CHANGE NOTICE FOR MANUAL 06-13, ADDITIONS, CLARIFICATIONS, CORRECTIONS, DELETIONS AND/OR UPDATES.

DATE: MAY 15, 2013

Manual: Aged, Blind, and Disabled Medicaid

Change No: 06-13

To: County Directors of Social Services

Effective: June 1, 2013

I. BACKGROUND

This change notice contains various ABD Medicaid Manual section additions, clarifications, corrections, deletions and/or updates. In addition, Centers for Medicare and Medicaid Services (CMS) and other federal agencies use the term beneficiary instead of recipient. To match their terminology, as policy changes, recipient and A/R will be changed to beneficiary and A/B

II. CONTENT OF CHANGE

A. MA-2160, Qualifying Individuals 1 – (MQB-E)

III.C.5 Ongoing is deleted from heading.

III.C.5.b. adds clarification that beneficiary is not required to make an application.

B. MA-2230, Financial Resources

XII.D.3. adds a link to the LTC Partnership website.

C. MA-2240, Transfer of Assets

XII.C.3. is added to clarify sanction calculation when both spouses are institutionalized.

XII.G is updated, deleting "enter a sanction on the AT screen".

D. MA-2250, Income

VII.A.7. adds Veteran (VA) Caregivers Stipend as Countable earned income.

VIII.P.1. deletes verification for Black Lung Benefits through Social Security Administration (SSA).

E. MA-2260, Financial Eligibility Regulations – PLA

III.A adds definition of Ineligible Child.

F. MA-2270, Long Term Care Need and Budgeting

V.B.1. corrects link to Nursing Facility Rates.

V.C.3.d. adds clarification of the monthly incentive allowance, net wages means after mandatory deductions from earned income.

XI.A.5.a (3) example is corrected; "in EIS for August and September" is deleted.

G. MA-2280, Community Alternatives Program (CAP)

References to CAP MR/DD are updated with "Innovations".

H. MA-2312, Medicare Prescription Drug Benefit

VI.5. link for NC <u>DMA General Clinical Policy A2</u> is repaired.

I. MA-2395, Corrective Actions and Responsibility for Errors

III.E.1.e. (1) reference to return of Medicaid card for erroneous authorization is deleted in III.E.

III. EFFECTIVE DATE AND IMPLEMENTATION

June 1, 2013

IV. MAINTENANCE OF MANUAL

A. Remove: MA-2160, Qualifying Individuals 1 – (MQB-E), page 5 & 6

Insert: MA-2160, Qualifying Individuals 1 – (MQB-E), page 5 & 6

B. Remove: MA-2230, Financial Resources, page 99 & 100

Insert: MA-2230, Financial Resources, page 99 & 100

C. Remove: MA-2240, Transfer of Assets, pages 39 - 48

Insert: MA-2240, Transfer of Assets, pages 39 - 48

D. Remove: MA-2250, Income, pages 25, 26, 71 and 72

Insert: Ma-2250, Income, pages 25, 26, 71 and 72

E. Remove: MA-2260, Financial Eligibility Regulations – PLA, pages 3 & 4

Insert: MA-2260, Financial Eligibility Regulations – PLA, page 3 & 4

F. Remove: MA-2270, Long Term Care Need and Budgeting, pages 3, 4, 7, 8, 35, and 36

Insert: MA-2270, Long Term Care Need and Budgeting, pages 3, 4, 7, 8, 35, and 36

G. Remove: MA-2280, Community Alternatives Program (CAP), pages 1, 2, 5, 6, 9-12, 15, 16, 19-22, 25-28

Insert: MA-2280, Community Alternatives Program (CAP), pages 1, 2, 5, 6, 9-12, 15, 16, 19-22, 25-28

H. Remove: MA-2312, Medicare Prescription Drug Benefit, page 9 & 10

Insert: MA-2312, Medicare Prescription Drug Benefit, page 9 & 10

I. Remove: MA-2395, Corrective Actions and Responsibility for Errors, page 11 & 12

Insert: MA-2395, Corrective Actions and Responsibility for Errors, page 11 & 12

If you have any questions regarding this information, please contact a Medicaid Program Representative.

Carol Steckel, MPH, Director

CS/pc

(This material was researched and written by Pam Cooper, Policy Consultant, Medicaid Eligibility Unit)