

---

---

**MAGI RECERTIFICATION**

---

---

**REVISED 12/05/18 – CHANGE NO. 06-18**

**I. The continuing eligibility of MAGI Medicaid beneficiaries must be determined prior to the end of the certification period.**

**II. Begin the recertification process at the beginning of the 10th month of the current 12-month certification period or 2 months prior to last month of the MPW certification period.**

**III. Ex-parte process means determining eligibility based on available records, prior to contacting or requesting information from the client.**

**A. All recertifications must be completed using electronic data sources and available agency records first to determine continued eligibility.**

**B. The caseworker is required to:**

1. Conduct all OVS and other electronic matches
2. Check other available program records– FNS, WFFA, etc.
3. Contact beneficiary only if continuing eligibility cannot be determined by the available information

**IV. Continued Ongoing Eligibility Determined**

When ongoing eligibility can be determined using available information and there is no indication of a change, authorize the case and send appropriate notice to the beneficiary.

**V. Continued Ongoing Eligibility Not Determined**

When continued eligibility cannot be determined or eligibility will change to a lesser benefit or terminate:

**A. Send the NCFAS-20020, Medical Assistance Renewal Notice**

1. The NCFAS-20020 is a prepopulated renewal form for the beneficiary to validate that current information remains the same or indicate changes and provide self-attestation of eligibility requirements, including income.
2. Allow the beneficiary 30 calendar days to return the NCFAS-20020. Aggressive processing is encouraged throughout the entire ex-parte recertification process.

3. The [DMA-5097, Request for Information](#), may be issued with the NCFAST-20020 when it is known what information/verification is needed, allowing the 30 days for return.
4. The [DSS 8113, Wage Verification Form](#) may be sent to the employer when it is known that the information is not available to the local agency at the same time a NCFAST-20020 is sent.

**B. Requested information may be provided by:**

1. Telephone
2. Mail
3. In person
4. Electronic/fax

**C. Once the needed information/verification is received:**

1. Complete the recertification, or
2. If additional information is required, issue a [DMA-5097, Request for Information](#), allowing the beneficiary 12 calendar days to return the information.

**D. If the beneficiary no longer meets the eligibility criteria under the current program category, evaluate eligibility in all other Medicaid/ NCHC programs, including medically needy.**

**E. If the beneficiary is eligible for NC Health Choice, do not re-enroll the case when a fee is required.**

1. Send [DMA-5059, NCHC Enrollment Fee Notice](#), instructing the beneficiary to pay the fee within 12 calendar days of the date of the notice.
2. If the fee is paid, re-enroll for ongoing NC Health Choice eligibility.
3. If the fee is not paid within 12 calendar days, do not update the certification period. Send a timely notice proposing termination.
4. If the fee is paid and the case terminated because the 12th calendar day falls after “pull check” refer to reopen procedures.
5. If a MIC child is being added to an active NCHC case during the NCHC certification period, do not charge an enrollment fee for the child being added. Refer to [MA-3306, Household Composition](#).

## **VI. RECERTIFICATION NOT COMPLETED TIMELY**

If the recertification is not completed by the end of the certification period, extend the certification one month at a time to allow for timely notice requirements.

- A. Do not authorize case for an additional month if the case is in deductible status at the end of the certification period.**
- B. If the redetermination is completed after extending the certification period for a month and case remains eligible, use the one-month certification period as the first month of the new certification period.**
  - 1. Use the electronic match sources from the original certification period if the beneficiary remains eligible, or
  - 2. If the electronic match sources from the original certification period makes the beneficiary ineligible, use the most current electronic match sources to determine eligibility.
- C. A one-month certification period must be authorized in NC Fast if the agency fails to completed the redetermination prior to end of certification period and/or fails to send timely notice allowing termination to be keyed prior to pull-check in the last month of the certification period.**

## **VII. INFORMATION NOT RECEIVED**

If the NCFAST-20020 or information needed is not returned or provided at the end of the 30 days, send a timely notice to terminate the case.

## **VIII. REOPEN TERMINATED CASE**

If a beneficiary provides the NCFAST- 20020 and/or the necessary information for recertification within 90 calendar days from termination effective date:

- Determine eligibility as if the information was received timely, from the first day of the month following the termination date.