

CHANGE NOTICE FOR MANUAL NO. 16-06, RE-ENROLLMENT

DATE: 09-08-06

Manual: Family and Children's Medicaid
Change No: 16-06
To: County Directors of Social Services
Effective: 10-01-06

I. CONTENT OF CHANGE

MA-3240, Re-Enrollment, has been revised to clarify that Re-Enrollment forms received with individuals listed who are not currently receiving are to be treated as applications under any Aid Program Category. Applicants for MAABD are not required to sign another application.

III. EFFECTIVE DATE AND IMPLEMENTATION

This policy is effective 10-01-06. Apply this policy to all applications taken and in process and to all redeterminations started or in process.

IV. MAINTENANCE OF MANUAL

REMOVE: MA-3420, Re-Enrollment, pages 11-14.

INSERT: [MA3420](#), Re-Enrollment, pages 11-14.

If you have questions, 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 prepared by Trenita Dawkins, Policy Consultant, Medicaid Eligibility Unit.]