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 | ADMINISTRATIVE DIRECTIVE |
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TRANSMITTAL: 91 ADM-32

TO: Commissioners of
 Social Services

DIVISION: Income
 Maintenance

DATE: August 20, 1991

SUBJECT: Revised DSS-2474, SSI Referral and Certification of Contact

SUGGESTED DISTRIBUTION: Income Maintenance Staff
 Employment Staff
 Medical Assistance Staff
 Services Staff
 Staff Development Coordinators
 DCAP Coordinators

CONTACT PERSON: Abe Anolik, 1-800-342-3715, ext. 4-7218

ATTACHMENTS: Attachment A: DSS-2474 (Revised 11/90) - not available on-line
 Attachment B: Instructions for the Completion of the DSS-2474 (Revised 11/90) - available on-line

FILING REFERENCES

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
75 ADM-119	75 ADM-119	370.2(c)(5)		<u>PASB</u>	
83 ADM-5	83 ADM-5	370.7(b)		IX-I-2	

I. PURPOSE

This release provides social services districts with the revised DSS-2474 and instructions for its completion and use.

II. BACKGROUND

The DSS-2474 has the following two users: social services districts and Social Security Administration (SSA) local offices.

- A. The DSS-2474 is used by districts to refer public assistance applicants or recipients to SSA to file for Supplemental Security Income (SSI) or RSDI (Retirement, Survivors and Disability Insurance commonly known as "regular Social Security benefits") or to file an appeal of an adverse action on an SSI or RSDI claim. When signed by SSA and returned to the district, the DSS-2474 also serves as documentation that the client has met the condition of public assistance eligibility of filing for SSI and appealing any adverse decision.
- B. The DSS-2474 is used by SSA to refer clients to social services districts for medical or cash assistance, food stamps, or other services.

The DSS-2474 has been revised to:

- A. more clearly delineate who has initiated the referral and for what purpose; and
- B. emphasize the need for, and value of, districts providing a description of the alleged impairment(s), medical evidence, and supplemental documentation whenever a client is referred to file for SSI or RSDI based on disability.

The language in Section IV, Certification and Release Authorization, of the DSS-2474 has also been revised to explicitly authorize the release of documentation and medical information from the client's public assistance case record. This includes release of the information used to determine the client's employability status. The language makes it clear that authorizing release of this information is a condition of eligibility for public assistance.

The new language also provides explicit authority to release documentation and medical information from a client's medical assistance file (such as information gathered by the MA Disability

Review Team) unless the client draws a line through "and medical assistance" in Section IV of the form as stated in the release language. The revised language makes it clear that refusal to authorize release of information from the client's medical assistance case record will not affect the client's eligibility for medical assistance.

Except for the changes noted above, all current procedures for referring clients to SSA and processing the DSS-2474 remain in place.

When a person files for SSI and RSDI based on disability, the Office of Disability Determinations (ODD) must determine whether or not the person is disabled according to SSA standards. In order to gather the needed medical information, SSA and ODD secure the client's signature on a number of copies of the "SSA-827, Authorization for Source to Release Information to the Social Security Administration".

Receipt of a signed SSA-827 provides adequate authority to release both medical and non-medical information to SSA and ODD. Therefore, a district could face a situation in which the client does not authorize release of information from the client's Medicaid file on the DSS-2474, yet authorizes release of the same information on an SSA-827. In such situations, information can be released when the district receives the signed SSA-827.

III. PROGRAM IMPLICATIONS

It is advantageous to the public assistance (PA) applicant or recipient, and to the social services district, for essentially any client to receive SSI benefits. The client usually benefits from far more total household income, and the district benefits from lower PA expenditures and federal participation in the medical assistance (MA) expenditures of former HR recipients. Therefore, it is in the district's best interest to assist clients in documenting eligibility for SSI.

Most districts offer assistance to certain persons filing for SSI through their Disabled Client Assistance Program (DCAP). Referring appropriate clients to DCAP along with all available medical documentation, will assure that this documentation is incorporated into the client's SSI application.

When an individual files for SSI (and RSDI) based on disability, the Office of Disability Determinations (ODD) determines disability status on behalf of SSA. ODD evaluates all medical, vocational and educational data related to the individual's ability to work. The more complete this information is, the more quickly and effectively ODD can render a decision.

By describing the client's impairment(s), including its impact on the client's activities of daily living, and by appending all available relevant documentation to the DSS-2474, the local district will facilitate the disability determination process and potentially produce a higher SSI acceptance rate with the concomitant PA and MA savings.

IV. REQUIRED ACTION

Social services districts must use the DSS-2474 (revised 11/90) to refer public assistance applicants and recipients to SSA to file for SSI or RSDI or to appeal an adverse decision. A DSS-2474 signed by SSA and returned to the district is considered documentation that a client has filed for SSI or RSDI or appealed an adverse decision as required by Department Regulations.

Districts must fill out the DSS-2474 as completely as possible, attaching all available relevant information. The information to be attached should include, but not be limited to:

1. all medical documentation used in determining "unemployability" including information from treating physicians, employment related medical examinations (including medical information from medical contractors hired by a social services district) and hospital records;
2. other medical information, especially information used by the MA Disability Review Team to determine disability status;
3. any information about restrictions or limitations on daily activities or vocational abilities; and
4. any information on sources, facilities or institutions which have treated the client.

For children's cases, specific information, or reference to individuals or organizations such as teachers, special education staff, psychologists, or day care providers who can provide specific data on the daily activities of children, would be most helpful.

Any of this data not available at the time of the initial application and referral should be made available to ODD upon their request.

Please Note: As noted above in the Background Section of this Directive, medical information contained in the client's Medicaid files can be released unless the client draws a line through "and medical assistance" in Section IV. Certification and Release Authorization of the DSS-2474 (Revised 11/90). Districts are reminded that HR-related MA-Only applicants and recipients must comply with all MA-only requirements for disability determinations.

V. ADDITIONAL INFORMATION

Attachment B contains the instructions for completion of the DSS-2474 (revised 11/90).

An initial supply of 200 copies of the revised DSS-2474 will be forwarded to local districts under separate cover. Upon receipt of the revised DSS-2474, the previous version of this form must be discarded.

Additional copies of the revised DSS-2474 can be obtained through the regular procedure for ordering forms, that is, by filing out the DSS-876 and sending it to:

Forms and Publications
NYS DSS
40 North Pearl Street
Albany, NY 12243

VI. EFFECTIVE DATE

This release is effective September 1, 1991.

Oscar R. Best, Jr.
Deputy Commissioner
Division of Income Maintenance

Instructions for the Completion of the DSS-2474

Section I. Client Identification Information

This section must be completed by the agency initiating the referral. DSS Case Number and CIN should be included if available at the time of the referral.

Section II. Referral

This section must also be completed by the agency initiating the referral. The appropriate box indicating the purpose of the referral should be checked.

For DSS initiated referrals for SSI and RSDI based on disability, the nature of the client's impairment(s) should be described. All available documentation should be attached and its presence indicated by checking the appropriate box(es).

Section III. Certification of SSA Contact

This section should be completed by SSA when the DSS-2474 was initiated by a local district. When signed by SSA, this form becomes documentation that the client has taken the action necessary to comply with the requirement to file for and pursue SSI eligibility.

Section IV. Certification and Release Authorization

This section must always be signed by the client at the time the referral is initiated. If another person is acting on behalf of the client, that person's relationship to the client must be indicated.

As noted in Section II of this Directive and in the release language itself, the client has the option of deleting authorization to release information from the client's medical assistance case records by drawing a line through "and medical assistance" on the release.