Current Change Notice: 09-23

- Section II., Policy Principle:
  - Clarifies applicants/beneficiaries’ (a/b) to provide one (1) proof of state residency. This includes the revision of DHB-5097, Request for Information form which that the language Please note: You may need to provide up to two forms of verification for Proof of State Residency was removed.
  - Obsolete the DMA-5153, North Carolina Residency Applicant Declaration form and removed from the online form library. This form is no longer required due to the applicant is only required to provide one (1) proof of residence.
  - Moved Temporary Absence section from section III. to II. This provides instructions to the caseworker before denying or terminating an a/b Medicaid eligibility when temporarily absent. Also included, the beneficiary may be temporarily absent but returning to NC in less than 12 months.
  - Added Moved to Another State section to provide instructions for the caseworker.

- Section IV. Residency Verification add:
  - Added a Homeless section pertaining to the local agency may accept self-attest from the a/b when they declare homeless.
  - A written declaration from a person who has a social, family, or economic relationship with the applicant and who has personal knowledge of the applicant's intent to live in North Carolina permanently may be accepted as proof of state residency. Obsolete DMA-5152 and revised to DHB-5152, North Carolina Residency Declaration.
  - Updated language pertaining to the local agency may deny eligibility on the 45th/90th day if there is substantial evidence showing that the documentation is false.

- Section V. Individual Moving to NC was Previously Eligible in Another State
  - Request verification from the other state or send a DHB-5097 to the applicant to provide proof that the Medicaid eligibility in the other state was terminated. The caseworker may verbally contact the other state agency to verify Medicaid eligibility. The caseworker must document in the NC FAST the contact person’s name, title, and phone number.
  - Provide clarification and instructions when the applicant becomes eligible for NC Medicaid.

I. RESIDENCY REQUIREMENT

To receive Medicaid in North Carolina (NC), an applicant/beneficiary (a/b) must be a North Carolina resident and meet financial and non-financial requirements. This section outlines the specific requirements and how state residence is verified. In order to meet NC Medicaid residency requirements, an individual must:

A. Be physically present in NC and have the intent to reside here, or
Intent to reside does not mean:

1. An intent to stay permanently or indefinitely in the state,
2. Nor does it require an intent to reside at a fixed address.

**B. Have entered the state with a job commitment, or**

**C. Be seeking employment in NC.**

**II. POLICY PRINCIPLES**

**A. An applicant is required to provide one proof of NC residency.**

1. Residency must be verified for all Medicaid applicants.
2. Residency shall not be verified during recertification.
   - If there is a reason to believe a change in residency may have occurred, the caseworker may re-verify the address.
3. Review existing agency records, electronic sources, and Online Verification System (OVS) in NC FAST to verify the same address on the application before asking for verification.
4. There is no minimum requirement for the length of time an applicant must be physically present in NC.

**B. Temporary Absence**

1. **Beneficiary:**
   
   The caseworker may not deny or terminate the beneficiary’s Medicaid eligibility when the beneficiary is temporarily absent from NC and intends to return to the state in less than 12 months. The caseworker must document in NC FAST.

   During recertification, if there is a reason to believe a change in residency may have occurred, the caseworker may re-verify the address.

   Example: At recertification, the caseworker reviewed the case, the beneficiary reported temporary absence and there were no other notes that the beneficiary returned to NC. The caseworker will re-verify the address.

2. **Applicant:**
The caseworker may not deny an application when an applicant who is temporarily absent from NC and claims to be a resident of NC. The applicant must verify residency before they can be considered temporarily absent for Medicaid purposes.

An applicant who is relocating to NC must establish NC state residency by the processing deadline. If NC residence is not established by the processing deadline, the application should be denied. Refer to V. below.

Example: The applicant is pregnant and applying for NC Medicaid. However, is temporarily located in Virginia and intends to return to NC, as a resident of NC. The applicant must verify NC residence to be determined eligible for NC Medicaid.

D. Moved to Another State

When another state has determined that the person is a resident there for purposes of Medicaid, the caseworker may deny or terminate the beneficiary’s Medicaid eligibility. Refer to MA-2252/3410, Change In Circumstance, Terminations, And Reopening policy.

III. EXCEPTIONS TO THE RESIDENCY DOCUMENTATION REQUIREMENT

In the following circumstances, no statement of intent or additional proof is necessary:

A. Incapable

An applicant who is incapable of stating intent to reside in NC is a resident of the state where they are physically located.

B. Institutionalized

An applicant who is institutionalized and capable of stating intent to reside in NC, is a resident of NC if they live in an institution in NC, and states intent to reside in NC.

C. Incarcerated

An individual who is incarcerated by the North Carolina Department of Public Safety, Division of Prisons, is deemed to have the intent to reside in North Carolina. Refer to MA-2510/3360 Living Arrangement policy.

IV. RESIDENCY VERIFICATION

A. Applicant/Beneficiary (A/B) Requesting Assistance

If the a/b requests assistance in obtaining documents needed for residency verification, it is the responsibility of the local agency to assist.
B. **Homeless**

The caseworker may accept a written declaration (DHB-5152) from the a/b when they self-attest they are homeless. If the a/b does not have a mailing address to receive mail, the caseworker may use the local agency’s address and must document it in the NC FAST.

C. **Electronic Online Verification**

Review electronic sources, OVS in NC FAST or the existing local agency records to verify residency before asking the applicant to provide documents.

D. **Unavailable Electronic Online Verification**

When online verification is not available, the a/b may provide documentation that verifies their physical address. Send a DHB-5097/5097sp, Request for Information form requesting one of the following:

1. A valid North Carolina driver license or other identification card issued by the North Carolina Division of Motor Vehicles.
2. A current North Carolina rent or mortgage payment receipt, or current utility bill in the name of the applicant or the applicant's legal spouse showing a North Carolina address.
3. A valid North Carolina motor vehicle registration in the applicant's name and showing the applicant's current address.
4. A document showing that the applicant is employed in this State.
5. One or more documents proving that the applicant's domicile in the applicant's prior state of domicile has ended, such as closing of a bank account, termination of employment, or sale of a home.
6. The tax records of the applicant or the applicant's legal spouse, showing a current North Carolina address.
7. A document showing that the applicant has registered with a public or private employment service in this State.
8. A document showing that the applicant has enrolled the applicant's children in a public or private school or childcare facility located in this State.
9. A document showing that the applicant is receiving public assistance or other services requiring proof of domicile, other than medical assistance, in this State.
10. Records from a health department or other health care provider located in this State showing the applicant's current North Carolina address.

11. A written declaration, completed DHB-5152, North Carolina Residency Declaration, Work First DSS-5276, North Carolina Residency Applicant Statement or DSS-5275 North Carolina Residency Declaration made under penalty of perjury from a person who has a social, family, or economic relationship with the applicant and who has personal knowledge of the applicant's intent to live in North Carolina permanently or for an indefinite period of time or that the applicant is residing in North Carolina to seek employment or with a job commitment.


13. A document from the U.S. Department of Veterans Affairs, U.S. Department of Defense, or the U.S. Department of Homeland Security verifying the applicant's intent to live in North Carolina permanently or for an indefinite period of time or that the applicant is residing in North Carolina to seek employment or with a job commitment.

14. Official North Carolina school records, signed by school officials, or diplomas issued by North Carolina schools, including secondary schools, community colleges, colleges, and universities verifying the applicant's intent to live in North Carolina permanently or for an indefinite period of time or that the applicant is residing in North Carolina to seek employment or with a job commitment.

Refer to Job Aid: Verifying North Carolina Residency

E. Verification for Other Households Members

1. For a child, accept verification of the residence of the parent or caretaker if they live together.

2. For any of the documents in section IV.D. above, also accept documentation of the address of the spouse or the parent/caregiver if they live together.

F. Deny Eligibility on the 45th/90th Day

The caseworker may deny eligibility on the 45th/90th day, if there is substantial evidence showing that the documentation is false. If reasonably necessary, the caseworker must send DHB-5097/5097sp to request additional documentation to verify residency.

V. INDIVIDUAL MOVING TO NC WAS PREVIOUSLY ELIGIBLE IN ANOTHER STATE
A. If an applicant was receiving Medicaid in another state prior to moving to NC, the local agency is responsible for contacting the prior state to:

1. Notify the state of the applicant’s move to NC, and

2. Request verification from the other state or send a DHB-5097/5097sp to the applicant to provide proof that the Medicaid eligibility in the other state was terminated.

   The local agency may verbally contact the other state agency to verify Medicaid eligibility. The local agency must document in NC FAST the contact person’s name, title, and phone number.

3. Follow-up with the out-of-state agency at least every 2 weeks until a response is received either verbally or written. If not verified by the 45/90 day, or after 2 requests, whichever is later, deny the application. Document in NC FAST all attempts to contact the out of state agency as well as the response received.

4. The local agency may obtain any information on resources such as bank accounts, stocks, bonds, promissory notes, former homesite, etc., that will aid in determining eligibility in NC.

B. Medical Bills

1. If the applicant has outstanding medical bills in NC in the same month the applicant received Medicaid in the other state, verify whether the other state’s Medicaid program will cover bill(s) incurred in NC.
   
   • Some Medicaid programs in other states are similar to NC. They only cover out-of-state services if it is an emergency, or the service was prior approved.

2. If the applicant has a bill in NC that will NOT be covered by the other state, authorize Medicaid in NC if otherwise eligible for that month.

C. If the other state will pay the NC claims:

1. Contact the medical provider(s) and verify whether they are enrolled or are willing to enroll with the other state.

2. If providers are not willing to enroll and file claims with the other state, authorize NC Medicaid, if otherwise eligible.

3. If providers are willing to enroll and bill the other state, there is no need for NC coverage for that month(s).
D. If eligible for NC Medicaid

1. Verify when the out-of-state Medicaid coverage was terminated, and

2. Authorize North Carolina Medicaid in the following eligibility month or based on C. above

3. Document in the NC FAST.