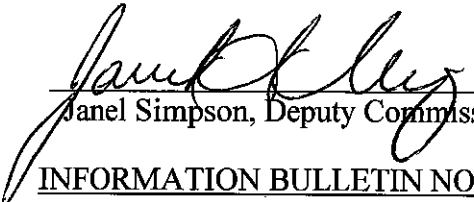


**STATE OF CONNECTICUT**  
 DEPARTMENT OF SOCIAL SERVICES  
**PROGRAM INFORMATION BULLETIN**



  
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 Janel Simpson, Deputy Commissioner

5/11/15  
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 Date

**INFORMATION BULLETIN NO:** 15-03

**PROGRAM:** SAGA Cash

**Subject:** Procedural Improvements and Changes.

<b>Overview</b>	This Program Information Bulletin (PIB) describes procedural improvements and changes developed for the State Administered General Assistance Program (SAGA-cash). These changes are the result of a joint effort made by Economic Security Unit Central Office, Field Office, and Colonial Cooperative Care (CCC) staff.
<b>SAGA Liaisons</b>	“SAGA Liaison” staff have been designated in each field office to be the program experts in these new procedures. As needed, please contact the field manager for your specified SAGA liaison.
<b>Revised client flow</b>	A new client flow chart has been created that depicts the latest revised procedures for handling the CCC referral process when an Unemployability/ Medical Disability/ or Emergency Medical decision is needed at either application or renewal. This revised client flow diagram has been placed in the worker tool kit under “SAGA.”
<b>Use of  McAfee Encrypted e-mail by CCC</b>	CCC will now begin to communicate directly with DSS field staff about client specific data through the use of secure encrypted e-mail. The CCC selected secure e-mail vendor is  McAfee. CCC e-mails received from this source may be accepted by department staff once retrieval instructions are followed.
<b>New CCC return envelopes</b>	Medical packet information needs to be returned to the department’s vendor, CCC. * To facilitate this, clients should be given only the newly designed return envelopes (printed in blue ink with the CCC logo in the upper right hand corner) for the return of medical information. This envelope will return medical information to a special CCC non-ConneCT queue at Scan Optics in Manchester via P.O. Box 2040. Any non-medical related information inadvertently sent to CCC will be redirected by CCC to DSS via secure e-mail sent to the SAGA liaison based on

<p><b>New CCC return envelopes (cont.)</b></p>	<p>client town of residence.</p> <p>Supplies of these new envelopes have been distributed to the SAGA liaisons in each office. The need for additional envelopes should be addressed to Marjorie Dwyer in the Central Office Economic Security Unit via e-mail from the SAGA liaison at least three (3) weeks in advance of depletion to ensure enough print and distribution time.</p> <p><b>*Please note:</b> CCC does not compile medical packet information for Emergency Medical cases. Staff should <u>not</u> use these new envelopes for the return of medical information on an Emergency Medical case. For Emergency Medical cases, DSS should continue to use existing procedures and regular return envelopes without the CCC logo.</p>
<p><b>New Daily and Weekly SAGA caseload reports</b></p>	<p><b>New Daily e-mail reports:</b>  CCC will now send daily e-mails to SAGA liaisons (with a copy to the supervisor) with the following information:</p> <ul style="list-style-type: none"> <li>--W-300s received by CCC verifying SAGA client length of disability; and</li> <li>--notification of client non-compliance due to non-receipt of medical documents for medical packet assembly cases.</li> </ul> <p><b>New Weekly e-mail reports:</b>  CCC will now send weekly e-mails to SAGA liaisons (with a copy to the supervisor) to communicate completed disability/unemployability/emergency medical determination results for the week.</p> <p><b>New Weekly Manager e-mail reports</b> will also be sent by CCC to designated DSS Field Managers and the Central Office Economic Security Unit summarizing the above two reports.</p>

**Expanded list of medical providers who can sign medical forms.**

In accordance with State statutes, the list of medical providers who can legally diagnose and treat certain medical conditions is being expanded for the SAGA cash assistance program. As a result, these providers can sign medical forms and statements regarding these conditions which can be accepted as medical verification by DSS. Most of these providers do not need a co-signature with the exception of a Licensed Master of Social Work (LMSW) whose statement regarding mental health disorders must be co-signed by of a supervising physician, APRN, psychologist, professional counselor, or LCSW (Licensed Clinical Social Worker\*).

**\*Please note:** a LMSW and a LCSW are not the same credential even though both are social work degrees that require a master's level component.

This newly expanded list of medical providers is attached to this PIB and will also be placed in the worker tool kit under "SAGA."

Disposition: Retain for future reference.  
Distribution: Eligibility Staff  
Responsible Unit: Economic Security Unit 860-424-5540

Date Issued: 5/22/2015

DJB

## Expanded List of Medical Providers Who Can Sign SAGA Cash Assistance Medical Forms.

The Department of Social Services (DSS) will now accept a signature on any medical review form submitted in the context of a SAGA cash case<sup>1</sup> from any licensed medical provider whose statutory scope of practice authorizes the provider to diagnose the medical condition for which the form is being completed. Under the Connecticut General Statutes, some licensed providers are free to practice, diagnose and treat on their own, while others must be supervised by another type of licensed provider. For those providers who are required to practice in a supervised setting, the signature of the supervising provider will also be required on all medical review forms. You should only accept a co-signature from a provider if the type of medical condition at issue is one that the supervising provider would be authorized to independently diagnose and treat.

Please consult the below chart to determine whether you should accept a provider's signature in any given case. If a particular provider type is not listed on this table, you should not accept a medical review form signed by a provider of that type. Also, if a particular provider offers an opinion on a medical review form concerning a condition he or she is not qualified to diagnose and treat, you should not accept the form. Remember, the provider (and any required co-signer) *must* be licensed in order for DSS to accept a medical review form he or she completes.

Licensure may be verified on the Department of Public Health's (DPH's) website at the following link by selecting the appropriate provider type and searching by name or license number: <https://www.elicense.ct.gov/Lookup/LicenseLookup.aspx>.

Provider type	Conditions provider may diagnose and treat	Co-signature Required?	Statutory authority
Advanced Practice Registered Nurse (APRN)	Any	NO	CGS § 20-87a
Chiropractor	Disorders <sup>2</sup> of the musculoskeletal system	NO	CGS § 20-28
Clinical Social Worker (LCSW)	Mental health disorders	NO	CGS § 20-195s
Dentist	Disorders of the oral cavity or its contents, or of the jaws or the associated structures of the jaws	NO	CGS § 20-123

<sup>1</sup> Medical review forms completed for the purpose of establishing disability in the context of an eligibility determination for Medicaid or the State Supplement for the Aged, Blind and Disabled still must be completed by a physician, psychologist, optometrist, podiatrist or speech-language pathologist.

<sup>2</sup> As used in this chart, the term "disorder" includes diseases and injuries.

<b>Provider type</b>	<b>Conditions provider may diagnose and treat</b>	<b>Co-signature Required?</b>	<b>Statutory authority</b>
Master Social Worker (LMSW)	Mental health disorders	YES – of a supervising physician, APRN, psychologist, professional counselor, or LCSW	CGS § 20-195s
Optometrist	Disorders of the eye	NO	CGS § 20-127
Physician - Doctor of Medicine (M.D.) or of Osteopathic Medicine (D.O.)	Any	NO	CGS § 20-9
Physician Assistant	Any	NO	CGS § 20-12d
Podiatrist	Disorders of the foot	NO	CGS § 20-54
Professional Counselor	Mental health disorders	NO	CGS § 20-195aa
Psychologist	Mental health disorders	NO	CGS § 20-187a
Speech & Language Pathologist	Disorders of speech, voice, or language, or of feeding, swallowing or other upper aerodigestive functions	NO	CGS § 20-408