

Date: _____

The South Carolina Vocational Rehabilitation Department (SCVRD) – Disability Determination Services State Claims Office assists with processing SC Department of Health and Human Services (DHHS) Medicaid disability claims. SCVRD also contacts medical treatment sources where you have been seen and requests copies of your medical records.

- **Please complete the enclosed two forms:**
 - **Disability Report**
 - **Authorization to Disclose Health Information (Form 921)**
- **Please answer every question and return all the pages of these forms.**
- **Mark as “N/A” if a question does not apply to you.**

If there is a legally appointed representative or power of attorney documentation, please include a copy with your completed and signed application.

Mail To:

SCDHHS - Central Mail
PO Box 100101
Columbia SC 29202-3101

An addressed envelope is included for your convenience.

IMPORTANT: If you have not applied for Social Security Disability Benefits or Supplemental Security Income Benefits (SSI) within the last 12 months, be sure to apply online (socialsecurity.gov), at the Social Security office, or by phone as soon as possible.

If you have questions about completing this form, please call the
Healthy Connections Member Services Center toll free at:
(888) 549-0820 (TTY 888-842-3620)

If you do not return the completed Medicaid Application, Disability Report, and the Authorization to Disclose Health Information form, we cannot determine your disability or Medicaid eligibility.

Notice of Non-Discrimination

The South Carolina Department of Health and Human Services (SCDHHS) complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. SCDHHS does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

SCDHHS provides free aids and services to people with disabilities, such as qualified sign language interpreters and written information in other formats (large print, braille, audio, accessible electronic formats, other formats). We provide free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages. If you need these services, please contact the Americans with Disabilities Act (ADA)/Civil Rights Official by mail at: PO Box 8206, Columbia, SC 29202-8206, by phone at: 1-888-549-0820 (TTY: 1-888-842-3620), or by email at: civilrights@scdhhs.gov.

If you believe SCDHHS has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with the Civil Rights Official using the contact information provided above. You can file a grievance in person, by mail, or via email. If you need help filing a grievance, we are available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf> or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue, SW, Room 509F, HHH Building, Washington, D.C. 20201 or by phone at: 800-368- 1019, 800-537-7697 (TDD). Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>

