

Medicaid Disability Manual

1. One of the organs/body systems involved to at least a moderate level of severity; and
2. At least two of the constitutional symptoms or signs (severe fatigue, fever, malaise, or involuntary weight loss).

OR

B. Repeated manifestations of SLE, with at least two of the constitutional symptoms or signs (severe fatigue, fever, malaise, or involuntary weight loss) and one of the following at the marked level:

1. Limitation of activities of daily living.
2. Limitation in maintaining social functioning.
3. Limitation in completing tasks in a timely manner due to deficiencies in concentration, persistence, or pace.

14.03 Systemic vasculitis. As described in 14.00D2. With:

A. Involvement of two or more organs/body systems, with:

1. One of the organs/body systems involved to at least a moderate level of severity; and
2. At least two of the constitutional symptoms or signs (severe fatigue, fever, malaise, or involuntary weight loss).

OR

B. Repeated manifestations of systemic vasculitis, with at least two of the constitutional symptoms or signs (severe fatigue, fever, malaise, or involuntary weight loss) and one of the following at the marked level:

1. Limitation of activities of daily living.
2. Limitation in maintaining social functioning.
3. Limitation in completing tasks in a timely manner due to deficiencies in concentration, persistence, or pace.

14.04 Systemic sclerosis (scleroderma) As described in 14.00D3. With:

A. Involvement of two or more organs/body systems, with:

1. One of the organs/body systems involved to at least a moderate level of severity; and
2. At least two of the constitutional symptoms or signs (severe fatigue, fever, malaise, or involuntary weight loss).

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OR

B. With one of the following:

1. Toe contractures or fixed deformity of one or both feet and medical documentation of at least *one* of the following:

a. A documented medical need (see 14.00C6) for a walker, bilateral canes, or bilateral crutches (see [1.00C6d](#)) or a wheeled and seated mobility device involving the use of both hands (see [1.00C6e\(i\)](#)); or

b. An inability to use *one* upper extremity to independently initiate, sustain, and complete work-related activities involving fine and gross movements (see 14.00C7), and a documented medical need (see 14.00C6) for a one-handed, hand-held assistive device that requires the use of the other upper extremity (see [1.00C6d](#)) or a wheeled and seated mobility device involving the use of one hand (see [1.00C6e\(ii\)](#)); or

2. Finger contractures or fixed deformity in both hands and medical documentation of an inability to use *both* upper extremities to the extent that neither can be used to independently initiate, sustain, and complete work-related activities involving fine and gross movements (see 14.00C7); or

3. Atrophy with irreversible damage in one or both lower extremities and medical documentation of at least *one* of the following:

a. A documented medical need (see 14.00C6) for a walker, bilateral canes, or bilateral crutches (see [1.00C6d](#)) or a wheeled and seated mobility device involving the use of both hands (see [1.00C6e\(i\)](#)); or

b. An inability to use *one* upper extremity to independently initiate, sustain, and complete work-related activities involving fine and gross movements (see 14.00C7), and a documented medical need (see 14.00C6) for a one-handed, hand-held assistive device (see [1.00C6d](#)) that requires the use of the other upper extremity or a wheeled and seated mobility device involving the use of one hand (see [1.00C6e\(ii\)](#)); or

4. Atrophy with irreversible damage in *both* upper extremities and medical documentation of an inability to use *both* upper extremities to the extent that neither can be used to independently initiate, sustain, and complete work-related activities involving fine and gross movements (see 14.00C7);

OR

C. Raynaud's phenomenon, characterized by:

1. Gangrene involving at least two extremities; or

2. Ischemia with ulcerations of toes or fingers and medical documentation of at least *one* of the following:

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a. A documented medical need (see 14.00C6) for a walker, bilateral canes, or bilateral crutches(see [1.00C6d](#)) or a wheeled and seated mobility device involving the use of both hands (see [1.00C6e\(i\)](#)); or

b. An inability to use *one* upper extremity to independently initiate, sustain, and complete work-related activities involving fine and gross movements (see 14.00C7), and a documented medical need (see 14.00C6) for a one-handed, hand-held assistive device (see [1.00C6d](#)) that requires the use of the other upper extremity or a wheeled and seated mobility device involving the use of one hand (see [1.00C6e\(ii\)](#)); or

c. An inability to use *both* upper extremities to the extent that neither can be used to independently initiate, sustain, and complete work-related activities involving fine and gross movements (see 14.00C7); or

OR

D. Repeated manifestations of systemic sclerosis (scleroderma), with at least two of the constitutional symptoms or signs (severe fatigue, fever, malaise, or involuntary weight loss) and one of the following at the marked level:

1. Limitation of activities of daily living.
2. Limitation in maintaining social functioning.
3. Limitation in completing tasks in a timely manner due to deficiencies in concentration, persistence, or pace.

14.05 Polymyositis and dermatomyositis. As described in 14.00D4. With:

A. Proximal limb-girdle (pelvic or shoulder) muscle weakness and medical documentation of at least *one* of the following:

1. A documented medical need (see 14.00C6) for a walker, bilateral canes, or bilateral crutches (see [1.00C6d](#)) or a wheeled and seated mobility device involving the use of both hands (see [1.00C6e\(i\)](#)); or
2. An inability to use *one* upper extremity to independently initiate, sustain, and complete work-related activities involving fine and gross movements (see 14.00C7), and a documented medical need (see 14.00C6) for a one-handed, hand-held assistive device (see [1.00C6d](#)) that requires the use of the other upper extremity or a wheeled and seated mobility device involving the use of one hand (see [1.00C6e\(ii\)](#)); or
3. An inability to use *both* upper extremities to the extent that neither can be used to independently initiate, sustain, and complete work-related activities involving fine and gross movements (see 14.00C7); or

OR