

CHANGE NOTICE FOR MANUAL NO. 04-09, CONFIDENTIALITY

DATE: MARCH 18, 2009

Manual: Family and Children's Medicaid
Change No: 04-09
To: County Directors of Social Services
Effective: April 1, 2009

I. BACKGROUND

North Carolina General Statutes state that it is unlawful for any person to obtain, disclose or use, or authorize, permit, or acquiesce in the use of any list of names or other information concerning individuals applying for or receiving public assistance or social services that may be directly or indirectly derived from the client's records, except for purposes directly connected with the administration of the program.

County agencies receive requests for information regarding Medicaid clients from various individuals and agencies including county, state and federal law enforcement officers. No information may be released from the client's eligibility record that identifies a specific applicant/recipient except for purposes directly connected with the administration of the programs of public assistance and social services. Examine subpoenas, court orders and other requests for information from the client's Medicaid eligibility case record to protect client confidentiality. Court orders and/or subpoenas are acceptable only if signed by a judge.

This change notice clarifies Medicaid policy, provides revised instructions, and adds new policy sections regarding Medicaid client confidentiality and releasing information from a client's Medicaid eligibility case record.

II. CONTENT OF CHANGE

The following sections are revised:

MA-3500, Confidentiality, "programs of public assistance and social services" is added throughout the section to clarify the acceptable release of confidential information and to whom the information may be released.

MA-3500, II, specific references to federal and state statutes are deleted.

MA-3500, III, The definitions of "Client" "Court Order" and "Client Information or Client Record" are revised. The definitions of "Representative" and "Authorized Representative" are added.

MA-3500, V B. 2, and V.B.2.a (4), Social Security Administration (SSA) and Employment Security Commission (ESC) information is added to the Exceptions for Right to Access. Also, clarification is added regarding the release of information originating from a provider or other source identified as "Confidential" or "Do Not Release".

MA-3500, V. C. 1. and V.C.2, Clarification is added regarding blank consent forms and applicant/recipient's financial account PIN and password.

MA-3500, VI. A, Release of Information Without Client Consent, is updated to add additional situations when information may be released without the client's consent.

MA-3500, VI. B. 2. and VI. B. 4, Referral for Medicaid and Social Security Administration and SSI Recipients are revised to include the referral form names.

MA-3500, VI. B. 3, Information is added regarding the release of information to Community Care of North Carolina (CCNC) case managers.

MA-3500, VI. B, Work First policy regarding release of information is deleted.

MA-3500, VII. A. and B, Release of Information to Federal, State, and County Law Enforcement, is a new section.

MA-3500, VIII, Confidentiality of Information Received from the Social Security Administration (SSA), is a new section.

MA-3500, IX, Confidentiality of Eligibility Information System (EIS) Data, is a new section.

MA-3500, X, Confidentiality of Information Received from the Employment Security Commission (ECS), is a new section.

MA-3500, Figure 1, Release of Information Without Client Consent, is updated

MA-3500, Figure 2, Designation of Authorized Representative is added.

III. EFFECTIVE DATE

This policy is effective 04/01/09. Apply this policy to any applications or redeterminations in process or taken on or after 04/01/09.

IV. MAINTENANCE OF MANUAL

A. Remove: MA-3500, Confidentiality, pages 1 through 11 and MA-3500, Figure 1, Release of Information Without Client Consent.

B. Insert: [MA-3500](#), Confidentiality, pages 1 through 12 and MA-3500, [Figure 1](#), Release of Information Without Client Consent, and [Figure 2](#), Designation of Authorized Representative, dated 04/01/09.

If you have any questions regarding this information, please contact your Medicaid Program Representative. For any other issues that are not able to be handled through that venue, Angela Floyd, Assistant Director for Recipient and Provider Services, will be your point of contact and can be reached at (919) 855-4000.

Tara R. Larson, Acting Director

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