



DEPARTMENT OF
HUMAN SERVICES

What You Need to Know About the State Medical Review Team (SMRT)

Agenda

At the end of this session, you should have a better understanding of the following:

- Who is SMRT?
- How is disability determined?
- What does the SMRT processes look like?
- How do you fit into the disability process?

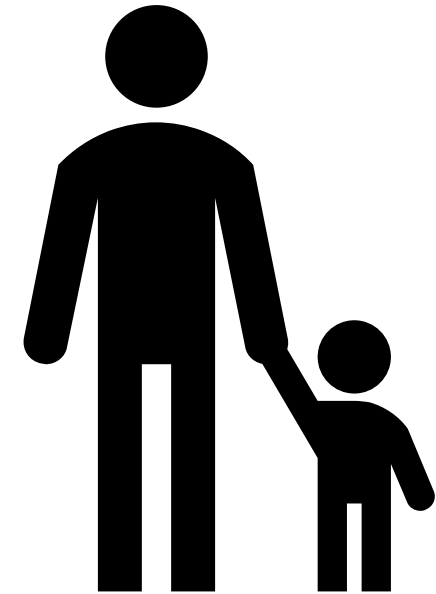
We are here to spread awareness and knowledge related to SMRT Processes.
We cannot speak for the Social Security Administration or on behalf of DHS Policy.

Who is SMRT?

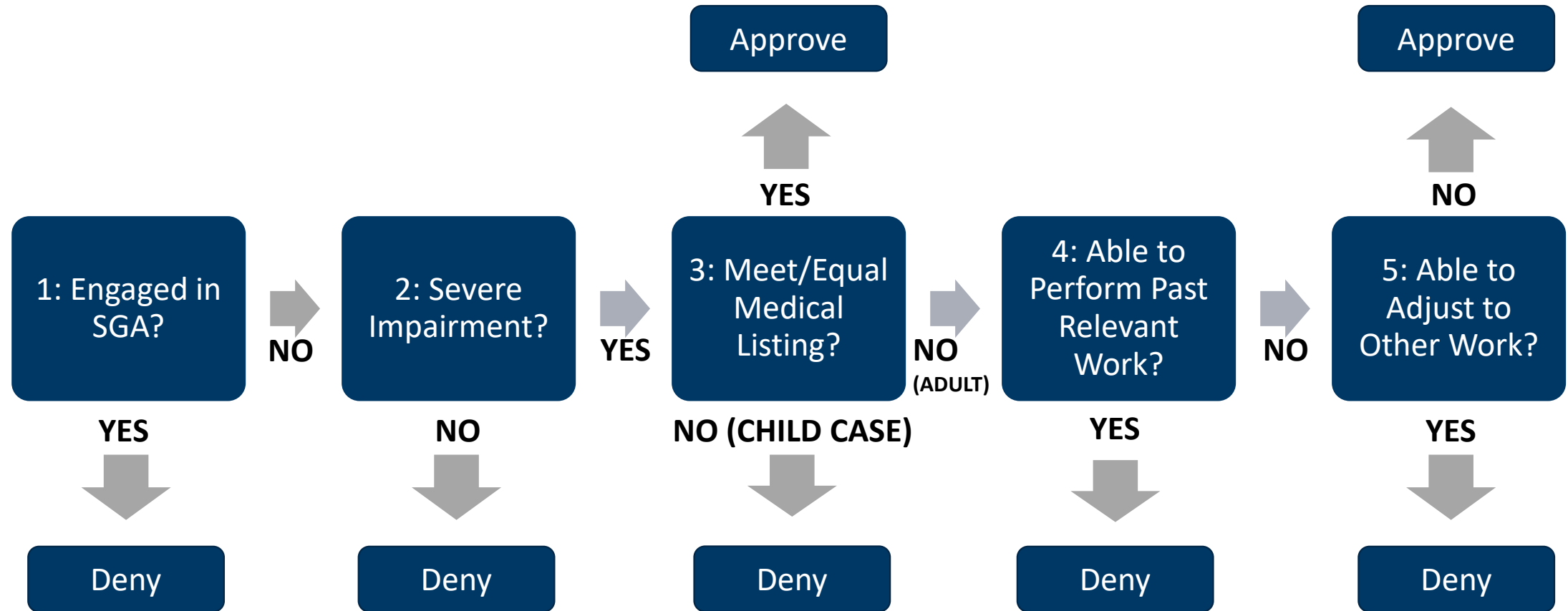
- Minnesota Department of Human Services – Healthcare Eligibility and Access.
- Group of professionals with specialized training and backgrounds who follow the Social Security Administration's criteria to determine disability for
 - people who apply for Medical Assistance (MA) and related programs – or-
 - people who need disability related services in other DHS programs –and-
 - Do not have a disability certification from SSA.
- SMRT exists parallel to the Social Security disability process, but a Social Security decision takes precedence over a SMRT decision.

Definition of disability

- Children: The child has a physical or mental condition (or combination of conditions) that very seriously limits their activities and has lasted or is expected to last 12 months or longer or result in death.
- Adults: Inability to engage in substantial gainful activity by reason of medically determinable impairment that has lasted or is expected to last 12 months or longer or result in death.



The 5-Step sequential evaluation process



Severe impairment

- The limitation must be due to a medically determinable impairment that is diagnosed by an **acceptable medical source**.

[Cite: 20 CFR § 416.902](#)

- The impairment must result in more than a minimal limitation in one's ability to work or perform daily activities.
- The impairment must last at least 12 months or result in death.
- There must be current medical evidence to show how a condition affects the person now.

Examples of acceptable medical sources

- Licensed physicians and licensed physician assistants (within licensed scope of practice)
- Licensed Advanced Practice Registered Nurses (APRN) (within their licensed scope of practice)
- Qualified speech-language pathologists (SLPs) for speech/language impairments
- Licensed psychologists (at independent practice level)
- School psychologist for intellectual/learning disabilities
- LPCCs and LICSWs are NOT considered acceptable medical sources
- For a full list, see [20 CFR § 416.902](#)



Medical listings

- Found on the Social Security Website, “[Blue Book](#)”
- Organized by body system
- Separate listings for children and adults
- Children must meet, equal, or functionally equal to be approved
 - Meet = condition matches all the medical criteria in the listing
 - Equal = condition may not match the exact criteria, but is medically as severe as a listed condition
 - Functionally equals = child is markedly limited in 2, or extremely limited in 1 of the 6 areas of functioning

Listing of impairments- child

100.00 Low Birth Weight and Failure to Thrive	101.00 Musculoskeletal System	102.00 Special Senses and Speech
103.00 Respiratory Disorders	104.00 Cardiovascular System	105.00 Digestive System
106.00 Genitourinary Disorders	107.00 Hematological Disorders	108.00 Skin Disorders
109.00 Endocrine Disorders	110.00 Congenital Disorders that Affect Multiple Body Systems	111.00 Neurological Disorders
112.00 Mental Disorders	113.00 Cancer (Malignant Neoplastic Diseases)	114.00 Immune System Disorders

Meeting a medical listing - example

114.07 Immune deficiency disorders excluding HIV infection

A. One or more of the following infections. The infection(s) must either be resistant to treatment or require hospitalization or intravenous treatment three or more times in a 12-month period

1. Sepsis; or
2. Meningitis; or
3. Pneumonia; or
4. Septic arthritis; or
5. Endocarditis; or
6. Sinusitis documented by appropriate medically acceptable imaging

OR

B. Stem cell transplantation. Consider under a disability until at least 12 months from the date of transplantation. Thereafter, evaluate any residual impairment(s) under the criteria for the affected body system.

Functional equivalence

Childhood Domains	Limitation Rating
1. Acquiring and Using Information	Extreme - 3 SD below mean, $<1/2$ chronological age, very seriously interferes
2. Attending and Completing Tasks	
3. Interacting and Relating with Others	Marked - 2 SD below mean, $1/2$ - $2/3$ chronological age, seriously interferes
4. Moving About and Manipulating Objects	
5. Caring for Self	Less Than Marked
6. Health and Physical Well Being	No Limitation

Steps 4 & 5 – adults only

- For adults, if they do not meet or equal a medical listing, they can still be certified disabled if their condition(s) prevents them from doing their past work and they are unable to adjust to any other work in the national economy.
- SSA rules acknowledge that it can become harder to adjust to new work as people age.
 - Under age 50—adjusting to new work is not usually seen as difficult.
 - Age 50+—age starts to matter more, becoming more important at 55 and again at 60.

Compassionate allowances

- The Compassionate Allowance List identifies conditions that both SMRT and Social Security can process faster.
- These conditions often meet the definition of disability with the diagnosis alone, such as:
 - Maple Syrup Urine Disease
 - Glutaric acidemia – Type II
 - Krabbe Disease
 - Mucopolysaccharidosis
 - Pompe Disease
 - Spinal Muscular Atrophy
 - Severe Combined Immunodeficiency

Expedited case referral criteria

SMRT expedites referrals under special circumstances. An expedited referral may be requested for:

- Individuals in a facility who cannot be discharged without home and community-based services, or long-term care supports in place; or
- Individuals experiencing life-threatening medical conditions requiring urgent access to treatment or prescription medication; or
- Individuals diagnosed with a condition listed on the Social Security Administration's [Compassionate Allowance List \(CAL\) \(POMS: DI 23022.080\)](#) and this condition is listed on the referral; or
- Children under the age of two (2) who have screened positive for a rare disease recognized by national medical registries or evidence-based standards.

Presumptive eligibility

Enrollees can be approved before all medical evidence is received if the application supports a diagnosis that would have a very high likelihood of certification (i.e., Down syndrome, metastatic cancer, ALS).

- SMRT must receive a signed authorization to release protected health information before a presumptive finding of disability can be made.
- Supportive evidence must be received within 6 months of the application, or the case can be denied.

Certification periods

The length of disability certification is based on the likelihood of medical improvement.

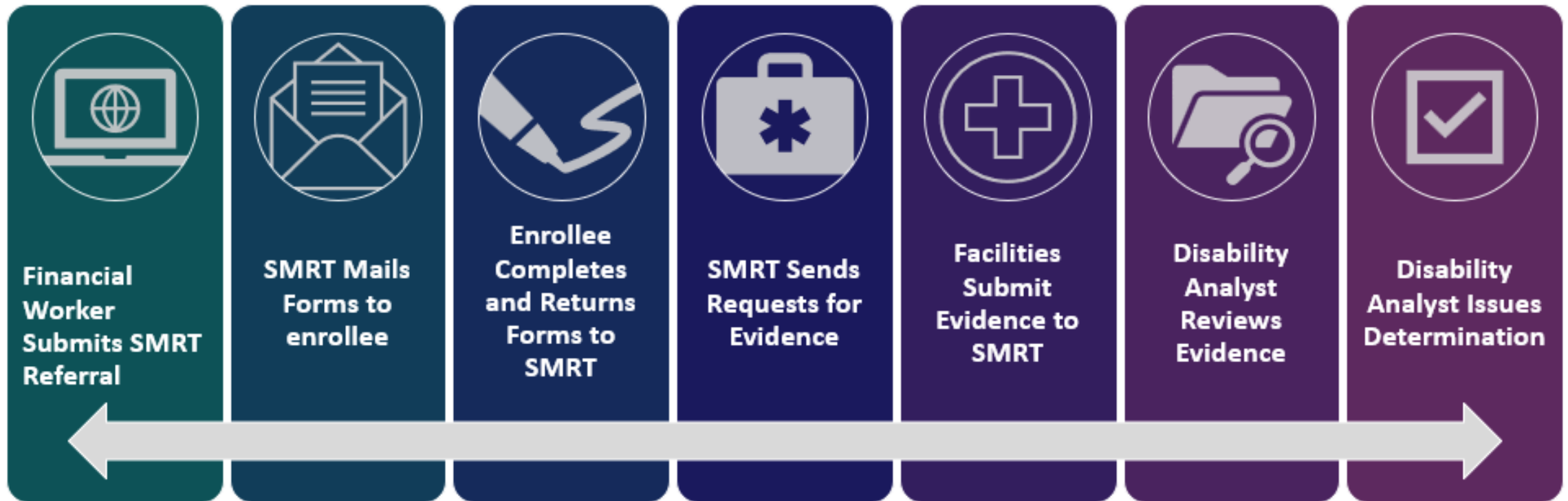
Years	Likelihood of Improvement	Examples
1 year	Medical Improvement Expected	<ul style="list-style-type: none">• Recent surgery or treatment with expected recovery• organ or stem cell transplants• low birth weight with no other complications
3 years	Medical Improvement Possible	<ul style="list-style-type: none">• Autoimmune disorders with fluctuating severity• Depression or anxiety
7 years	Medical Improvement Not Expected	<ul style="list-style-type: none">• Down Syndrome• Severe cerebral palsy• Spinal muscular atrophy

Per MN State Statute, TEFRA must be reviewed at least every 4 years.

SMRT Continuing Disability Reviews (CDRs)

- At the end of a SMRT certification period, the county requests a Continuing Disability Review if ongoing certification is needed.
- CDRs are reviewed under the Medical Improvement Review Standard, rather than the 5 step sequential evaluation.
- The previous certification remains in effect while the CDR is pending, even if the end date has passed.
- When a child turns 18, their certification ends and an **Age 18 Redetermination**. This is not a CDR and is handled as a new case.

The SMRT process



What can delay the process?

- Delays in referral submission by county or tribal agency
- Incorrect or missing information on the referral
- Delays in enrollees providing forms or other needed information
- Slow response to records requests
- Need for consultative exam due to insufficient medical evidence

MnCHOICES Assessments and SMRT

- To support timely and coordinated access to HCBS waivers, SMRT referrals must include a **MnCHOICES assessment date** or referral date for individuals not currently open to a waiver.
- SMRT may also review MnCHOICES for additional information, like details on functioning, ensuring level of care is met, or identifying other supports or medical sources.
- DHS has a current continuous improvement project underway to align MnCHOICES, MA disability eligibility, and SMRT processes—enhancing clarity, consistency, and equity in disability-related healthcare access regardless of the county in which the enrollee resides.

Why disability certification matters

- A disability certification from SMRT or Social Security can open doors:
 - Medical Assistance eligibility
 - Home and community supports (i.e. waivers, case management)
 - Vocational services
- Social Security (SSI/RSDI)
 - Provides monthly income, which can help with transportation, housing, food
 - “Protects” Social Security Benefit amounts in the future

Medical Assistance under disabled basis

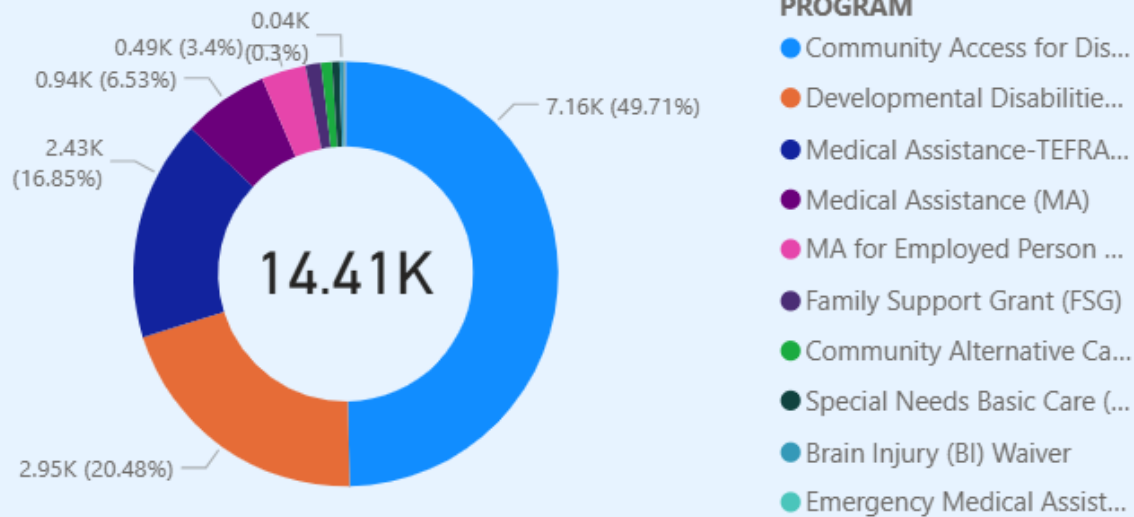
- Managed Care Exclusion – allows fee-for-service MA
- Special Needs Basic Care (SNBC) – tailored managed care for adults with disabilities
- Tax Equity Fiscal Responsibilities Act (TEFRA) – MA for children with disabilities whose families are over income guidelines;
 - SMRT must issue assessment level of care for TEFRA eligibility even if SSI-approved
- Medical Assistance for Employed Persons with Disabilities (MA-EPD)
- Medical Assistance with Spenddown – MA for people who are over income guidelines to qualify by paying part of their medical costs.

Other supports for people with disabilities

- Family Support Grants (FSG) – financial support for families of children with disabilities
- Home and Community Based Services
 - Brain Injury Waiver (BI)
 - Community Alternative Care Waiver (CAC)
 - Community Access for Disability Inclusion Waiver (CADI)
 - Developmental Disabilities Waiver (DD)
- Pooled Trusts – type of trust that helps people with disabilities keep their eligibility for MA or SSI even if they have income or assets above the limit.

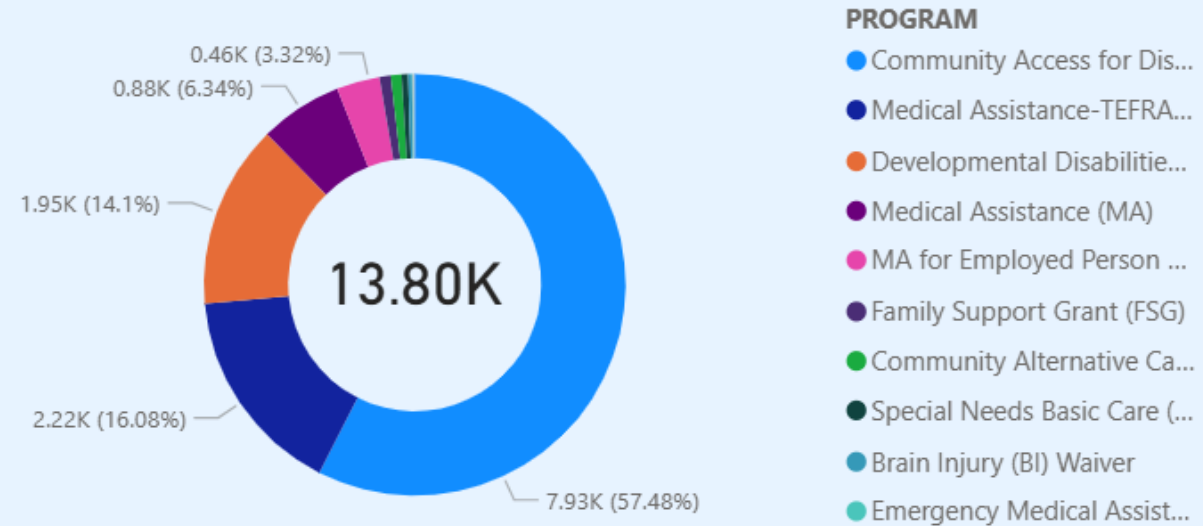
SMRT data

Referrals by Program



In State Fiscal Year 2024, SMRT received 14,410 referrals

Referrals by Program



In State Fiscal Year 2025, SMRT received 13,800 referrals

SMRT legislative updates

Minnesota 2025-2026 Legislative Session passed provisions requiring:

- Medicaid providers with electronic medical records to allow SMRT to utilize the records for more efficient disability determinations, and
- Medicaid providers to accept electronic/digital signatures for authorization to release medical records to SMRT for disability determinations.

And

SMRT Expedited Disability Determinations

- Establishes expedite criteria in State Statute – Previously only in EPM
- Requires the formation of SMRT Expedite Unit
- Required to have the ability to utilize an electronic form and signature transmission service

How you can help

- Encourage enrollees to respond to requests timely and follow their providers' recommendations.
- Use current forms from SMRT's official website: [The State Medical Review Team \(SMRT\) / Minnesota Department of Human Services \(mn.gov\)](#).
 - DHS-6124 SMRT Authorization to Release Protected Health Information is required on all SMRT referrals (New/CDR, Adult/Child)
 - Adult: 6125 (New Referrals) and 6125B (CDR Referrals)
 - Child: 6126 (New Referrals) and 6126B (CDR Referrals)
- Even if records are submitted, a signed authorization can prevent delays.
- Submit forms and/or records via the SMRT Document Portal.

What families should know

- SMRT and Social Security are 2 different agencies—SMRT reviews disability for people who don't have a Social Security disability determination, but need one to access healthcare or services.
- SMRT uses strict federal criteria from the Social Security Act—a diagnosis alone isn't enough. The child must have severe functional limitations.
- Financial workers from county or tribal agencies submit SMRT referrals on behalf of enrollees and are responsible for overall program eligibility.
- SMRT typically needs all records from the past year, including medical records, mental health therapy notes, and school documents like IEPs and evaluation reports.
- Even if a condition is lifelong, disability certification must be reviewed periodically (every 1-7 years).

What families can do

- Prevent delays by responding quickly to SMRT's requests for forms or information.
- If a child did not qualify for Social Security disability (SSI) because of income, they should apply when they turn 18 or if family income changes.
- The MN Disability Hub is a fantastic resource! disabilityhubmn.org

SMRT document portal

- The portal allows electronic document submission directly to SMRT's ISDS system.
- The portal site is form [8462 on edocs](#)
- SMRT is working with DocuSign to create electronic versions of our forms that can be completed and signed from any mobile device or computer!



SMRT ISDS training & access

- SMRT hosts monthly training sessions for direct county or tribal employees who submit or need to monitor status of SMRT referrals in SMRT's ISDS case management system.
- A “Read Only Role” is available for staff with a need-to-know basis who are actively and routinely involved in SMRT cases.
Note: contracted staff and community partners are not eligible.
- New users must attend one ISDS training before gaining access and repeat the training every 2 years.
- Register for this training on TrainLink in the Health Care Learning Center by searching for “SMRT301” in the course catalog.

SMRT FAQ – documentation and referrals

Can any worker (direct county employee and contracted) submit supporting documentation to SMRT?

- Yes! As soon as you have confirmed that a referral is pending in ISDS, you can submit any supporting documentation you have – SMRT forms, guardianship paperwork, medical records, school records, etc.
- Link to SMRT Document Portal: <https://edocs.mn.gov/forms/DHS-8462-ENG>

Can a social worker initiate the SMRT process for an enrollee?

- Only Financial Workers can submit SMRT referrals in ISDS. This is because the Financial Workers are responsible for determining program eligibility, and a SMRT determination is just one piece of eligibility.
- One frequent area of confusion for social services workers is the delay between when they request that a SMRT referral be submitted and when the Financial Worker submits the referral in ISDS.

SMRT FAQ – checking status

Does the social worker receive updates on the status of the SMRT determination?

- SMRT faxes a copy of the decision letter to the county Financial Worker and mails a copy to the primary address on file for the enrollee as well as their authorized representative. We also case note all decisions in MAXIS or METS.
- All county and tribal workers who routinely request or submit SMRT referrals for their enrollees can obtain access to SMRT's ISDS Case Management System to monitor the status of their referrals.
- To date more than 2,000 county workers have completed SMRT's ISDS User Training and can assist with status checks for enrollees and advocates.

State Medical Review Team

State Medical Review Team (SMRT)

PO Box 64248

St. Paul, MN 55164-0248

Phone: 651-431-2493 or 800-235-7396

Fax: 651-431-7457 or 800-311-3137

Visit the [SMRT Website](#) for links to our forms
and more information



Additional resources

Social Security Administration

1-800-772-1213

www.ssa.gov

Disability Hub MN

866-333-2466

disabilityhubmn.org

Questions?



Thank you!

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