

**DHB ADMINISTRATIVE LETTER NO: 02-24,
DSS-8110 NOTICE OF MODIFICATION,
TERMINATION, OR CONTINUATION OF
PUBLIC ASSISTANCE NOTICE
PROCEDURES
UPDATED DSS-8110 DESK REFERENCE
TOOL**

DATE: March 7, 2024

SUBJECT: **DSS-8110 Notice of Modification, Termination, or
Continuation of Public Assistance Notice Procedures
Updated DSS-8110 Desk Reference Tool**

DISTRIBUTION: **County Departments of Social Services
Medicaid Supervisors
Medicaid Eligibility Staff**

I. BACKGROUND

The Division of Health Benefits (DHB) is providing the following updated guidance and clarification of policy concerning the DSS-8110 notification requirements for Medicaid. Current guidance from the (DHB) Family and Children’s Medicaid and Adult Medicaid manuals advises caseworkers to generate and send a DSS-8110 notice in NC FAST. However, DHB is aware there are situations when the correct reason and outcome is not available in NC FAST and a manual DSS-8110 must be generated outside of NC FAST.

This Administrative Letter 02-24 is to provide guidance for a temporary solution to the situations specified.

II. CONTENT OF CHANGE

If a DSS-8110 is available in NC FAST with the appropriate reason and outcome, it must be generated in NC FAST. If the correct reason and/or outcome is not available in NC FAST, refer to the following list and follow the guidance provided in the [DSS-8110 Desk Reference Tool](#) to generate DSS-8110 notices outside of NC FAST. **All notices generated outside of NC FAST must be uploaded to NC FAST the same day that the form is generated and mailed. Failure to upload the 8110 will result in an audit finding for the local agency.**

A. APPROVED REASONS FOR MANUAL DSS-8110 OUTSIDE OF NC FAST

1. No valid Citizenship/Immigration Status
2. Change to PACE/CAP/LTC from PLA
3. Change from full Medicaid to Medically Needy with Spend Down
4. Change from full Medicaid to CAP with Spend Down
5. Change from MAF-C/MIC to MAF-D
6. Change from MAF-D to MQB product
7. Change from Medicaid Expansion (MXP) to MQB

B. Program Change between MAGI and Non-MAGI

New guidance from the DHB advises that when there is a program change from an equal or greater benefit, an Adequate DSS-8110 notification should be sent. Case workers should no longer send a DHB-5002/DHB-5003.

EXAMPLE: MXP to MAD send a DSS-8110 that states full Medicaid continues. Do not generate and mail the DHB-5002 notification letter.

C. 90-Day Reopen Adequate DSS-8110 Process

When a case is terminated with timely notice for failure to provide, and the information is provided during the 90-day reopen period, the new DSS-8110 is always an ADEQUATE notice (individual(s) already received a timely notice for failure to provide).

D. Beneficiary Deceased DSS-8110 Process

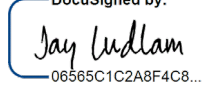
Beneficiary Deceased and benefits will be ended in the past. If the worker accepts the changed decision the same day they enter the date of death, they are able to generate the DSS-8110 on the case with the reason and outcome and the beneficiary will be on the notice. If the worker waits until the month after they have accepted the changed decision to generate the 8110, the individual will not show on the 8110, and the worker will need to generate the DSS-8110 from the Medicaid online forms library, with the appropriate reason listed in the [DSS-8110 Desk Reference Tool](#).

The DHB-DSS 8110 Desk Reference Tool, posted in [MA-2420, Notice and Hearings Process](#) and [MA-3430, Notice and Hearings Process](#), has been updated to reflect the temporary guidance.

III. IMPLEMENTATION

Guidance and policy provided in DHB Administrative Letter is effective upon receipt.

If you have any questions regarding this information, please contact your [Medicaid Operational Support Team representative](#).

DocuSigned by:


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Jay Ludlam
Deputy Secretary, NC Medicaid