North Carolina Department of Health and Human Services

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Beverly Eaves Perdue, Governor   Albert A. Delia, Acting Secretary

August 31, 2012

Subject: Important upcoming EIS changes

Dear County Director of Social Services:

The purpose of this letter is to inform the counties of several upcoming changes occurring in EIS during the next several months. These changes are in preparation for NCFAST as well as changes resulting from integrating programs and other policy changes. Please watch for the change notices concerning some of these important changes.
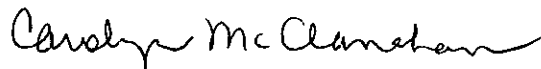
1) The **processing deadline** will move from the current four (4) work days from the end of the month to two (2) work days from the end of the month. This will occur in September.

2) The **Federal Poverty Level** (FPL) will be calculated and shown on each case that involves Medicaid. This may require a Needs Unit to be entered in EIS for <u>every</u> case. This is in preparation for 1915i waiver policy and will significantly improve ability to report on income ranges. The FPL is based on the income used to determine eligibility and the number of people in the Needs Unit.

3) A **Tribal Member Indicator** at least one field in size will be created to identify an individual as a member of a federally recognized tribe. This is a federal requirement and we are researching the best way to identify the specific tribe.

4) A **dialysis sub-program code** is being created for individuals who are undocumented aliens or within the five (5) year bar period. This code will allow eligibility to be entered into EIS for complete months and possibly for an ongoing certification period. This will allow only hemodialysis services to be covered and relieves the worker from having to key many applications and authorize all the specific days dialysis was received.

5) The **Medicaid Classification** will become two (2) digits. This is in response to the growing Medicaid program, anticipated changes due to Health Care Reform, and in preparation of NCFAST. The first digit will indicate categorically needy/medically needy, MQB/NCHC/BCCM status and the second digit will identify alien status such as emergency only or full Medicaid.

6) DMA is working on **automated suspension** for beneficiaries who reside in an Adult Care Home (ACH) that is determined to be an Institution for Mental Disease (IMD). Currently, if this happens, DIRM must run a program to suspend. The county caseworker will be responsible for reinstating Medicaid, any case changes, etc.

7) DMA is working on an **automated process to suspend and reinstate** prisoners at Department of Corrections (DOC). This will ensure that billing invoices sent to the DOC are accurate. The county caseworker is still responsible for determining whether the inmate continues to be eligible for Medicaid when he is incarcerated.

8) The NC General Assembly passed legislation to **disregard SSA COLA** for Medicaid cases when the FPL increase is less than the COLA increase and causes individuals to lose Medicaid eligibility. This legislation is effective January 1, 2013; however it will not impact beneficiaries until April 1, 2013, when the Federal Poverty Level increase is effective.

9) The weekly **SSI Reports** will become daily reports. Please see EIS 4200. Many of the reports have been run during a weekly SDX update on Fridays. These reports will now be run as they are received from the SSI daily.

10) A method is being created to identify **presumptive eligibility** on the IE segment in EIS. This will differentiate the presumptive period from labor and delivery or other eligibility.

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

Sincerely,
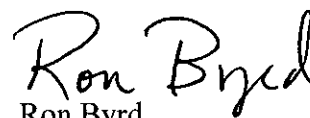DHHS Economic Services Policy Governance Board

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