



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

Pat McCrory
Governor

Richard O. Brajer
Secretary

Dave Richard
Deputy Secretary for Medical Assistance

July 5, 2016

Re: Health Insurance Marketplace Applications

Dear County Director of Social Services:

With the implementation of the Affordable Care Act on January 1, 2014, individuals were granted the opportunity to submit applications for health insurance to the Marketplace. These applications were screened for potential eligibility for Medicaid or NC Health Choice. The applications were supposed to be sent to the State for a full determination. Due to technical issues by the Centers for Medicare and Medicaid Services (CMS), some of these applications were never sent. Over the next couple of weeks, the Division of Medical Assistance (OMA) will be sending out notices to these applicants with instructions on what steps are needed to be taken (see attachment). The notice will include the original application date. The County DSS may see an increase in calls with questions concerning these notices. The applicant does not have to take any action if:

- They are already receiving Medicaid or NC Health Choice and received during the original application period, or
- They are already receiving health coverage through the Marketplace, or
- They already applied through their local county department of social services, determined ineligible, and their information has not changed.

They will be instructed to contact their local county department of social services within **30 days** of the date of the notice if:

- They do not have Medicaid or NC Health Choice and want to see if they may be eligible, or
- They think they were eligible when they first applied. Medicaid may help pay for certain services incurred at that time. It does not matter if they were determined eligible after the original application date.

If the individual contacts your agency and provides the notice, take the following action:

1. Determine whether the individual was eligible and receiving Medicaid or NC Health Choice during the time of the original application, or
2. Determine whether the individual made an application through ePASS or the County DSS at the time and was determined ineligible.

3. If the individual was not receiving Medicaid or NC Health Choice during the time of the original application or had not submitted an application during the original time period, take the following action:

P2/6 traditional cases (e.g. ABD or Medically Needy cases)

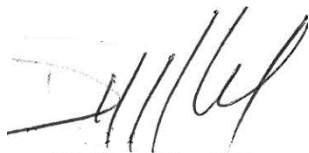
- A. Enter an "administrative" application using the original date of application on the notice.
- B. Follow all application processing rules to determine eligibility.
- C. If eligible, request a time-limit override, as necessary.
- D. If eligibility begins more than 12 months prior to current date, determine eligibility for any subsequent certification period.
- E. If ineligible, deny the application using appropriate notice. Evaluate for all programs prior to denying the application.

P1 MAGI-related cases

- A. Enter an "admin recertification" application using the original date of application on the notice. Administrative applications are not currently available in P7.
- B. Follow all application processing rules to determine eligibility.
- C. If eligible, request a time-limit override, as necessary.
- D. If eligibility begins more than 12 months prior to current date, determine eligibility for any subsequent certification period.
- E. If ineligible, deny the application using appropriate notice. Evaluate for all programs prior to denying the application.

If you have any questions, please contact the Operational Support Team (OST) at ost.policy.questions@dhhs.nc.gov.

Sincerely,



Dave Richard

XXXX XX, 2016

[Beneficiary Name]
[Address 1]
[Address 2]
[City], [State], [Zip Code]

[Application Date]
[Application ID]

Dear [Beneficiary Name]:

We are sending this notice to inform you we are following up on the application you submitted to the Health Insurance Marketplace on the application date listed above. When you completed your application, the Marketplace screened your application for potential eligibility for Medicaid or NC Health Choice, North Carolina's Children's Health Insurance Program (CHIP). Your application information was supposed to be sent to the Division of Medical Assistance (DMA) for a complete determination to see if you or someone in your household qualified for Medicaid or NC Health Choice. Due to technical issues, your application wasn't sent to NC Medicaid or NC Health Choice agency, and we are contacting you about the next steps to take.

What should you do next?

You don't have to take action if:

- ./ **You (and/or other people listed on your application) already have health coverage through the Marketplace** and aren't interested in Medicaid or NC Health Choice coverage now. You don't need to do anything to keep your current coverage.
- ./ **You (and/or other people listed on your application) already applied for Medicaid or NC Health Choice directly through your local county department of social services**, and they told you that you weren't eligible and none of your information has changed.
- ./ **You (and/or other people listed on your application) are currently enrolled in Medicaid or NC Health Choice coverage and don't have other Marketplace coverage**. You don't need to do anything to keep your current coverage.

You should take action if:

- ./ **You (and/or other people listed on your application) don't have Medicaid or NC Health Choice and still want to see if you may be eligible for benefits. You can do the following:**
 - o Contact your [local County Department of Social Services](#). You must take this letter with you to apply for benefits during this period.
- ./ **You (and/or other people listed on your application) think you were eligible for Medicaid or NC Health Choice when you first applied**. If you were enrolled in Medicaid or NC Health Choice after the application date listed above or you don't have Medicaid or NC Health Choice now, contact your local county department of social services. Medicaid may be able to help pay for certain medical services if you were eligible at the time you first applied.

Contacting your local county department of social services doesn't guarantee that you will get Medicaid or NC Health Choice coverage. It is just giving you a chance to have the agency look at your information and see if you can get Medicaid or NC Health Choice for this period of time. To find out more about Medicaid and NC Health Choice eligibility, and to get contact information for local county department of social services, visit www.ncdhhs.gov.

If you don't contact the Marketplace Call Center or your local county department of social services within **30 days**, we'll assume you don't want to see if you can still get Medicaid or NC Health Choice.

Should you have further questions regarding Medicaid, or North Carolina Health Choice, you may call the Department of Health and Human Services (DHHS) Customer Support Center, toll free at 1-800-662-7030 (English/Spanish) or 1-877-452-2514 (Note: this is a TTY number that is for deaf or hearing impaired callers). The DHHS Customer Support Center is open from 8:00 a.m. until 5:00 p.m., Monday - Friday.