

DMA CHANGE NOTICE FOR MANUAL

DATE: 12/20/2007

Manual: Aged, Blind, and Disabled Medicaid

Change No: 03-08

To: County Directors of Social Services

Effective: 01/01/08

Make the following change(s)

I. BACKGROUND

Pages 11 & 12 of MA 2360, Medicaid Deductible, were inadvertently omitted from the ABD Change Notice 01-08. In addition, links in two pages in MA 2270, Long Term Care Need and Budgeting, have been updated.

II. EFFECTIVE DATE AND IMPLEMENTATION

This policy is effective January 1, 2008. Apply this change to applications taken and redeterminations started on or after January 1, 2008 as well as to those presently in process.

III. MAINTENANCE OF MANUAL

A. Remove: MA-2270, Long Term Care Need and Budgeting, pages 21-22, and 51-52.

Insert: [MA-2270, Long Term Care Need and Budgeting](#), pages 21-22, and 51-52 effective 1-1-08.

B. Remove: MA-2360, Medicaid Deductible, pages 11-12.

Insert: [MA-2360, Medicaid Deductible](#), pages 11-12 effective 1-1-08.

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, Mrs. Angela Floyd, Assistant Director for Recipient and Provider Services, will be your point of contact and can be reached at (919) 855-4000.

William W. Lawrence, Jr., M.D., Acting Director

(This material was researched and written by William Appel, Policy Consultant, Medicaid Eligibility Unit)