



North Carolina  
Department of Health and Human Services  
**Division of Medical Assistance**  
**Recipient Services EIS**

1985 Umstead Drive – 2512 Mail Service Center - Raleigh, N.C. 27699-2512  
Courier Number 56-20-06

Michael F. Easley, Governor  
Carmen Hooker Buell, Secretary

Nina M. Yeager, Director  
(919) 857-4019

August 15, 2001

**RE: Changes in Transitional Medicaid**

Dear County Director of Social Services:

To ensure that eligible families continue to receive Medicaid benefits, the Center for Medicare and Medicaid Services (CMS) issued ex parte review instructions in an April 7, 2000, letter to the State. To comply with the instructions, several changes in policy were made. MA-3357, Extended Medicaid for Working Families, will be revised to incorporate ex parte review instructions.

Transitional Medicaid families will now be required to report quarterly instead of monthly. When Transitional Medicaid was first implemented, monthly reporting was instituted because the monthly reporting automated system was in place in EIS. Federal regulations have always required a quarterly report in Transitional Medicaid. Since Work First now has quarterly reporting requirements, Transitional Medicaid will change to quarterly reporting.

The last month families report monthly will be in the reports generated in August for September. During the 1<sup>st</sup> week of September, the State will mail families in months one through nine of Transitional Medicaid a letter explaining the new quarterly reporting requirement. A copy of the letter is attached.

On September 25<sup>th</sup> the State will generate and issue quarterly reports for cases that are in the 3<sup>rd</sup>, 6<sup>th</sup> and 9<sup>th</sup> months of Transitional Medicaid. MA-3357, Extended Medicaid for Working Families, contains detailed implementation instructions. It will be mailed to the counties in September.

If you have questions, please contact the Medicaid Eligibility Unit at (919) 857-4019.

Nina M. Yeager  
Director

NMY:db

RETURN ADDRESS AREA

MAILING ADDRESS  
AREA

Dear Parent/Guardian:

On September 25, the report you complete for Medicaid will change from monthly to quarterly (every three months). This means you may or may not receive a report to be returned in October. The new quarterly report will be mailed to families who are in their 3<sup>rd</sup>, 6<sup>th</sup>, or 9<sup>th</sup> month of Transitional Medicaid. Please read below to learn how the reporting rules have changed:

1. Under the current rules, Medicaid sends you a report every month to complete. You complete the report by reporting information for the previous month. With the report, you only attach proof of income and child care expense for the month you are reporting.
2. In September, Medicaid will send you one report every three months. You will report for three months instead of one. It will be necessary for you to provide income and child care information for the three months shown on the report. Because of the change from monthly to quarterly reporting, the first report will ask you to report income for one or two months that you may already have reported.
3. If you have already sent information for any months requested on the report you don't have to send it again. Write on the report that the information has been sent in. You only need to report for the months you have not provided information.
4. You must sign, date, and return the report for it to be considered complete. If information for any of the three months is missing, the report will be considered incomplete. You will be evaluated for other Medicaid.

If you have questions about this letter, call your local Department of Social Services. You may also call CARE-LINE, Information and Referral Services, at 1-800-662-7030.

Division of Medical Assistance

September 2001

(Vea el reverso de esta carta en Español)

RETURN ADDRESS AREA

MAILING ADDRESS  
AREA

Estimado Padre/Guardian:

El formulario que usted llena para Medicaid cambiará el 25 de septiembre. Medicaid le enviará el formulario cada trimestre en vez de cada mes. No todas las familias recibirán un formulario para regresar en octubre. El formulario trimestral se le enviará a las familias que han recibido 3, 6, o 9 meses de Transitional Medicaid (Medicaid de Transición). Lea lo siguiente para enterarse como han cambiado las reglas.

1. Actualmente, Medicaid le envía un formulario cada mes. En este formulario usted reporta sus ingresos del mes anterior y gastos por cuidado de niños. Usted regresa el formulario con los comprobantes de sus ingresos y gastos por cuidado de niños.
2. A partir del mes de septiembre, Medicaid le enviará el formulario cada tres meses en vez de cada mes. En el formulario, usted reportará los ingresos de tres meses y los gastos por cuidado de niños. Durante el cambio del sistema mensual al trimestral, el primer formulario le pedirá comprobantes de meses que posiblemente usted ya envió.
3. Si usted ya envió la información que se le pide en el formulario, usted no tiene que enviar la misma información otra vez. Escriba en el formulario que usted ya envió esa información. Solamente tiene que reportar información que aun no ha reportado.
4. El formulario trimestral no está completo si falta su firma, la fecha en que lo firmó, o información de alguno de los tres meses. Si esto pasa, se hará una evaluación para ver si califica para otro programa de Medicaid.

Si tiene preguntas acerca de esta carta, por favor llame al Departamento de Servicios Sociales de su localidad. También puede llamar a CARE-LINE, Línea de Información y Recursos, al 1-800-662-7030. Se le atenderá en Español.

División de Asistencia Médica

septiembre 2001

(See the other side of this letter in English)