

**Social Security Administration**  
**EM-97-171**  
**Continuing Disability Review (CDR) Assessment “Screen Outs”**

The welfare reform legislation required that childhood cases be reviewed once every three years or at the discretion of the Commissioner. The Commissioner has decided that all childhood cases will be reviewed within the next three years, even though there will be cases in which the diary will not have matured. Therefore, CO, per EM 97 - 171, advised the FOs not to screen out cases for CDR just because the diary had not matured. CO has clarified EM 97 - 171 to re-iterate the instruction in the last paragraph of Section II of EM 97-171 which says to screen out any childhood CDR selected 10/26/97 that has a fully developed DDS decision (initial, redet excluding modified, or CDR) within the last 12 months and the medical diary has not matured. Thus most cases with favorable decisions within the past 12 months should be screened out for a CDR at this time. Other cases with future diaries should receive a CDR, unless there are special circumstances involved, such as, the CDR would pose a hardship for the claimant. For guidance in such special circumstances, the FO should contact the state specialist in CDO in the regional office.

EM-98090 (FO Processing of CDR Mailer & Direct Release Case) Dated 4/29/98. PLEASE NOTE: EM-97-171, issued November 3, 1997, WAS OBSOLETE BY EM-98090

LANGUAGE FROM EM-98090 PLEASE NOTE BOLDED SECTION REGARDING children cases and future diaries.

II-B. Title XVI Children Cases With Future Diaries - We are under a legislative mandate to do CDRs on ALL nonpermanently disabled children under age 18 at least once every three years, and permanently impaired children at the Commissioner's discretion.

In addition, the legislation directs when we must do CDRs on some cases in which low birth weight is a contributing factor material to the disability determination.

Finally, the legislation requires that an individual eligible for SSI before age 18 because of disability is subject to review upon attaining 18 years. In these cases, the medical improvement review standard (MIRS) does not apply; instead the age 18 redetermination uses the disability evaluation process used for initial title XVI adult claims.

The legislative mandate requires that the usual screen out criteria (see II-C) be restricted in these cases.

The legislative mandate for disabled children, including age 18 redetermination cases, supersedes the maturation of the medical diary. Do not screen out disabled children, LBWs, and age 18 redeterminations just because the case has a future diary. Title XVI disabled children and age 18 redeterminations can be screened out only for 1 or more of the following reasons:

- o The case involves a HIV infection, and the claim was adjudicated in 1991 or later (see Section II-D for more detailed information).
- o The claim has been withdrawn, or a request to withdraw is pending.

o The beneficiary is (has been) in non-pay status (e.g., N01, N03, etc.) and is expected to remain in non-pay status for 12 months. Please see Section III of this document for more instructions on processing cases in non-pay or suspension status.

o There was a prior cessation and termination determination, but no action was taken to terminate.

o DDS ONLY: Other/Miscellaneous - In rare cases, the DDS, based on the medical evidence in file, can defer the CDR until the diary maturity date. For example, at the initial allowance the child had a "heart anomaly" that could be corrected at eighteen months. Deferring the CDR until that time would be acceptable. Depending on the time between deferral and the more appropriate review date, this case could be held in the DDS/FO (consistent with the deferral policy in POMS DI 28003.010), or closed out, including closing out on the CDRCF with a code #7 and "remarks" for reselection at a later date.

Close out conditions, when identified after the review has started, are treated as DDS "no decisions", and DDSs should follow the "no decision" instructions in DI 28030.001C, DI 32001.015, DI 32005.020 and DI 32010.005, but should return the cases to the FOs, who would determine when and where to ship the title XVI claim folder. In no decision situations, the DDS should provide an explanation for the basis of the return on the SSA-408 addressed to the FO. The DDS should also ensure that an appropriate annotation is made to the SSA-408 that preparation and release of a closeout notice is required.

Along with the CDRCF entries, the FO should prepare the standard close out notice, close out any other systems controls and refer the case to the servicing PC's DRS for diary annotation.

The 12 month rule - If you have a nonpermanent impairment case (not a low birth weight or age 18 redetermination case), then determine when the most recent prior decision was made. Screen out cases in which a fully developed DDS decision (initial claim, CDR, or childhood redetermination, but not a modified decision ) was made within the last twelve months and the medical diary has not matured and will not mature in the next 3 months. If both criteria are not met, do not screen out the title XVI child CDR on the basis of a future diary. However, as with the other legislatively mandated title XVI disabled child cases, you may screen out the case in accordance with the above guidelines.

If the case has a future diary, but neither the 12 month rule, nor any of the screen out criteria are present, continue to process it.

SECONDARY references:

Secondary References: P.L. 105-33 which now allows for a CDR later than 12 months of age for any low birth weight case. DI 25225.005B.2.b. & c.