

NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor

KODY H. KINSLEY • Secretary

LISA TUCKER CAULEY • Division Director, Human Services

November 8, 2024

DEAR COUNTY DIRECTOR OF SOCIAL SERVICES

ATTENTION: ADULT SERVICES SUPERVISORS AND PROGRAM MANAGERS

SUBJECT: 2024 END OF YEAR DHHS BLANKET BOND RECONCILIATION

REQUIRED ACTION: ☒ Information Only ☒ Time Sensitive ☐ Immediate

North Carolina General Statute 35A-1239 requires bond coverage for all disinterested public agents appointed as guardians, whether they are appointed to serve as guardians of the person, estate or general guardians.

The Division of Social Services, Adult Services, manages the North Carolina Department of Health and Human Services (DHHS) Blanket Bond for Disinterested Public Agent Guardians. In preparation for the 2024 annual accounting with the insurance carrier, accurate and up-to-date information must be submitted. This includes names of individuals under public agent guardianship and their corresponding bond amounts. Maintaining current records is essential for valid coverage and accurate premium calculations. Your agency must report any status changes for individuals throughout the year.

Review Process and Submission Timeline

Your agency's bond list will be sent via secure email to the Director and Adult Services Supervisor by Friday, November 15, 2024. Your agency's Continuous Quality Improvement-Specialist will also be copied on the email. If you do not receive your agency's list by this date, please contact Sarah Richardson, Program Administrator, at 919-605-3640 or Sarah.Richardson@dhhs.nc.gov. Please complete the following process by **Friday, January 24, 2025**:

Review Your Agency's List of Individuals Under Guardianship

Review your agency's Excel spreadsheet and verify the following:

- Individuals you are no longer responsible for and whose names should be deleted from your bond list
- Individuals you are responsible for but whose names are not on your bond list
- Date of the guardianship appointment; this should be the date on the **order of appointment**
- Estate and bond coverage amount listed for each individual
- Individual dates of birth

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF SOCIAL SERVICES

LOCATION: 820 S. Boylan Avenue, McBryde Building, Raleigh, NC 27603

MAILING ADDRESS: 2401 Mail Service Center, Raleigh, NC 27699-2401

www.ncdhhs.gov • TEL: 919-855-6335 • FAX: 919-334-1018

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER

- Name and title of the public agent guardian. If the guardian's name is the only change, please send an e-mail to 7016.DHHSForms@dhhs.nc.gov stating the agency Director's name and title as it should appear as well as the previous Director's name.
- The individual's SIS ID# (11 digits)
- Correct spelling of individual names as they appear in the SIS system
- Ensure that the county where the ward resides is correct on the spreadsheet

Select on your agency's Excel spreadsheet, in the first column, "Current" or "Change" from the dropdown, for **each individual**.

Correcting Your Agency's List of Individuals Under Guardianship

For any changes on your agency's list, complete and submit the required DHHS-AS-7016, and select "Change" in your agency's Excel spreadsheet. Complete and submit all [DHHS-AS-7016](#) forms containing necessary changes and/or updates to your list of individuals to: 7016.DHHSForms@dhhs.nc.gov

Remember to also complete the DHHS-AS-7016 for individuals who are covered by a private bond. Individuals that are covered by a private bond are not included in the report submitted to the insurance carrier, but it is important that we maintain an accurate account of all active individuals with disinterested public agent guardians. Please write "Private Bond" on Line 14 when completing the DHHS-AS-7016.

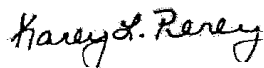
Finalizing Your Agency's Submission

Ensure all individuals are marked as "Current" or "Change" in the first column of your Excel spreadsheet. The agency Director must review and approve your agency's completed Excel Spreadsheet and be included in the secured email to 7016.DHHSForms@dhhs.nc.gov. Use the following naming format to save the Excel spreadsheet, replacing the word County with the name of your County: **County_Bond Reconciliation_2024**

Submit your agency's completed Excel spreadsheet and any DHHS-AS-7016 changes and/or updates by Friday, January 24, 2025.

For questions or additional information, please contact Sarah Richardson, Program Administrator, at (919) 605-3640 or by e-mail at Sarah.Richardson@dhhs.nc.gov.

Sincerely,



Karey Perez
Deputy Director
Adult Services, Division of Social Services

KP/smr