

**CATEGORICAL FACTORS
SSI-RELATED****BLINDNESS**

Policy: Persons of any age are eligible to receive Medicaid when they are certified blind by the Commission for the Blind and Visually Handicapped, providing they meet the financial and other eligibility requirements.

References: SSL-Sect. 366
366-ee

Dept. Reg. 368

ADMs 10 OHIP/ADM-01
87 ADM-41

GISs 09 MA/027

Medicaid Disability Manual

Interpretation: To be eligible as blind, individuals are certified as legally blind by the Commission for the Blind and Visually Handicapped. Total blindness is not required for such certification and all A/Rs evidencing obvious visual impairments are considered for this category. If a person shows evidence of multiple impairments, a classification of blindness takes precedence over other disabilities.

If an A/R's vision improves to the point that s/he is no longer certified blind, the A/R remains SSI-related for two months following the month his/her blindness is overcome. To be eligible for Medicaid, the A/R must still meet all other requirements.

Exception: Persons who were eligible as Medicaid-only blind persons in December, 1973 **and** who continue to meet the December, 1973 criteria for blindness, continue to have their blindness evaluated by the Commission for the Blind and Visually Handicapped in accordance with the December, 1973 standards for as long as they remain eligible for Medicaid.

When to Verify Status: Verify status when:

- (1) the A/R indicates blindness or a severe vision impairment on the application.
- (2) When the A/R shows evidence of blindness or obvious visual impairment.
- (3) When the A/R indicates present or past employment at a workshop for the visually handicapped.

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- (4) When the A/R indicates on the application that s/he is in receipt of Social Security Disability benefits or other disability pension benefits based on his/her visual impairment.

**Verification
Process:**

Verification of legal blindness for the purpose of establishing eligibility for Medicaid is certification from the Commission for the Blind and Visually Handicapped (CBVH). If the A/R is unable to provide his/her certification, the local district submits form LDSS-2353, "Eye Examination Clearance - Blind Applicant for Medicaid" to the Commission to determine if the A/R is registered. If the A/R is unknown to the Commission, a report of an eye examination by an ophthalmologist or an optometrist is submitted on the appropriate form (i.e., LDSS-3377 Rev. 2/82, Mandatory Eye Examination Report, Commission for the Blind and Visually Handicapped) to the Commission for certification.

Documentation: Sufficient to establish an audit trail:

- (a) a copy of the certification of blindness from the Commission for the Blind and Visually Handicapped included in the case record; or
- (b) the date of certification, Commission Registration number and/or name of the official who signed the document.

Disposition:

If the A/R meets the above requirements, s/he is considered SSI-related and his/her income and resources are compared to the medically needy income levels in **REFERENCE MEDICALLY NEEDY INCOME AND FEDERAL POVERTY LEVELS** and the resource levels also found in **REFERENCE MEDICAID RESOURCE LEVELS** to determine eligibility for Medicaid. Such persons are offered a choice between the SSI-related budgeting methodology and the ADC-related budgeting methodology, provided s/he meets the requirements for ADC. If the individual's income eligibility is the same under both budget types and the individual is not eligible for, or does not wish to participate in Medicaid Buy-In for Working People with Disabilities (MBI-WPD), the individual must be given the ADC-related category of assistance, since benefits under this category are not limited based on resources.

The A/R is advised of the benefits available through the SSI program. If s/he is interested, s/he is referred to the local SSA District Office for a determination of his/her SSI eligibility. Application for SSI is **not** a condition of eligibility for Medicaid.