

---

---

**FOUR MONTH TRANSITIONAL MEDICAID**

---

---

**REVISED 12/5/18 – CHANGE NO. 06-18**

**Current Change Notice: 06-18**

- Policy references to the Eligibility Information System (EIS) have been removed and updated with the appropriate NC FAST language.
- References to child support have been removed.

**I. INTRODUCTION**

Beneficiaries who lose eligibility due to new or increased spousal support income may receive an additional four months of Medicaid. This is Four Months Transitional Medicaid (TMA).

**A. Initial Eligibility**

To be eligible for four months transitional Medicaid, the MAF-C beneficiary must:

1. Be financially ineligible for MAF-C because of new or increased spousal support. Ineligibility may be caused by spousal support alone or in combination with other increased income.
2. Have been eligible and received MAF-C in at least three of the six months immediately preceding the first month of ineligibility for MAF-C.

MAF-C does NOT include months the case:

- a. Received assistance as the result of a request for an appeal, or
  - b. Received assistance fraudulently as determined by a court.
3. Continue to have an eligible child in the home.
  4. Continue to live in North Carolina.
  5. If new or increased spousal support combined with an increase in earned income of the parent/caretaker relative causes ineligibility, refer to NC FAST Job Aid: [MAGI Change in Income Results Extended Benefits](#).

**B. Length of Transitional Period**

1. The transitional period is four consecutive months. The four-month period begins with the first month the case is ineligible due to spousal support.

2. Determine the first month of the transitional period, depending on the date the increase is reported, and the notice requirements are met.
3. For keying instructions refer to Job Aid: [MAGI Change in Income Results Extended Benefits](#).
4. When the caseworker accepts the changed decision, NC FAST generates a DSS-8110. When the notice is overridden the caseworker must manually issue the DSS-8110 to notify the beneficiary. The notice indicates the months the beneficiary continues to receive transitional Medicaid.
5. At the end of the four-month TMA period, evaluate for all other Medicaid programs.
6. Do not count the spousal support as unearned income during the 4 months TMA period.

## **II. PROCEDURES DURING FOUR MONTHS TMA**

### **A. Individuals Who Leave the Household**

1. Evaluate for all other Medicaid programs. Remove individuals who are no longer eligible for TMA. Refer to Job Aid: [MAGI-Removing a Person from an Integrated Case](#).
2. Do not add these individuals back into the household if they again become eligible. They must reapply in their own case.

### **B. Individuals Who Are Not in the Household**

1. Individuals cannot be added to the household during the 4-month transitional period.
2. Establish a separate Medicaid household for other individuals in the house who request Medicaid during the transitional period.
  - c. Do not apply financial responsibility from individuals in the TMA case to individuals applying in another case.
  - d. Count as income any contribution from individuals in the TMA case given to individuals in the other household.

### **C. County Transfers**

1. If the beneficiary moves to another county, transfer the transitional Medicaid case to the other county. Refer to NC FAST Job Aid: [Completing a County Case Transfer](#).
2. If at the time of the transfer the transitional coverage changes, update the necessary information in NC FAST.

**D. Support No Longer Received- Refer to [MA-3410](#), Terminations and Deletions**

1. If the caseworker learns the beneficiary no longer receives spousal support, the beneficiary is no longer eligible for TMA. Apply the ex-parte process.
2. If the beneficiary continues to be eligible in another Medicaid program authorize ongoing case and send the appropriate notice.
3. If ineligible, terminate and send appropriate notice.

**E. Eligible Child No Longer in Home, Refer to [MA-3410](#), Terminations and Deletions**

1. If the caseworker learns that there is no longer an eligible child in the home, the beneficiary is ineligible for transitional Medicaid. Send a timely notice. If the location of the child(ren) is known, evaluate the child in all Medicaid programs.
  - a. Evaluate the parent/caretaker relative for ongoing Medicaid.
  - b. If the caseworker determines that the parent/caretaker relative is ineligible for Medicaid in all programs, take the appropriate action to terminate the case, following timely notice requirements.
2. If the caseworker does not complete the ex-parte timely, extend the certification period one month at a time to allow for timely notice requirements.

**F. Beneficiary No Longer Lives in North Carolina**

1. Immediately send the appropriate notice if the caseworker learns during the transitional period that the beneficiary no longer lives in North Carolina. Refer to [MA-3430](#), Notice and Hearings Process to determine the notice to be sent.
2. Document the reason for the termination in the case. Note in the case that no further evaluation is required due to the reason for termination.

### **G. Four Months Transitional Medicaid Ends**

1. Begin early in the third month to complete an ex-parte recertification of eligibility for all Medicaid programs. The caseworker must complete the recertification in time to key the authorization before the end of the fourth month.
2. If eligible in another Medicaid program category, authorize the case.
3. If ineligible for another Medicaid program, take appropriate steps to terminate the case, following timely notice requirements.

### **III. DOCUMENT**

- A. The beneficiary's eligibility for transitional Medicaid.**
- B. The reason for termination.**
- C. The decision to establish the appropriate Medicaid program at the end of the four months and which Medicaid programs were evaluated.**