

CHANGE NOTICE FOR MANUAL NO. 14-06, STATE RESIDENCE

DATE: AUGUST 4, 2006

Manual: Aged, Blind, and Disabled Medicaid

Change No: 14-06

To: County Directors of Social Services

Effective: September 1, 2006

I. CONTENT OF CHANGE

The purpose of this change notice is to provide policy clarifications in MA-2220, State Residence. The following changes are included:

- A. In order to meet N.C. Medicaid state residency requirements, all applicants must provide two documents listed in MA-2220, State Residence, II.A.7 or sign a declaration, subject to prosecution, that they cannot provide two documents.
- B. Verification documents must include the address the applicant has listed on his application as his physical or mailing address.
- C. Applicants must first be asked to provide two of the documents listed in II.A.7. before a declaration, subject to prosecution, stating they do not have two of the documents listed ([Attachment 3](#)), is used to verify state residency.
- D. Wording has been added to policy that the declaration signed by applicants that they do not have two documents required to verify state residence is subject to prosecution ([Attachment 3](#)).

Declarations signed by someone who has a social, family, or economic relationship with the applicant, and who has personal knowledge of the applicant's intent to live in North Carolina permanently or for an indefinite period of time ([Attachment 2](#)), are not subject to prosecution.

- E. Employment in North Carolina does not exempt an applicant from providing satisfactory proof of state residence.**
- F. When an applicant owns a homesite in another state to which he intends to return at some time, it does not affect North Carolina residency. However, the homesite must be evaluated to determine if the home is a countable resource.**

II. EFFECTIVE DATE AND IMPLEMENTATION

This change is effective September 1, 2006. Apply this change to applications started on or after September 1, 2006.

III. MAINTENANCE OF MANUAL

Remove: MA-2220, State Residence, pages 1 – 8, 13 & 14.

Insert: [MA-2220](#), State Residence, pages 1 – 8, 13 & 14.

If you have any questions regarding this information, please contact your Medicaid Program Representative.

L. Allen Dobson, Jr., M.D., Assistant Secretary
for Health Policy and Medical Assistance

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