

CHANGE NOTICE FOR MANUAL NO. 01-11, SERIES # 3 OF CORRECTIONS, ADDITIONS, DELETIONS AND/OR UPDATES, & FIGURES/ATTACHMENTS REMOVAL

DATE: MARCH 28, 2011

Manual: Family and Children's Medicaid
Change No: 01-11
To: County Directors of Social Services
Effective: April 1, 2011

I. BACKGROUND

This is the third in a series of change notices containing various FC Medicaid manual section corrections, additions, deletions and/or updates that were not included or not updated within the Medicaid policy at publication.

In addition, DMA is converting all figures and attachments into a form or incorporating into the policy. We are removing figures/attachments from the policy manuals and changing the links from the figure/attachment to the forms section of the Forms website. This procedure will be done in all FC and ABD sections over the next few months.

II. CONTENT OF CHANGE

A. MA-3200, Initial Contact, is revised to:

1. Remove figures and any reference to figures that have a form number. Change the link from the figure to the form. Incorporate figures that are not forms into the manual section.
2. Remove MA-3200, Figure 5, Mandatory Outstation Locations, and change to reference the DSH/FQHC locations located on the website at <http://www.ncdhhs.gov/dma/county/DSHFQHC.pdf>
3. Correct the name of the [DMA-5020](#), Notice of Case Status, to match the on line form name.

(II. A.)

4. Incorporate MA-3200 Figure 7A and 7B, Applications for Medical Assistance sample notice, into the Medicaid policy.
5. Include the form name for the DMA-5063/DMA-5063S, Health Check/NC Health Choice for Children Application.
6. Include a reference to MA-3500, V.C., Confidentiality, for instructions on obtaining the a/r or authorized representative consent for release of information.

B. MA-3210, Verification Requirements For Applications, is revised to:

Remove figures and any reference to figures that have a form number and change the link from the figure to the form.

C. MA-3255, NC Health Choice, is revised to:

1. Incorporate MA-3255 Figure 1, NC Health Choice Income Levels, and MA-3255 Figure 5, Changes in Situation, into the Medicaid policy.
2. Remove the links for MA-3255 Figure 1, NC Health Choice Income Levels, and MA-3255 Figure 5, Changes in Situation.
3. Correct the title of MA-3535, Recipient Fraud and Abuse Policy and Procedures.
4. Convert figures to forms and change the link from the figures to the following:
 - a. [DMA-5126](#), Children's Health Insurance Status Notification, formerly Figure 4.
 - b. [DMA-5127](#), Notice of Reactivating the Health Check/Health Choice Program, formerly Figure 7.
 - c. [DMA-5128](#), Health Choice Enrollment & Waiting List Notification, formerly Figure 8.
5. Delete Figure 9, duplicate of Figure 8.
6. Add title to the, DMA-2041 Third Party Health & Accident Resources Information.
7. Add the words "above" or "below" in various pages for easier document navigation.
8. Include the form name for the following:
 - a. DMA-5063 (DMA-5063, Spanish), Medicaid/NC Health Choice Application.
 - b. DMA-5063R/DMA-5063RS, Health Check/NC Health Choice Re-Enrollment Form.
 - c. DSS-8109, Notice of Benefits Denied or Withdrawn.
 - d. DMA-5097/DMA-5097, Spanish, Request for Information.

III. EFFECTIVE DATE AND IMPLEMENTATION

This policy is effective 04/01/2011. Apply this policy to Medicaid applications taken on or after 04/01/2011 as well as to those presently in process.

IV. MAINTENANCE OF MANUAL

A. Remove: MA-3200, Initial Contact, pages 1-14 and Figures 1, 2A, 2B, 3A, 3B, 4A, 4B, 5, 5A, 5B, 6A, 6B, and 8.

Insert: [MA-3200](#), Initial Contact, pages 1-14, dated 04/01/2011

B. Remove: MA-3210 Verification Requirements For Applications, pages 5-8, and Figures 1A, 1B, 2A, 2B.

Insert: [MA-3210](#), Verification Requirements For Applications, pages 5-8, dated 04/01/2011.

C. Remove: MA-3255, NC Health Choice, pages 1-49 and Figures 1-9.

Insert: [MA-3255](#), NC Health Choice, pages 1-53, dated 04/01/2011.

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

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Director

CLG:skm

(This material was researched and written by Sandi Morrow, Policy Consultant II, Medicaid Eligibility Unit)