General Assistance Handbook 90-02.321: Medical Evaluation Appointments - Hayward Office

GENERAL ASSISTANCE MEDICAL EVALUATION APPOINTMENTS HAYWARD G.A. UNITS

I. GENERAL

All General Assistance applicants/recipients who indicate that they cannot work because of a physical or mental disability must verify the disability by submitting an Employability Statement as a requirement of General Assistance eligibility.

Effective January 29, 1993, two non-county medical evaluation clinics have been established to facilitate obtaining Employability Statements. The clinics are located in San Leandro and Oakland.

The following procedure covers the procedure to be used by the General Assistance units in the Hayward office to access whether an applicant/recipient should be referred to one of the clinics, and the referral process. This procedure is an implementation process and will be revised in the near future to include a Social Worker assessment process.

Three forms (90-88--Health Questionnaire, 90-84--Medical Appointment, and a Medical Evaluation Appointment Roster) have been designed to accommodate the assessment and referral process. II. CLIENT

A. Completes Health Questionnaire (form 90-88).

III. ELIGIBILITY WORKER

- A. Review his/her caseload for applicants/recipients who indicate on their application that they cannot work.
- B. Obtains a date/time for a medical evaluation appointment by reviewing the Medical Evaluation Appointment Roster located in the P520 unit. Completes the Roster by entering the applicant/recipient's name, Social Security Number, and Case Number, if available.
- C. Completes and mails/hand delivers applicants/recipients the following forms:
- 1. Health Questionnaire (form 90-88) to be completed and returned to the worker PRIOR to the medical evaluation appointment date. The Health Questionnaire should be accompanied with a "need letter" indicating the return date for the 90-88.
- 2. Medical Evaluation Appointment form (form 90-84) to advise the client of their appointment date, time and location. This letter should be produced in duplicate and a copy filed in the case folder on IVA. III. ELIGIBILITY WORKER cont.
- D. At least four days prior to the date of the medical evaluation appointment, submit the completed Health Questionnaire (form 90-88) and a copy of the Employability Statement (90-2) for each applicant/recipient scheduled for an appointment to Unit Clerk, P528, Gerald Mateo.
- E. Reschedules appointments/rescinds denials or discontinuances for applicants/recipients who have good cause for not keeping medical appointments. NOTE: If client is rescheduled prior to the actual appointment date, change roster, OR, if the Roster has already been forwarded to the medical clinic, notify P528 regarding the reschedule.
- F. Reviews annotated Rosters for all medical appointment dates. Denies/discontinues applicants/recipients who fail to comply with the medical evaluation appointment. Use Negative Action Code 069 for discontinuances AND Negative Action Code 110 (NEW) for denials.

IV. UNIT CLERK - P528

- A. Prepares Medical Evaluation Appointment Roster for each block of appointments and posts in unit.
- B. Collects Roster and Health Questionnaires and Employability Statements for each appointment date at least four days prior to the appointment date.
- C. Makes a copy of the Roster and retains in unit. Forwards original of Roster and all Health Questionnaires and Employability Statements to EAST BAY OCCUPATIONAL MEDICINE ASSOCIATES QIC CODE 42201, ATT: Linda Critelli, three days prior to the appointment date.
- D. Notifies Linda Critelli at 351-3553 of any rescheduled appointments made after the Roster is forwarded to East Bay Occupational Medicine Associates.
- E. Receives Rosters and copies of Employability Statements from East Bay Occupational Medicine Associates. Forwards Employability Statements to Eligibility Workers. Makes copy of Roster for P510 unit.

V. EAST BAY OCCUPATIONAL MEDICINE ASSOCIATES

- A. Receives copy of Roster and Health Questionnaires and Employability Statements for all applicants/recipients listed on Roster at least two days prior to the appointment date. Contacts Program Specialist, Marilyn Ghiorso, at 268-2188 if the Roster does not arrive by two days prior to the appointment date. B. Conducts medical evaluation.
- C. Completes Employability Statement (90-2).

V. EAST BAY OCCUPATIONAL MEDICINE ASSOCIATES cont.

D. Annotates "Kept Appointment" column of Roster with Yes or No.

E. Returns annotated Roster, completed Employability Statements and Health Questionnaires for all applicant/recipients who were seen by physician to Gerald Mateo, QIC Code 50301.

F. Submits monthly billing to:

Alameda County Social Services P.O. Box 12941

Oakland, CA 94604-2941

ATT: L100 DISTRIBUTION: J

Rodger G. Lum, Ph.D, Director

Social Services Agency