

County Medical Services – CMS

What is DDA/CMS?

The Ohio Department of Job & Family Services Disability Determination Area (ODJFS DDA), formerly known as County Medical Services (CMS), makes Medicaid disability determinations. Hamilton County's Disability Determination, or CMS, unit assists Medicaid applicants in collecting and submitting all needed documents to the DDA, but is not involved in the actual disability determination. The DDA determines disability in accordance with SSA standards.

Who is eligible for CMS?

- An individual that has, alleges or appears to have a physical or mental impairment or blindness that limits his or her ability to work; **and**
- Has provided medical documentation that supports the disability claim; **and**
- Has applied for Social Security Disability (SSD) or Supplemental Security Income (SSI) or has appealed a negative SSD/SSI decision; **and**
- Meets all other eligibility criteria for Medicaid.

When do they apply for CMS?

At the initial or reapplication interview, the Eligibility Technician will refer the individual to the HCJFS CMS unit (2nd floor) for completion of a CMS packet. Some clients have a CMS packet completed on the same day of the interview. Others, who cannot stay for the completion of a CMS packet, are issued form *HCJFS 3183 – 7 Day Letter*, informing him or her to appear for the CMS packet interview within 7 calendar days of receipt of the letter. Clients are required to complete the CMS packet for a disability determination. The CMS packet interview may take up to one hour or longer. Clients who may need help with filing an SSI application are referred to our SSI-Case Management Unit for assistance.

We are where people come for help:

CMS Technicians help clients obtain Medicaid health insurance. The CMS Technicians assist Medicaid applicants by collecting and submitting all needed documents to ODJFS DDA. Social Service Agencies, such as HCJFS, are often the first place people turn to for help. HCJFS is charged with the responsibility of helping people in need by providing services to people who are uninsured,

homeless or need help because of unavoidable circumstances.

How do we help clients?

Upon request, CMS Technicians assist applicants by:

- Helping to obtain as much medical documentation as possible to support the disability or blindness claim.
- Issuing a limited amount of bus tokens to help with doctors appointments.
- Referring individuals with no medical records to agencies or clinics for examinations to determine whether a blindness or disability exists.

If DDA determines the individual to be disabled and Medicaid is approved, he or she may be eligible for \$115.00 monthly cash assistance. This helps to improve his or her quality of life.

Why do we have this program?

There is a national healthcare crisis that affects millions of uninsured Americans. Most of our clients fall into one or all of the following categories:

- Mentally or physically ill
- Unemployable
- Homeless
- Zero Income
- No doctor

How long may it take for a disability determination decision?

It may take anywhere from three to six months to make a disability determination. That's why it's important to provide copies of all medical records and/or the names of all medical providers who treated your disability. If your claim is approved, the County may backdate Medicaid eligibility for three (3) months prior to the Medicaid application date to cover any previous medical costs incurred during that time.