CHANGE NOTICE FOR MANUAL NO. 14-02, Re-Enrollments

DATE: JANUARY 22, 2002

Manual: Family and Children's Medicaid

Change No: 14-02

To: County Directors of Social Services

Effective: February 1, 2002

I. BACKGROUND

The Centers for Medicare and Medicaid Services (CMS) issued guidance to ensure that eligible families continue to receive Medicaid benefits. In a State Medicaid Director letter to all states dated April 7, 2000, CMS clarified federal requirements to process reenrollment for ongoing Medicaid eligibility. Included in the clarification was when to use information that is already available to the state during the re-enrollment process.

II. MAJOR CHANGES TO MA-3310, RE-ENROLLMENT

- A. Outlines verification requirements at re-enrollment. The counties are required only to reverify eligibility factors that are subject to change.
- B. Reinforces not to terminate Medicaid until ineligibility has been determined for each individual in the case. Included are instructions to evaluate for Medicaid in all Medicaid categories, including MPW and MAABD, and NC Health Choice at reenrollment.
- C. Outlines procedures for processing MAF mail-in re-enrollments. A new MAF reenrollment cover letter (DMA-5077) was added.
- D. Procedures for telephone interviews were updated.
- E. Currently, the state mails postcards to MIC and NCHC families to remind them to return their re-enrollment forms. These postcards are mailed 25 days after the mailing of the re-enrollment forms. Beginning February, the postcards will be mailed 10 calendar days prior to the mailing of the re-enrollment forms.
- F. The term re-enrollment replaces the term redeterminations and reviews.
- G. The section on collateral contacts was deleted.

III. EFFECTIVE DATE

Apply to re-enrollments scheduled on or after February 1, 2002.

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IV. MAINTENANCE OF MANUAL

- A. Remove MA-3310.
- B. Insert <u>MA-3310</u>.
- C. Insert Figure 1, DMA-5077.

Please refer questions to your Medicaid Program Representative.

Nina M. Yeager Director

[This policy was researched and written by Dora Boissy, Policy Consultant, Medicaid Eligibility Unit.]