CHANGE NOTICE FOR MANUAL NO. 03-18

DATE: DECEMBER 3, 2018

Manual:

Family and Children's Medicaid

Change No:

03-18

To:

County Directors of Social Services

Effective:

12-3-2018

I. BACKGROUND

The Division of Health Benefits (DHB) has revised and updated Medicaid policy to provide clarity/or correction to previously published policy.

II. CONTENT OF CHANGE

The following policy sections have been revised and updated:

A. MA-3326 Estate Recovery

- 1. The Estate Recovery policy was revised/updated to:
 - a. Include a new option for heirs who cannot receive a disability award letter from the Social Security Administration. This new option, the Physician Disability Certification for North Carolina Medicaid Estate Recovery Exemption for Surviving Disabled Child, allows heirs to certify their disability by a physician. Income Maintenance Caseworkers must explain this option when explaining estate recovery to the applicant/beneficiary or their representative at application and or/redetermination.
 - b. Provide heirs the opportunity for deferral of recovery as long as specified conditions are met.
- 2. The following Estate Recovery forms were modified to include clarification and the specific changes noted below:
 - a. DMA 5051 was revised to:
 - (1) Remove all references to the Division of Medical Assistance and replace them with "Medicaid"
 - (2) Updated the requirements for waiver of Estate Recovery
 - (3) Added the new option for deferral of Estate Recovery

- b. DMA 5052 was revised to:
 - (1) Remove all references to the Division of Medical Assistance and replace them with "Medicaid"
 - (2) Update the requirements for waiver of Estate Recovery
 - (3) Add the new option for deferral of Estate Recovery
- c. DMA 5053 was revised to:
 - (1) Remove all references to the Division of Medical Assistance and replace them with "Medicaid"
 - (2) Update the requirements for waiver of Estate Recovery
- d. DMA 5054 was revised to:
 - (1) Remove all references to the Division of Medical Assistance and replace them with "Medicaid"
 - (2) Update the requirements for waiver of Estate Recovery
 - (3) Add the new option for deferral of Estate Recovery
- e. DMA 5056 was revised to:
 - (1) Include "date of birth" of the legal spouse
 - (2) Include "date of birth" of the child
 - (3) Add a question regarding tenancy in common interest in real property

B. MA-3240 Pregnant Woman Coverage

MA-3240 Pregnant Woman Coverage was revised:

- 1. The following was added to II.A.8:
 - Reference to MA-3355, Enumeration Procedures policy for enumeration requirements due to policy is no longer in the Integrated Eligibility Manual (IEM), statement was added.
- 2. The following was added to II.A.9:
 - The local agency must accept self-attestation of pregnancy. However, the pregnant woman must provide verification of multiple unborn (s). Do not accept a self-attestation for multiple unborn(s), statement was added.

- 3. The following was added to II.A.6:
 - a. Do not request third party insurance information prior to approving the Medicaid application, after approval, send the DMA-5097, Request for Information, allowing the beneficiary 12 calendars days to provide verification.
 - b. If third party insurance information is provided during the interview or the application process, key the information in NC FAST.
 - c. If verification is not received, send a timely DSS-8110 notice proposing termination for failure to provide necessary information.
- 4. The following was added to II.A.10:
 - Reference to MA-3306. V. MAGI Budgeting policy
- 5. The following was added to II.A.13.
 - Reference to MA-3355, Enumeration Procedures policy for enumeration requirements due to policy is no longer in the Integrated Eligibility Manual (IEM).
- 6. The following was added to II.B.1:
 - a. Apply MAGI budgeting methodologies to individuals in the Medicaid Pregnant Women (MPW) Program. Refer to MA-3306. V. MAGI Budgeting policy.
 - b. Under either type of household (tax or non-filer), when a pregnant woman is the applicant /beneficiary, always include the unborn (s) in her household when determining eligibility.
 - c. When the pregnant woman is included in the household and family size of another individual, she is counted as one. Do not include the unborn(s).
- 7. The following was added to II.C.3:
 - a. Send an approval notice DMA 5003/DMA-5003s-ia or NCFAST generated DSS-8108, Notice of Benefits form. Authorize from the first day of the month in which all eligibility criteria are met through the last day of the month of the post-partum period.
 - b. Eligibility is continuous without reacting to changes in income or in household composition, unless the change will make her eligible for a greater benefit.
 - c. Reference to MA-3421, MAGI Recertification policy

- 8. The following was added to III.A.2
 - Apply MAGI budgeting methodologies to individuals in the Medicaid Pregnant Women (MAF-N) Program. Refer to MA-3306. V., MAGI Budgeting policy.
- 9. The following was added to III.B.1
 - Reference to MA-3306. V. MAGI Budgeting policy, statement added.
- 10. The following was added to III.C.
 - a. Reference to MA-3306. V. MAGI Budgeting policy.
 - b. Reference to MA-3421, MAGI Recertification policy.
- 11. The following was added to III.C.4.
 - Reference to MA-3421, MAGI Recertification policy

C. MA-3230 Newborns

- 1. MA-3230 Eligibility of Individuals Under 21, pages 1-32, has been removed.
- 2. MA-3230 Newborns, pages 1-5, has been added.
- 3. References to the Eligibility Information System (EIS) and the appropriate NC FAST language.

D. MA-3260, Community Alternatives Program (CAP)

- 1. Section IEM 14062, Community Alternatives Program (CAP) has been removed from the Integrated Eligibility Manual.
- 2. The CAP policy has revisions in the following sections:
 - a. MA-3260.III. C., has been updated with a completed CAP assessment, the local agency will receive a Memorandum of CAP Waiver Enrollment.
 - b. MA-3260.VI., has been updated with the CAP participation date.
 - c. MA-3260.VII., has been updated the local agency will receive a Memorandum of CAP Waiver Enrollment and Plan of Care Summary (POC) at recertification.
 - d. MA-3260.VIII., has been updated with a change of situation, the local agency will receive a Memorandum of CAP Waiver Enrollment and POC.

e. MA-3260.VIII., has been updated with Hospital/Nursing Facility less than 30 days or more than 30 days stay process procedures and the local agency will receive a Memorandum of Cap Waiver Enrollment and POC.

III. EFFECTIVE DATE AND IMPLEMENTATION

These policies are effective for any applications and/or recertifications initiated on/or in process December 3, 2018.

If you have any questions regarding information in this letter, please contact your Operational Support Team (OST) representative.

Dave Richard

Deputy Secretary, NC Medicaid