

DMA CHANGE NOTICE FOR MANUAL

DATE: 12/17/08

Manual: Aged, Blind, and Disabled Medicaid

Change No: 03/09

To: County Directors of Social Services

Effective: 1/01/09

Make the following change(s)

I. CONTENT OF CHANGE

A. MA-2110, Passalong, the COLA examples and chart of reduction factors have been updated based upon the 2009 Social Security cost of living adjustments.

B. A minor correction has been made to MA-2110, Passalong, attachment 2.

II. EFFECTIVE DATE AND IMPLEMENTATION

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

III. MAINTENANCE OF MANUAL

Remove: MA-2110, Passalong, pages 3-8 and Attachments 1, 2 and 3.

Insert: [MA-2110](#), Passalong, Pages 3-8 and Attachments [1](#), [2](#) and [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, Angela Floyd, Assistant Director for Provider and Recipient 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)