

1 10A NCAC 23C .0201 is proposed for reoption with substantive changes as follows:

2
3 **SECTION .0200 – APPLICATION PROCESSING, MONITORING AND CORRECTIVE ACTION**

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5 **10A NCAC 23C .0201 APPLICATION PROCESSING STANDARDS**

6 (a) The county department of social services shall comply with the following standards in processing applications:

- 7 (1) A decision ~~shall be made within the timeframes set out in G.S. 108A-70.37. on an individual's~~
8 ~~eligibility for Medicaid shall be made within 45 calendar days from the date of application for~~
9 ~~Medicaid except for applications in which a disability determination has already been made or is~~
10 ~~needed. For those applications, a decision on an individual's eligibility shall be made within 90 days~~
11 ~~from the date of application. These timeframes shall apply in accordance with 42 CFR 435.912.~~
12 ~~435.911.~~
- 13 (2) Only require information or verification ~~necessary~~ to establish eligibility for assistance;
- 14 (3) Make a minimum of at least two requests for all ~~necessary~~ information from the applicant or third
15 party;
- 16 (4) Allow a minimum of at least 12 calendar days between the initial request and a follow-up request
17 and at least 12 calendar days between the follow-up request and denial of the application;
- 18 (5) Inform the client in writing ~~writing, and verbally when possible~~, of the right to request help in
19 obtaining information requested from the client. The county department of social services shall not
20 discourage any client from requesting such help;
- 21 (6) An application may pend up to six months for verification that the deductible, a defined in 10A
22 NCAC 23A .0201, deductible has been met or disability established.
- 23 (7) When a hearing decision reverses the decision of the county department of social services ~~County~~
24 ~~Department of Social Services~~ on an application, pursuant to 10A NCAC 21A .0303, the application
25 shall be reopened within five business working days from the date the final appeal decision is
26 received by the county department of social services ~~County Department of Social Services~~. ~~If the~~
27 ~~county department of social services has all of the information needed to process the application, no~~
28 ~~additional information is needed~~, the application ~~shall~~ must be processed within five additional
29 business working days. If additional information is needed pursuant to the final decision, the county
30 shall make such requests in accordance with this rule. ~~rules for all applications~~. The first request
31 for the additional information shall be made within five business working days of receipt of the final
32 appeal decision. The application shall be processed within five business workdays of receipt of the
33 last piece of required information.

34 (b) The county department of social services shall obtain verification, as defined by 10A NCAC 23A .0102,
35 ~~verification~~ other than the applicant's statement for the following:

- 1 (1) Any element requiring medical verification. This includes verification of disability, ~~pregnancy,~~
2 incapacity, emergency dates for aliens referenced in the Medicaid State Plan, 10A NCAC 23E
3 ~~.0102(e)~~, incompetence, and approval of institutional care;
- 4 (2) Proof a deductible has been met;
- 5 (3) Legal alien status;
- 6 (4) Proof of the rebuttal value for resources and of the rebuttal of intent to transfer resources to become
7 eligible for Medicaid. When a client ~~an applicant or recipient~~ disagrees with the determination of
8 the county department of social services on the value of an asset, then the client ~~applicant/recipient~~
9 must provide proof of what the value of the asset is;
- 10 (5) Proof of designation of liquid assets for burial;
- 11 (6) Proof of legally binding agreement limiting resource availability;
- 12 (7) Proof of valid social security number or application for a social security number;
- 13 (8) Proof of reserve reduction when resources exceed the allowable reserve limit for Medicaid;
- 14 (9) Proof of earned and unearned income, including deductions, exclusions, and operational expenses
15 when the applicant or caseworker ~~Income Maintenance Caseworker~~ has or can obtain the
16 verification; and
- 17 (10) Any other information for which the applicant does not know or cannot give an estimate.

18 (c) The county department of social services shall be responsible for verifying or obtaining ~~verify or obtain~~ an item
19 of information when:

- 20 (1) A fee must be paid to obtain the verification;
- 21 (2) It is available within the agency;
- 22 (3) The county department of social services is required by federal law to assist or to use interagency
23 or intra-agency verification aids;
- 24 (4) The applicant requests assistance; or
- 25 (5) A representative does not accept responsibility for obtaining the information and the applicant is:
26 (A) ~~The applicant is physically, mentally, or otherwise~~ physically or mentally incapable of
27 obtaining the information; ~~information,~~ or is
28 (B) unable to speak English or read and write in English; ~~write,~~ or is
29 (C) housebound, hospitalized, or institutionalized. ~~institutionalized, and a representative does~~
30 ~~not accept responsibility for obtaining the information.~~

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32 *History Note:* Authority G.S. 108A-54; 108A-54.1B; 108A-70.37; 42 C.F.R. 435.911; 435.912; 435.952;
33 Alexander v. Flaherty, V.S.D.C., W.D.N.C., File No. C-C-74-183, Consent Order Filed 15
34 December 1989; Alexander v. Flaherty Consent Order filed February 14, 1992; Alexander v. Bruton
35 Consent Order dismissed Effective February 1, 2002;
36 Eff. September 1, 1984;
37 Amended Eff. April 1, 1993; August 1, 1990;

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Temporary Amendment Eff. March 1, 2003;
Amended Eff. August 1, 2004;
Transferred from 10A NCAC 21B .0203 Eff. May 1, 2012; ~~2012~~.
Readopted Eff. May 2019.