DMA
CHANGE NOTICE FOR MANUAL

DATE:  12/17/08

Manual:  Aged, Blind, and Disabled Medicaid

Change No:  02-09

To:   County Directors of Social Services

Effective:  01/01/09

Make the following change(s)

I. CONTENT OF CHANGE

   A. MA-2310, Taking the LIS Application, and Figure 2, reflects updated resource
      limits, basic coverage, and co-payment information for 2009.

       B. MA-2311, LIS Processing and Maintenance, and Figures 1 and 2 reflect
          updated resource limits, basic coverage, and co-payment information for 2009.

II. EFFECTIVE DATE AND IMPLEMENTATION

   This policy is effective January 1, 2009.  Apply this policy to applications and
   redeterminations in process or taken on or after January 1, 2009.

III. MAINTENANCE OF MANUAL

   A. Remove:  MA-2310, Taking the LIS Application,  
                pages 3-4 and Figure 2.

       Insert:       MA-2310, Taking the LIS Application,  
                     pages 3-4 and Figure 2, dated 1/1/09.
B. Remove: MA-2311, LIS Processing and Maintenance, pages 1-2, 5-6, and Figures 1, 2, and 3.

Insert: MA-2311, LIS Processing and Maintenance, pages 1-2, 5-6, and Figures 1, 2, and 3 dated 1/1/09.

For information regarding Medicaid, please contact your Medicaid Program Representative. For any Medicaid issues that are not able to be handled through that venue, Angela Floyd, Assistant Director for Recipient and Provider Services, will be your point of contact and can be reached at (919) 855-4000.

Tara R. Larson, Acting Director

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