a savings account with an unknown balance. A request for information is sent giving the individual 10 days to return the information. The individual timely provides a copy of their most recent bank statement indicating a balance of $20,000. No referral will be completed since the application will be denied due to excess resources.

Example 2: A General Assistance (GA)/medical application is received for a married couple which includes all information needed to make an eligibility determination (except for the disability determination). The applicants self declare that the husband is disabled, but not the wife. The GA application will be denied for failure to meet qualifying criteria since both spouses are not disabled. A PMDD referral will not be completed for GA purposes, however, a medical-only referral will be appropriate for a determination of the husband’s disability.

Example 3: A medical-only application is received for an individual who reports a monthly SSA benefit of $810 and a pension of $318/month. The SSA benefit is verified via the EATSS interface. A request for information to verify the source and amount of the pension is sent giving the individual 10 clear days to return the information. The individual fails to respond to the
request and the SRS eligibility worker is unable to independently verify the source or amount of the pension. No referral will be completed since the application will be denied for failure to provide information necessary to determine eligibility.

b. **Duration** - The individual must claim a disability that will last at least 12 months or result in death. The applicant’s statement of disability duration obtained from either the ES-3100.1 application or the ES-3900 (Tell Us If You Have A Disability) is sufficient to prompt a referral. If the applicant self-declares the disability will not last more than 12 months, the application may be denied for failure to meet disability criteria and no referral should be completed.

In limited instances, it may be appropriate for SRS eligibility staff to employ the prudent person concept to clarify the applicant’s statement of disability in order to eliminate potentially inappropriate referrals. However, in no instance are SRS eligibility staff expected to make their own medical determination concerning the applicant.

**Example 1:** The applicant self-declares they have a broken arm and their disability will last less than 12 months. Since the duration is less than 12 months, the individual fails to meet disability criteria. No referral will be completed.

**Example 2:** The applicant self-declares they have a broken arm and their disability will last at least 12 months. Based on prior experience, the SRS eligibility worker questions the applicant’s statement of duration. Prudent person allows (but does not require) the worker to contact the applicant to confirm the duration.

If the SRS eligibility worker contacts the applicant who confirms their disability will indeed last at least 12 months, then the applicant’s declaration is accepted and a referral to the PMDT may be completed.

If the SRS eligibility worker contacts the applicant who confirms their broken arm is expected to heal/rehabilitate within 3-4 months, the 12 month duration test is not met. The application may be denied and no referral would be made.

c. **Age** – Only applicants claiming a disability who are under the age of 65 shall be referred to the PMDT. A disability determination is not necessary for medical-only applicants who are 65 years of age or older. General Assistance (GA) applicants, aged 65 or older, meet the disability requirement through self declaration as described above – a formal determination is not required.

d. **SSA Determination Within Last 12 Months** – Medicaid only applicants who do not have an active SSA application in progress should not be referred if they have a final SSA determination within the last 12 months, unless they are reporting a new condition or change in disability. Applicants without a previous PMD determination (but with a current SSA determination) may be referred based on their declaration of disability – with the SSA history noted on the referral.

GA/MediKan applicants with a final SSA determination within the last 12 months may be referred if they are under the 12 month benefit limit. However, these applicants may not be referred for a Medicaid only determination.

**NOTE:** A final SSA determination is defined as one in which the decision is no longer subject to appeal. This includes situations where the last level of appeal has been reached or the individual...
has failed to timely challenge a decision.

e. **SSA Will Not Make A Determination** – A referral to the PMDT should not be made where SSA will not make a disability determination due to a financial reason – such as spousal income, resources, or employment. These applications/requests will continue to be sent to Disability Determination Services (DDS) for a determination.

B. **Forms** – The PMDD process requires that the PMDT receive the following packet of completed forms (ES-3901, ES-3903, and ES-3904). The ES-3901 is the initial referral form to be completed by SRS eligibility staff and faxed directly to the PMDT. The ES-3903 and ES-3904 are the disability questionnaire and the HIPAA release form which are to be distributed by SRS eligibility staff to the applicant who is responsible for returning the completed forms to the PMDT in the envelope provided. A new form (ES-3909) has also been created to be included as an instructional cover letter when the ES-3903 and ES-3904 forms are mailed to the applicant.

An initial supply of the ES-3901, ES-3903, ES-3906, and ES-3909 forms will be provided and can be reordered from the SRS warehouse as needed.

1. **Presumptive Medical Disability Determination Referral (ES-3901)** – This form has been revised to remove references to the previously mandated Telephone Consultation (TC) and to include a new section concerning the ES-3903 and ES-3904 due dates. This form will continue to be completed by SRS eligibility staff to initiate the disability referral process to the PMDT. The referral should not be completed until it appears that the applicant will be otherwise eligible as described above.

   To ensure the accuracy of applicant identifying information, a copy of the KAECSES CAP1 and CAP2 screens must be included with the ES-3901.

2. **Presumptive Medical Disability Determination Questionnaire (ES-3903)** – This form (previously titled Presumptive Medical Disability Determination Telephone Consultation Guide) has been revised to remove references to the previously mandated Telephone Consultation (TC). The form will continue to capture medical information associated with the individual applicant. This form (and the ES-3904) will be sent to the applicant by SRS eligibility staff, along with a self-addressed stamped envelope, with instruction to return to the PMDT within 10 clear days.

   It should be stressed to the applicant how important a fully completed form is in making a prompt and correct disability determination. Failure to provide complete information may result in needless delay and/or an unfavorable determination.

   While it is very important that the form is completed as fully as possible, SRS eligibility staff are not expected to help applicants complete the form. Applicants needing assistance should be directed to friends, family, and other community resources for assistance. In addition, the form includes language directing the applicant to contact the PMDT at their toll free number (1-888-547-2763) if they have questions about the form.

   Questionnaire forms received directly by SRS eligibility staff, which are only partially complete, should still be forwarded to the PMDT as part of the referral process. Upon receipt of the questionnaire, the PMDT will review the form and determine if additional information is needed, and contact the applicant if necessary.
3. **HIPAA Compliant Authorization to Disclose Information (ES-3904)** – This form has not been changed. SRS eligibility staff will send this form (and the ES-3903) to the applicant, along with a self-addressed stamped envelope, with instructions to return to the PMDT within clear 10 days. The form will be used to obtain records from medical providers to assist in the disability determination process. It should be noted that under the old process, three copies of the form were required. Under the new referral process, only one original signed release form from the applicant is required.

4. **Presumptive Medical Disability Determination Changes/Decision (ES-3906)** – This change and decision reporting form has been revised to remove reference to the previously mandated Telephone Consultation (TC). An additional item has also been included for the PMDT to communicate to SRS eligibility staff when the applicant has failed to return the ES-3903 and/or ES-3904 forms to the PMDT in a timely manner. This form is to be used for communication purposes between the PMDT and SRS eligibility staff once a formal referral has been completed.

5. **Presumptive Medical Disability Determination Cover Letter (ES-3909)** – This is a new form designed specifically for the revised disability referral process. The ES-3909 is the instructional cover letter to be included with the ES-3903 and ES-3904 forms sent to the applicant by SRS eligibility staff. The letter explains the disability process and indicates that the forms must be returned to the PMDT by the specified date or the application/request for assistance may be at risk. SRS eligibility staff are responsible for entering the due date on this form. A copy of the ES-3909 form should be retained in the SRS case file to document that the ES-3903 and ES-3904 forms were sent or given to the applicant.

**NOTE:** Failure of the applicant to timely return either the ES-3903 (Presumptive Medical Disability Determination Questionnaire) or one original signature ES-3904 (HIPAA Compliant Authorization to Disclose Information) form may result in a denial of the application/request due to failure to provide information necessary to determine eligibility.

C. **Communication** – The existing communication protocols between the PMDT and SRS eligibility staff remain in effect. The ES-3901 (Presumptive Medical Disability Determination Referral) form (including a copy of the CAP1 and CAP2 screens) will be sent to the PMDT via fax. There will be times when non-routine communication is necessary, or the SRS eligibility worker needs to discuss a case with the KHPA case developer. General e-mails or phone calls are appropriate in these instances.

1. **E-mail** – A common e-mail box has been established for PMDT. All e-mail to the PMDT is to be sent to this common mailbox rather than to individual e-mail boxes.

   The PMDT Mailbox is: [PMDT@khpa.ks.gov](mailto:PMDT@khpa.ks.gov).

   The PMDT will send communication directly to the SRS eligibility worker, with a courtesy copy to a special SRS Regional Mailbox. Each SRS region will be responsible for dispersing the information from their mailbox. The regional mailbox addresses are:

   - Kansas City Metro Region – [PMDKCR@srs.ks.gov](mailto:PMDKCR@srs.ks.gov)
   - North East Region – [PMDNER@srs.ks.gov](mailto:PMDNER@srs.ks.gov)
   - South Central Region – [PMDSCR@srs.ks.gov](mailto:PMDSCR@srs.ks.gov)
   - South East Region – [PMDSER@srs.ks.gov](mailto:PMDSER@srs.ks.gov)
   - Wichita Region – [PMDWIR@srs.ks.gov](mailto:PMDWIR@srs.ks.gov)
   - West Region – [PMDWER@srs.ks.gov](mailto:PMDWER@srs.ks.gov)
2. **Telephone** - A dedicated toll-free line has been established for calls coming to the PMDT. The PMDT toll-free number is 1-888-547-2763 (1-888-KHPA-PMD). In Topeka, call 296-1849.

3. **Fax** – A dedicated fax line has also been established for the PMDT. SRS eligibility workers must fax all initial referrals and other important documents to this number. The PMDT fax number is (785) 296-1723.

4. **Mail** – All PMDT mail should be sent to the following address:

   PMDT  
   Kansas Health Policy Authority  
   Room 900-N, LSOB  
   900 SW Jackson Street  
   Topeka, KS  66612

**IV. AGENCY RESPONSIBILITIES**

A. **SRS Responsibilities** – SRS eligibility staff will have the following responsibilities concerning the PMDD referral process.

1. **Provide the Appropriate Forms** – SRS eligibility staff are responsible for issuing the ES-3903 (Presumptive Medical Disability Determination Questionnaire), ES-3904 (HIPAA Compliant Authorization to Disclose Information), and ES-3909 (Presumptive Medical Disability Determination Cover Letter) forms to the applicant. These forms may be handed to the applicant during a face-to-face interview (if one is conducted), or mailed to the applicant along with a self-addressed stamped envelope with instructions to complete and return the ES-3903 and ES-3904 forms to the PMDT within 10 clear days.

   SRS eligibility staff must enter the KAECSES case number and Social Security Number (SSN) of the individual at the top of the ES-3903 form in the box marked “For KHPA Use Only” before issuance to the applicant. This will allow the PMDT to track the completed forms upon receipt.

2. **Document the Request to Return the Forms** - SRS eligibility staff must retain a copy of the ES-3909 to document that the applicant has been notified of their responsibility to return the completed ES-3903 and ES-3904 forms to the PMDT along with the due date and the consequences for failure to timely comply. This documentation then becomes the basis for SRS eligibility staff to take adverse action (if necessary) for failure to provide information necessary to determine eligibility.

3. **Complete the Referral** – Once the applicant has been determined to be otherwise eligible (as described above), SRS eligibility staff will complete the ES-3901 (Presumptive Medical Disability Determination Referral) form and fax to the PMDT. A copy of the KAECSES CAP1 and CAP2 screens must be included with the referral.

   The referral must also indicate whether or not the completed ES-3903 or ES-3904 forms are being included with the referral. If the forms are not included with the referral from SRS, the due date for return to the PMDT must be reported on the referral form. This will allow the PMDT to determine if the forms have been timely returned.
NOTE: SRS eligibility staff may receive the completed ES-3903 and/or ES-3904 forms directly from the applicant, either in person during a scheduled face-to-face interview or because the forms were returned to the local SRS office instead of in the self-addressed stamped envelope to the PMDT. Forms received by SRS before the formal referral has been made should be held until the referral is completed. Forms received by SRS after the referral has been completed should be immediately faxed to the PMDT.

4. Report Changes/Decisions – SRS eligibility staff are responsible for reporting changes and/or eligibility decisions to the PMDT via the ES-3906. These changes and/or decisions would not be communicated to the PMDT if the applicant has not been determined otherwise eligible. In situations where no referral has been completed, SRS eligibility staff will notify the PMDT of application denials if the ES-3903 and ES-3904 were previously sent to the applicant with instructions to return the forms to the PMDT. This will allow the PMDT to determine how best to handle the forms if received.

5. Act on Reported Changes/Decisions – SRS eligibility staff continue to be responsible for acting on changes and decisions reported to them by the PMDT. If the ES-3903 and/or ES-3904 form(s) are not returned in a timely manner, the PMDT will notify SRS eligibility staff via the ES-3906 that the applicant has not provided a timely response to the request for information. SRS eligibility staff will then take appropriate action on the application/request.

B. KHPA Responsibilities – KHPA PMDT staff will have the following responsibilities concerning the PMDD referral process.

1. Track Forms Submitted by the Applicant – The PMDT staff are responsible for tracking the ES-3903 and ES-3904 forms submitted directly by the applicant, including documenting the date of receipt. In most cases, these forms will be received separately from the formal referral (ES-3901) submitted by SRS eligibility staff. The PMDT will develop an internal tracking process for submitted forms. It is understood that the PMDT staff will take no formal action on these forms until an ES-3901 referral from SRS eligibility staff has been received.

2. Accept a Formal Referral From SRS – A formal referral (ES-3901, including the CAP1 and CAP2) to the PMDT from SRS eligibility staff initiates the disability determination process. The PMDT will not take any action on previously submitted ES-3903 or ES-3904 forms until the formal referral from SRS is received.

3. Notify SRS of Non-Receipt – After receipt of a formal referral (ES-3901) from SRS eligibility staff, the PMDT shall note the reported due date of the forms (ES-3903 and ES-3904) the applicant is responsible for submitting. Should the forms not be timely submitted to the PMDT, SRS will be promptly notified via the ES-3906 so appropriate action may be taken on the application/request.

4. Report Changes/Decisions – The PMDT continues to be responsible for reporting changes and decisions to SRS eligibility staff via the ES-3906. This includes reporting non-receipt of the ES-3903 or ES-3904 as noted above.

The PMDT additionally is responsible for reporting the receipt of an untimely submitted ES-3903 or ES-3904, as long as the form is received within 45 days of the application/request date. This is necessary because an application/request may be reactivated if requested information is provided within that time frame. The PMDT shall use the application date indicated in the APP RECD field
V. RECONSIDERATION

A. Reconsideration – An individual dissatisfied with the PMDT decision regarding their disability status may request a reconsideration of that decision. The request must be made within 60 days of the PMDT decision. The PMDT reconsideration decision will be communicated to SRS eligibility staff for appropriate action. SRS eligibility staff will notify the individual of an unfavorable reconsideration decision.

The PMDT decision is valid for 12 months and an individual may only receive one reconsideration determination in that time frame. A reconsideration request by the individual received later than 60 days from the date of the PMDT decision will be denied. An individual reporting a new or worsening medical condition after the 60 day reconsideration period has expired must file a new application for assistance. In these instances, a new PMDD referral will be required.

B. Appeals – The PMDT retains primary responsibility for fair hearing requests related to a PMDT disability determination. SRS eligibility staff will continue to be responsible for fair hearing requests unrelated to the disability determination. In most instances, PMDT will process a reconsideration of the disability determination. If the original disability decision is confirmed by the reconsideration, the fair hearing appeal summary will be completed by the PMDT.

If you have any questions, please contact the appropriate program manager or the Presumptive Medical Disability Team (PMDT) at PMDT@khpa.ks.gov.

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