

# **CHANGE NOTICE FOR MANUAL, NO. 02-03, MEDICAID ID CARDS**

**DATE: JULY 2, 2002**

**Manual: Family and Children's Medicaid**  
**Change No: 02 - 03**  
**To: County Directors of Social Services**  
**Effective: August 1, 2002**

## **I. BACKGROUND**

The NC FAST (Families Accessing Services through Technology) Family and Children's Policy Simplification Work Group met and made several recommendations to the Division of Medical Assistance for simplifying Family and Children's Medicaid policy.

The Work Group included the following county staff:

Donna Grady, Lenoir County  
Jim Holland, Buncombe County  
Sandra Shearin, Franklin County  
Cindy Snipes, Chatham County  
Sandy Williams, Mecklenburg County

## **II. MA-3340 AND MA-3505**

One of the group's recommendations that DMA has decided to implement is to revise policy regarding issuing replacement Medicaid cards. It is not necessary to remove the pharmacy stub before issuing a duplicate card in the following aid program categories: MIC, HSF and IAS. In Work First and MAF with only children in the case, the pharmacy stub will not need to be removed. These recipients are not limited to the 6 prescription limit per month. You must still remove the pharmacy stub for all other categories of Medicaid.

Also, during the county transfer process, you do not have to send the replacement card to the second county. You may mail it directly to the recipient.

Other changes include updating the address for Manager of Operations at the Division of Information Resource Management (DIRM).

## **III. EFFECTIVE DATE**

**This change is effective August 1, 2002.**

#### **IV. MAINTENANCE OF MANUAL**

Remove MA-3340, pages 9-10.

Insert MA-3340, pages 9-10.

Online Manual: Revised MA-3340, item V.G.

Remove MA-3505, pages 1-9.

Insert MA-3505, pages 1-8.

Online Manual: Revised all of MA-3505.

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

Nina M. Yeager  
Director

[This material was researched and prepared by Cinnamon Narron, Policy Consultant, Medicaid Eligibility Unit.]

[MA-3340](#)

[MA-3505](#)