

# CHANGE NOTICE FOR MANUAL 06-05, REDETERMINATION

DATE: JULY 16, 2004

Manual: Aged, Blind, and Disabled Medicaid

Change No: 06-05

To: County Directors of Social Services

Effective: August 1, 2004

## I. BACKGROUND

A review of MA-2320, Redetermination of Eligibility, and MA-2301, Conducting a Face-to-Face Intake Interview, was conducted to identify discrepancies, changes, and clarifications needed concerning the mail-in redetermination reviews and Health Check program information.

## II. CONTENT OF CHANGE

The following changes were made:

A. Reference to DMA Health Check brochures is eliminated.

B. The sections are changed to more closely reflect the Family and Children's Medicaid Manual information.

C. A requirement to inform the recipient of available services when processing a mail-in redetermination is added.

## III. EFFECTIVE DATE AND IMPLEMENTATION

This change is effective August 1, 2004. Apply this change to redeterminations started on or after August 1, 2004.

## IV. MAINTENANCE OF MANUAL

A. Remove MA-2301, Conducting a Face-to-Face Intake Interview, pages 15 & 16.

Insert [MA-2301](#), Conducting a Face-to-Face Intake Interview, pages 15 & 16 dated August 1, 2004.

**B. Remove MA-2320, Redetermination of Eligibility, pages 5 & 6, and 15 & 16.**

**Insert [MA-2320](#), Redetermination of Eligibility, pages 5 & 6, and 15 & 16 dated August 1, 2004.**

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

Gary H. Fuquay  
Director

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