CHANGE NOTICE FOR MANUAL 09-04, IMMIGRANT ACCESS NOTICE

DATE: OCTOBER 29, 2003

Manual: Aged, Blind, and Disabled Medicaid

Change No: 09-04

To: County Directors of Social Services

Effective: December 1, 2003

The purpose of this change is to address and re-emphasize the policy regarding an immigrant's access to benefits and to require that the DSS-8227, Immigrant Access Notice, be given to all applicants applying for Medicaid and NC Health Choice for Children.

I. BACKGROUND

Title VI of the Civil Rights Act of 1964 prohibits discrimination on the basis of race, color, or national origin in any program or activity that receives federal funds or other federal financial assistance. Studies have shown that immigrant households with mixed citizenship status are not applying for benefits because of some of the questions asked during the application process. These questions generally concern the disclosure of immigration status or social security numbers for family members who may or may not be seeking assistance for themselves. In hope of alleviating these fears and ensuring compliance with all aspects of Title VI, the Division is taking steps to make certain that our growing ethnically diverse population is served and that they have meaningful access to all programs.

II. CONTENT OF CHANGE

MA-2300, *Initial Contact*, and MA-2301, *Conducting a Face-to-Face Interview*, are revised to require a copy of the DSS-8227, Immigrant Access Notice, be given to all applicants who apply or inquire about the receipt of Medicaid and/or NC Health Choice for Children. Be sure to include the notice with all mail-out applications.

III. EFFECTIVE DATE

This change is effective immediately and obsoletes DMA Administrative Letter No. 19-2003. For all applications taken on or after December 1, 2003, begin reviewing with the applicant the DSS-8227/DSS-8227S, Immigrant Access Notice.

Aged, Blind, and Disabled Medicaid Manual Change No. 09-04 Page 2

IV. MAINTENANCE OF MANUAL

A. Remove: MA-2300, Initial Contact, pages 3 through 12 and Figures 2A,

2B, and 4 through 6.

Insert: MA-2300, *Initial Contact*, pages 3 through 11 and Figures 2A,

2B and **4A**, **4B**, **5**, **6A**, **6B**, and **7**, dated 12-1-03.

B. Remove: MA-2301, Conducting a Face-to-Face Intake Interview, pages 9

through 14, 19 and 20.

Insert: MA-2301, Conducting a Face-to-Face Intake Interview, pages 9

through 14, 19 and 20, dated 12-1-03.

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

Gary H. Fuquay Acting Director

[This material was researched and written by Debbie Pittard, Medicaid Policy Consultant, Medicaid Eligibility Unit.]