

# CHANGE NOTICE FOR MANUAL, NO. 02-08, PASSALONG

**DATE: 12/10/2007**

**Manual:** Aged, Blind, and Disabled Medicaid

**Change No:** 02/08

**To:** County Directors of Social Services

**Effective:** 1/01/08

**Make the following change(s)**

## **I. CONTENT OF CHANGE**

MA-2110, Passalong, updates the COLA examples with the 2008 chart of reduction factors and the current Social Security cost of living adjustments.

## **II. EFFECTIVE DATE AND IMPLEMENTATION**

This policy is effective January 1, 2008. Apply this policy to any current or pending applications and to redeterminations.

## **III. MAINTENANCE OF MANUAL**

**A. Remove MA-2110, Passalong, pages 3-8 and Attachments 1 & 3.**

**B. Insert [MA-2110, Passalong](#), Pages 3-8 and Attachments [1](#) & [3](#).**

If you have any questions regarding this information, please contact your Medicaid Program Representative. For any issues that are not able to be handled through that venue, Mrs. Angela Floyd, Assistant Director for Provider and Recipient Services, will be your point of contact and can be reached at (919) 855-4050.

William W. Lawrence, Jr., M.D., Acting Director

(This material was researched and written by William Appel, Policy Consultant, Medicaid Eligibility Unit)