- 10A NCAC 23G .0304 is readopted with changes as published in 33:13 NCR 1381-1392 as follows:

2	
3	10A NCAC 23G .0304 CHANGE IN SITUATION
4	(a) For the purposes of this Rule, a "change in situation" includes: change in [of] situation includes but not limited
5	t <mark>o:</mark>
6	(1) Change of address;
7	(2) Change in living arrangement:
8	(3) Adding or deleting a budget unit member;
9	(4) Increase or decrease in income;
10	(5) Change in reserve:
11	(6) Cessation of disability or blindness;
12	(7) Parent or parents are no longer incapacitated or unemployed;
13	(8) Change in responsible relative; or
14	(9) Change in Medicaid program category.
15	(b) The Medicaid client or his or her representative shall report any change in situation in the budget unit or household
16	as defined by 42 C.F.R. 435.603 that affects eligibility to the county department of social services within 10 calendar
17	days of knowledge of the change. 42 C.F.R. 435.603 is incorporated by reference, including subsequent amendments
18	and editions, available and free of charge at https://www.ecfr.gov.
19	(c) Once the county department of social services learns from any source that there has been a change in situation that
20	affects eligibility, it shall verify that information by reviewing its files or electronically as defined by 42 C.F.R.
21	435.949, which is incorporated by reference including subsequent amendments and editions, and available free of
22	charge at https://www.ecfr.gov. When the change in situation cannot be verified from its files or electronically, it shall
23	send a notice of the need to obtain verification, as defined by 10A NCAC 23A .0102, of the change. No notice shall
24	be sent if the change in situation can be verified in the county department of social services' files or electronically.
25	(d) For Medicaid <u>applications, applications, once the county department of social services learns from any source that</u>
26	there has been a change in the budget unit's situation [that impacts eligibility,] they shall notify the applicant within
27	five[ business] work days of the need to [obtain verification, as defined by 10A NCAC 23A .0102, of ]verify the
28	change. the application processing standards set forth in 10A NCAC 23C .0201 shall apply. For the purposes of this
29	Rule, a] A ["change in situation" includes: ] change in [of] situation includes but not limited to:
30	(1) Change of address; [address;] or
31	(2) <u>Change in living arrangement,</u> [arrangement;] or
32	( <del>3) Adding or deleting a budget unit member,</del> [member;] or
33	(4) <u>Increase or decrease in income,[</u> income,] or
34	(5) Change in reserve, [reserve;] or
35	(6) Cessation of disability or blindness, [blindness;] or
36	(7) Parent or parents are no longer incapacitated or unemployed, [unemployed;] or
37	<del>(8) Change in responsible relative,</del> [ <mark>relative;</mark> ] <del>or</del>

1	<del>(9)</del>		
2	(e) For an <u>activ</u>	ve case with an ongoing certification period, ongoing Medicaid case, once the county department of	
3	social services l	earns from any source that there has been a change in <mark>t<del>he budget unit's</del>- <u>situation,</u> situation <u>it they</u> shall</mark>	
4	review the case <del>promptly and appropriate</del> and determine eligibility. action Processing shall be completed within 30		
5	calendar days at	fter the agency learns of the change. change in situation.	
6	<del>(c) The Medica</del>	<mark>iid client or his</mark> [ <mark>or her</mark> ] <mark>representative shall report any change in situation that</mark> [ <mark>affects</mark> ] might affect	
7	eligibility within	n <u>10 calendar days to the county department of social [services within 10 calendar days of knowledge</u>	
8	<mark>the change.</mark> ] <mark>ser</mark>	<del>vices.</del>	
9			
10	History Note:	Authority G.S. 108A-54; <u>108A-54.1B; <mark>42 C.F.R. 435.603;</mark> 4</u> 2 C.F.R. 435.916; <mark>42 C.F.R. 435.949</mark> ;	
11		Eff. September 1, 1984;	
12		Amended Eff. August 1, 1990;	
13		Temporary Amendment Eff. August 22, 1996;	
14		Amended Eff. August 1, 1998;	
15		Transferred from 10A NCAC 21B .0409 Eff. May 1, <u>2012; <del>2012.</del></u>	
16		<u>Readopted Eff. <mark>October 1,</mark>[ <del>May 1,]</del> 2019.</u>	
17			
18			
19			
20			



## STATE OF NORTH CAROLINA OFFICE OF ADMINISTRATIVE HEARINGS

Mailing address: 6714 Mail Service Center Raleigh, NC 27699-6700 Street address: 1711 New Hope Church Rd Raleigh, NC 27609-6285

July 19, 2019

Shazia Keller, Rulemaking Coordinator Division of Health Benefits Sent via email only: Shazia.Keller@dhhs.nc.gov

Re: Objection to Rule 10A NCAC 23G .0304

Dear Ms. Keller:

At its meeting yesterday, the Rules Review Commission objected to the above-captioned rule in accordance with G.S. 150B-21.10.

The Commission objected to the Rule for ambiguity. Specifically, the Commission found that the Rule is unclear if the individuals addressed in Paragraph (b) will receive the notice required by Paragraph (a). In addition, it is unclear if the term "change of situation" is intended to apply to Paragraph (b), as that term is not used in the Paragraph; instead, Paragraph (b) refers to "a change in the budget unit's situation."

Please respond to this letter in accordance with the provisions of G.S. 150B-21.12. If you have any questions regarding the Commission's actions, please let me know.

Sincerely,

Amanda J. Reeder Commission Counsel

Administration 919/431-3000 fax:919/431-3100 Rules Division 919/431-3000 fax: 919/431-3104

Judges and Assistants 919/431-3000 fax: 919/431-3100 Clerk's Office 919/431-3000 fax: 919/431-3100 Rules Review Commission 919/431-3000 fax: 919/431-3104 fa

Civil Rights Division 919/431-3036 fax: 919/431-3103 1 2 10A NCAC 23G .0304 is readopted with changes as published in 33:13 NCR 1381-1392 as follows:

## 3 10A NCAC 23G .0304 CHANGE IN SITUATION

4 (a) For Medicaid applications, once the county department of social services learns from any source that there has 5 been a change in the budget unit's situation that impacts eligibility, they shall notify the applicant within five business 6 work days of the need to obtain verification, as defined by 10A NCAC 23A .0102, of verify the change. For the 7 purposes of this Rule, a A "change in situation" includes: change in [of] situation includes but not limited to: Change of address, address; or 8 (1)9 (2)Change in living arrangement, arrangement; or 10 (3) Adding or deleting a budget unit member, member; or Increase or decrease in income, income; or 11 (4)12 Change in reserve, reserve; or (5) 13 (6)Cessation of disability or blindness, blindness; or 14 (7)Parent or parents are no longer incapacitated or unemployed, unemployed; or 15 (8) Change in responsible relative, relative; or (9) Change in Medicaid Aid program category. Program Category. 16 17 (b) For an ongoing Medicaid case, once the county department of social services learns from any source that there 18 has been a change in the budget unit's <u>situation</u>, situation it they shall review the case promptly and appropriate action 19 shall be completed within 30 calendar days after the agency learns of the change, change in situation. 20 (c) The Medicaid client or his or her representative shall report any change in situation that affects might affect 21 eligibility within 10 calendar days to the county department of social services within 10 calendar days of knowledge 22 the change. services. 23 24 Authority G.S. 108A-54; 108A-54.1B; 42 C.F.R. 435.916; History Note: 25 Eff. September 1, 1984; 26 Amended Eff. August 1, 1990; 27 Temporary Amendment Eff. August 22, 1996; 28 Amended Eff. August 1, 1998; 29 Transferred from 10A NCAC 21B .0409 Eff. May 1, 2012; 2012. 30 <u>Readopted Eff. June 1, May 1, 2019.</u> 31 32 33

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## **REQUEST FOR TECHNICAL CHANGE**

AGENCY: DHHS/ Division of Health Benefits

RULE CITATION: 10A NCAC 23G .0304

## DEADLINE FOR RECEIPT: Friday, May 10, 2019

The Rules Review Commission staff has completed its review of this Rule prior to the Commission's next meeting. The Commission has not yet reviewed this Rule and therefore there has not been a determination as to whether the Rule will be approved. You may call our office to inquire concerning the staff recommendation.

In reviewing this Rule, the staff recommends the following technical changes be made:

In (a), line 7, put "change of situation" in quotation marks.

Also on line 7, delete "but not limited to" and just state "includes:"

In (a)(5), line 12, remove the underlining from "reserve"

In (a)(9), what is "Program Category" and why is it capitalized?

Please retype the rule accordingly and resubmit it to our office at 1711 New Hope Church Road, Raleigh, North Carolina 27609.

1 2 10A NCAC 23G .0304 is readopted as published in 33:13 NCR 1381-1392 as follows:

3 10A NCAC 23G .0304 CHANGE IN SITUATION

4 (a) For Medicaid applications, once the county department of social services learns from any source that there has

5 been a change in the budget unit's situation that impacts eligibility, they shall notify the applicant within five business

6 work days of the need to obtain verification, as defined by 10A NCAC 23A .0102, of verify the change. For the

7 <u>purposes of this Rule, a A change in of situation includes but not limited to:</u>

- 8 (1) Change of address, address; or
- 9 (2) Change in living arrangement, arrangement; or
- 10 (3) Adding or deleting a budget unit member; or
- 11 (4) Increase or decrease in income; or
- 12 (5) Change in <u>reserve</u>, <u>reserve</u>; or
- 13 (6) Cessation of disability or <del>blindness</del>, <u>blindness</u>; <del>or</del>
- 14 (7) Parent or parents are no longer incapacitated or <del>unemployed, <u>unemployed</u>; or</del>
- 15 (8) Change in responsible relative, relative; or
- 16 (9) Change in <u>Medicaid</u> Aid-Program Category.

(b) For an ongoing Medicaid case, once the county department of social services learns from any source that there
has been a change in the budget unit's <u>situation</u>, situation they shall review the case promptly and appropriate action

19 shall be completed within 30 calendar days after the agency learns of the <u>change</u>. <del>change in situation</del>.

20 (c) The Medicaid client or his or her representative shall report any change in situation that affects might affect

eligibility within 10 calendar days to the county department of social services within 10 calendar days of knowledge
the change. services.

23 24

History Note: Authority G.S. 108A-54; <u>108A-54.1B</u>; 42 C.F.R. 435.916;

25 *Eff. September 1, 1984;* 

26 Amended Eff. August 1, 1990;

27 Temporary Amendment Eff. August 22, 1996;

28 Amended Eff. August 1, 1998;

29 Transferred from 10A NCAC 21B .0409 Eff. May 1, <u>2012; 2012.</u>

30 <u>Readopted Eff. May 1, 2019.</u>

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