CHANGE NOTICE FOR MANUAL NO. 03-20
COMMUNITY ALTERNATIVES PROGRAM (CAP)

DATE: JULY 1, 2020

Manual: Aged, Blind, and Disabled Medicaid
Change No: 03-20
To: County Directors of Social Services

I. BACKGROUND AND CONTENT OF CHANGE

The Division of Health Benefits (DHB) has updated Medicaid Policy to provide procedures and clarity in MA-2280, Community Alternatives Program. The policy revision is defined in the following section.

II. POLICY UPDATE

MA-2280. VIII. B. Termination of CAP Services

Policy is updated to provide clarification regarding the receipt of the DHB-2193 when CAP services terminate and when to send a timely notice versus an adequate notice.

A. The CAP Lead Agency will notify the local agency that CAP is to be terminated by sending the DHB-2193, Memorandum of CAP Waiver Enrollment form.

B. When CAP services are terminating and the beneficiary remains eligible for Medicaid, an adequate DSS-8110, Notice of Modification, Termination, or Continuation of Public Assistance must be sent.

C. When CAP services terminates and results in ineligibility for Medicaid or results in a Medicaid deductible, a timely DSS-8110, Notice of Modification, Termination, or Continuation of Public Assistance must be sent.

During the COVID Emergency, do not terminate Medicaid benefits or place the applicant/beneficiary in deductible status.

III. EFFECTIVE DATE AND IMPLEMENTATION

The local agencies will continue to follow the procedures in the DHB Administrative Letter 01-20: Medicaid/NCHC Procedures for COVID-19 and Addendum 1 letters. The local agencies will not react to changes in circumstance that will result in any reduction or termination of benefits. Except as noted above in II. C., this change is effective July 1, 2020.
If you have any questions regarding information in this letter, please contact your Medicaid Operational Support Team Representative.

Dave Richard
Deputy Secretary, NC Medicaid