

**CHANGE NOTICE FOR MANUAL NO. 08-18,
EVALUATING LOCAL AGENCY/ DDS PERFORMANCES, &
APPLICATION PROCESSING-CORRECTIVE ACTION
PROCEDURES**

DATE: December 5, 2018

Manual: Aged, Blind, and Disabled Medicaid

Change No: 08-18

To: County Directors of Social Services

I. BACKGROUND AND CONTENT OF CHANGE

The Division of Health Benefits (DHB) has revised and/or updated Medicaid policy in order to provide clarity and/or corrections to previously published policy. These revisions are spelled out in section II below.

II. POLICY UPDATE

Policy references to the Eligibility System (EIS) have been removed and updated with the appropriate NC FAST language. The following policies have been updated:

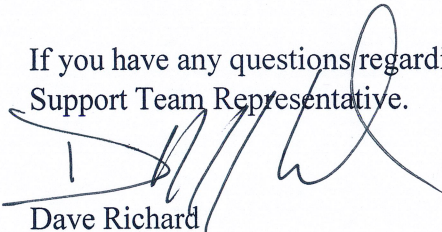
A. MA-2305, Evaluating Local Agency/ DDS Performances

B. MA-2306, Application Processing-Corrective Action Procedures

III. EFFECTIVE DATE AND IMPLEMENTATION

These policies are effective for any applications and/or recertifications initiated on/or in process December 10, 2018.

If you have any questions regarding information in this letter, please contact your Operational Support Team Representative.


Dave Richard
Deputy Secretary, NC Medicaid