

# MEDICAID DISABILITY MANUAL

all be considered and evaluated as a whole.

An individual is not considered disabled if substance abuse would be a contributing factor material to the determination that the individual is disabled. If the only impairment documented is substance abuse, the individual will be determined not disabled. Therefore, it is particularly important to ensure that all relevant medical information is compiled for the disability review. Applicants who indicate they have a substance abuse problem should be asked if they have had treatment in the past or currently need treatment for any other chronic potentially disabling impairments, including those cited in listing 12.09. The local agency should obtain all available medical treatment records and arrange for a consultative exam if necessary to ensure that a complete and current file that addresses all the impairments is available for the Disability Review Team.

Local districts can use the sample consent form included in the Forms and Publications Section as Exhibit 18 to secure medical records from alcohol and drug abuse treatment and rehabilitation facilities for use in the disability determination process. The sample consent form should be reproduced on agency letterhead. Local districts which submit disability cases to the State Disability Review Team for adjudication should expressly state in the "Purpose of Disclosure" Section of the consent form that the information will be redisclosed to the **New York State Department of Health, Office of Health Insurance Programs** for determining the client's disability.

## K. **Blindness**

Department Regulation Sections 360-5.12

1. **Determination of Blindness Status** - Individuals who are blind are categorically eligible for Medicaid in the SSI-related category and may qualify for special work-related disregards from their earnings. Information regarding an individual's legal blindness status may be available through the Commission for the Blind and Visually Handicapped (CBVH) if the A/R does not have verification of legal blindness.

The agency must first obtain a signed release form from the A/R. The inquiry and signed consent to release information form can be mailed to the CBVH at the address below or can be faxed to them at (518) 486-5819. The CBVH will need the individual's name, social security number, address, and date of birth. They can provide the local district with a "Verification of Blindness" form if the individual is known to them. This form should be retained in the case record.

Office of Family and Children's Services