CHANGE NOTICE FOR MANUAL NO. 06-18, QUALIFIED MEDICARE BENEFICIARIES (MQB-Q, MQB-B & MQB-E), COMMUNITY ALTERNATIVES PROGRAM (CAP), AND ESTATE RECOVERY

DATE: December 3, 2018

Manual: Aged, Blind, and Disabled Medicaid

Change No: 06-18

To: County Directors of Social Services

I. BACKGROUND AND CONTENT OF CHANGE
The Division of Health Benefits (DHB) has revised and/or updated Medicaid policy to provide clarity and/or correction to policy. The revisions are spelled out in section II below.

II. POLICY UPDATE

A. Qualified Medicare Beneficiaries (MQB-Q, MQB-B & MQB-E)

1. The Qualified Medicare Beneficiaries policies have been revised in the online Adult Medicaid Manual in the following sections:

   MA-2130, Qualified Medicare Beneficiaries – Q
   MA-2140, Qualified Medicare Beneficiaries – B
   MA-2160, Qualified Individual 1 (MQB-E)

2. Section IEM 14040, Medicare Beneficiaries policy has been removed from the Integrated Eligibility Manual.

3. The applicant/beneficiary must be enrolled in both Medicare Part A and B to be eligible for MQB programs.

B. MA-2280, Community Alternatives Program (CAP)

1. The Community Alternatives Program policy has been revised in the online Adult Medicaid Manual section MA-2280, Community Alternatives Program, Medicaid Eligibility.

2. Section IEM 14062, Community Alternatives Program (CAP) has been removed from the Integrated Eligibility Manual.
3. The CAP policy has revisions in the following sections:
   
a. MA-2280.III.C., has been updated with a completed CAP assessment, the local agency will receive a Memorandum of CAP Waiver Enrollment.

b. MA-2280.VI., has been updated with the CAP participation date.

c. MA-2280.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-2280.VIII., has been updated with a change of situation, the local agency will receive a Memorandum of CAP Waiver Enrollment and POC.

c. MA-2280.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.

C. MA-2285, Estate Recovery

1. The MA-2285, 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:
Remove all references to the Division of Medical Assistance and replace them with “Medicaid”

Update the requirements for waiver of Estate Recovery

Add the new option for deferral of Estate Recovery

d. DMA – 5054 was revised to:

Remove all references to the Division of Medical Assistance and replace them with “Medicaid”

Update the requirements for waiver of Estate Recovery

Add the new option for deferral of Estate Recovery

e. DMA – 5056 was revised to:

Include “date of birth” of the legal spouse

Include “date of birth” of the child

Add a question regarding tenancy in common interest in real property

III. EFFECTIVE DATE AND IMPLEMENTATION

These policies are effective December 3, 2018.

If you have any questions regarding information in this letter, please contact your Operational Support Team Representative.

Deputy Secretary, NC Medicaid