

DHB ADMINISTRATIVE LETTER NO: 11-20, MEDICAID COVID-19 OPTIONAL TESTING GROUP

DATE: August 25, 2020

SUBJECT: Medicaid COVID-19 Optional Testing Group Eligibility

DISTRIBUTION: County Directors of Social Services
Medicaid Supervisors
Medicaid Eligibility Staff

I. BACKGROUND

The Families First Coronavirus Response Act (FFCRA) added a new optional Medicaid eligibility group for uninsured individuals to cover **COVID-19 Testing** during the Public Health Emergency (PHE). These individuals are eligible to receive a limited benefit of testing and diagnosis of COVID-19. It does not cover treatment for COVID-19.

This administrative letter provides guidance and describes information regarding the eligibility requirements and the Medicaid for Coronavirus (MCV) application processing guidelines for individuals who apply for COVID Testing coverage.

Current Medicaid beneficiaries have coverage of COVID-19 testing, including Medicaid for Pregnant Women (MPW) beneficiaries during the post-partum period. Active Family Planning Program (FPP) beneficiaries with no other insurance will be considered part of the new MCV group, effective September 1, 2020, for the duration of the Public Health Emergency, and will not need to submit a separate application. They will still be identified in NCFAS as FPP. FPP beneficiaries were mailed a notice informing them of the added benefit.

II. ELIGIBILITY REQUIREMENTS FOR MCV

The following are the eligibility requirements:

A. Applicant must not have health insurance. Health insurance includes:

1. Medicaid, NC Health Choice, Medicare, TRICARE and Veterans Administration, and federal employee health plan.

2. Group health plan or health insurance coverage

B. Must be a North Carolina Resident.

C. Must be a U.S. Citizen or have eligible immigration status which qualifies individual for Medicaid programs. Refer to MA-[3330/2504](#) ,Alien Requirements policy.

III. HOW TO APPLY FOR MCV

A. An individual may submit a paper application for:

1. Themselves or family members
2. As an authorized representative for someone else

B. Applicants may request retroactive coverage up to three months prior to the month of application, but no earlier than June 1, 2020.

C. [DHB 5200CV, Application for Coverage of Coronavirus \(COVID-19\) Testing Costs](#), and [DHB-5200CV \(Spanish\)](#) are available online. The paper application instructs individuals to submit the application to DHB at the address shown below. If the local agency receives a paper application, the application should also be mailed to DHB within a day of receipt.

**DHHS/DHB
2501 Mail Service Center
ATTN: COVID Medicaid Application
Raleigh, NC 27699**

IV. AUTOMATED PROCESSING FOR MCV APPLICATIONS

NC FAST will process the MCV applications. If all eligibility requirements in section II above are verified, the beneficiary will receive an appropriate notice:

A. Approved application

NC FAST will generate NCF-20019 COVID 19 Testing Approval Notice and a Medicaid card to the beneficiary.

B. Denied application

1. NC FAST will generate a DSS 8109, Notice of Denial or Withdrawal to the applicant.
2. Applicants may request an appeal. Refer to [MA-3430, Notice and Hearings Process](#) policy.

C. Fall-out Application

If NC FAST cannot determine eligibility, the application will fall-out during the automated processing due to the following reasons:

1. The individual is already registered in NC FAST as a Prospect Person.
2. Person Merge could not be completed.
3. U.S. Citizenship or immigration status could not be verified and ROP could not be applied.

V. FALL-OUT APPLICATION PROCESSING PROCEDURES

The local agency will need to take the appropriate action to complete the MCV application process. The MCV Pending App Report is located in FAST Help.

Refer to [NC FAST Job Aid: New Program Code for COVID Testing](#)

A. If an individual is registered as a Prospect person in NCFast, the local agency must resolve the prospect person and then follow procedures to continue determining eligibility.

1. There is no income or resource test to determine eligibility.
2. Accept self-attestation for North Carolina residency and health insurance. See Section II above.
3. Follow section B through E to continue the application process.

Refer to NC FAST Job Aid: [Start Application from a Reception Task](#) for Prospect Person registered in NC FAST.

B. U.S. Citizenship must be verified via online verification system. Refer to MA- [2506/3332](#), Citizenship policy.

C. Immigration status may be verified via Systematic Alien Verification for Entitlements (SAVE). Refer to NC FAST Job Aid: [SAVE Automation Verification](#).

If not able to verify, accept the applicant's self-attestation of immigration status to determine eligibility. When the application is approved, NC FAST or the local agency will begin the 90-day reasonable opportunity period (ROP) process.

Applicants that previously received ROP will need to provide verification of valid citizen or immigration status prior to authorization for MCV.

D. ROP Follow-up

1. If the system applied ROP, these individuals will appear on a report titled MCV ROP Follow-Up Report located in FAST Help. The local agency will generate and mail the DMA-5097, Request for Information, to the beneficiary within 3 workdays. Update the ROP DMA-5097 date on the person page. Refer to NC FAST Job Aid: [Reasonable Opportunity Period](#).
2. If the local agency applied ROP, the caseworker will generate and mail the DMA-5097, Request for Information, to the beneficiary within 3 workdays . Refer to MA-3330/2504, Alien Requirements policy. Refer to NC FAST Job Aid: [Reasonable Opportunity Period](#) further instructions.
3. If the local agency determines an individual has an invalid immigration status during the ROP period, the local agency will timely terminate the case and send the notice. Refer to MA-[2420/3430](#), Notice and Hearings Process policy.

The individual is only eligible for emergency services and will need to apply.
4. If the 90-day ROP period ends and the citizen/immigration status was not verified, the MCV coverage continues to the end of the Public Health Emergency (PHE).

E. Fall-out Application Notices

1. Approved application

NC FAST will generate and mail an NCF-20019 COVID 19 Testing Approval Notice and a Medicaid card to the beneficiary.
2. Denied application
 - a. NC FAST will generate a DSS 8109, Notice of Denial or Withdrawal to the applicant.
 - b. Applicants may request an appeal. Refer to MA-[2420/3430](#), Notice and Hearings Process policy. Appeals for MCV start at the local level.

VI. MCV COVERAGE

- A. Coverage begins on the first day of the month of application, or up to 3 months prior to MCV application, but no earlier than June 1, 2020 and continues through the end of the Public Health Emergency (PHE).**
- B. Certification end date will show as 12/31/9998.**
- C. NC FAST will automatically generate a notice and terminate MCV coverage at the end of the Public Health Emergency.**

VII. TERMINATIONS

MCV coverage may be terminated when the beneficiary:

- A. Obtains health insurance as referenced in section II.A above.**
- B. Is no longer a NC resident.**
- C. Does not meet the citizenship/immigration requirement.**
- D. Becomes eligible for another Medicaid program.**

VIII. MEDICAID APPLICATIONS

Individuals who have applied for Medicaid and were denied for any Medicaid programs, including FFP, must be evaluated for Medicaid for Coronavirus (MCV).

The local agency will use the same application date from the DHB-5200, Application for Health Coverage & Help Paying Costs or from the submitted date on the ePass application. Individuals must meet the requirements in section II above. The local agency will follow the procedures in section V above.

If the individual has not provided self-attestation of health insurance, the local agency will need to contact the individual to continue to process for Medicaid for Coronavirus (MCV).

IX. IMPLEMENTATION

Medicaid for Coronavirus (MCV) coverage will begin accepting applications on September 1, 2020.

If you have any questions regarding the guidance in this letter, please contact your [Medicaid Operational Support Team Representative](#).

DocuSigned by:

Jay Udham

37D6A6ED513A464...

Assistant Sec of Medicaid for

Dave Richard

Deputy Secretary, NC Medicaid