



B. J. Walker, Commissioner

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**MEDICAID MANUAL (OFI Policy Manual, Volume II) Transmittal NO.31**

**TO:** County Departments of Family and Children Services  
State DFCS Staff

**FROM:** Dave Statton, Interim Director  
Division of Family and Children Services

**RE:** Medicaid Policy Updates/Changes

**PURPOSE:** For Family Medicaid, changes were made in the Verification, PCK and PCK Rebounds sections to reflect that income verification from PeachCare is acceptable for Medicaid. The Citizenship/Alienage/Identity section was updated with several new acceptable sources of identity. The Treatment of Income section was revised to better align with the other eligibility programs, and the Prospective Budgeting section was updated with the proper procedures for budgeting OCSS income. The Notification section was updated to reflect the change in timely notice from 10 to 14 days. Minor changes were also made in the Treatment of Income, Self Employment, and Family Medicaid Changes sections. The Administrative Reviews section was updated with information on ASO/PERM reviews and their requirements. Appendix J was re-formatted to follow the layout of Appendix I. For ABD, minor changes were made in Application processing, TPL, Burial Funds, and Medicare Buy-In. Appendix I was updated with new procedures for adding DRA transfer of resources, updating a partial month transfer penalty and entering SSI income in LA-D AUs with PL/CS. For Children in Placement, instructions were added on how to verify insurance coverage or termination of insurance coverage when insurance companies won't share information due to HIPAA regulations. The resource section was updated with a new section explaining the Georgia Medicaid for Workers with Disabilities program. The forms section was updated with new versions of the 809, 942, PeachCare Report Back form, Providing Verification of Citizenship (SP), and QIT Template. A fact sheet was added for the GMWD program referenced above, and a new manual Quarterly Report Form was added. Please refer to the chart attached for specific changes.

**DISCUSSION:**

Specific changes to the Sections are discussed briefly under the Comments Section below.

**UPDATES:**

**MANUAL TRANSMITTAL 31**

Section	Instructions for Manual Maintenance	Page	Comments
2051	Remove and Replace	2	Added statement that income verification received from PCK is acceptable for Medicaid.
2060	Remove and Replace	4,9	Page 4, updated 6 <sup>th</sup> bullet under mandatory forms. Page 9, Deleted all information from the TPL line in the chart.
2194	Remove and Replace	2	Under Exception, added line that if a child is over PCK income

			limit, do not refer child to PCK and look at FM-MN
2205	Remove and Replace	3	Changed Suite number for SMEU mailing address
2210	Remove and Replace	3	Added statement to document reason why AU was not required to apply for any potential other benefits
2215	Remove and Replace	4-5	Under verification of identity, added driver's license, criminal offender or sexual predator matches from databroker to acceptable forms of identity. Added data matches with marriage, divorce or death records on vital records index, and vehicle registration and real property records from databroker to list of 3 corroborating documents. For children under 16, added DMA550 to acceptable documents for identity.
2230	Remove and Replace	1,2,7	Page 1 and 2-Changed 1 <sup>st</sup> sentence in both paragraphs under DMA285. Page 7- Added instructions for handling verification of insurance coverage for children in placement.
2312	Remove and Replace	2	Bolded exception under Non-FBR COAs paragraph and updated 2 <sup>nd</sup> bullet at bottom of page.
2398	Remove and Replace	3	Added DCH website address for downloading Estate Recovery Brochure.
2405	Remove and Replace	6	Added "Work Number" to acceptable means of verifying income. Added note about proper use of the Work Number.
2415	Remove and Replace	3	Added note that state and local income taxes can be allowable deductions, added link to deduction section on IRS website.
2499	Remove and Replace	1-32	Updated/added definitions to better align with TANF and Food Stamp income sections.
2653	Remove and Replace	2,3,5	Page 2, specified that check stubs should be 4 current consecutive stubs. Page 3, updated minimum verification requirements for income. Page 5, added procedures for budgeting OCSS income to chart 2653.2.
2701	Remove and Replace	1-3	Changed timely notice period from 10 to 14 days, corrected reference to Hearings section from Appendix D to B
2712	Remove and Replace	3	Updated chart 2712.1 to say that vehicle values need to be verified, and that a new AU

			member must verify citizenship/identity.
2714	Remove and Replace	2-3	Page 2, added identity to step 1. Page 3, changed CSE to CSS.
2715	Remove and Replace	5	Added reference to Prospective budgeting section, changed CSE to CSS.
2718	Remove and Replace	1-2	Update section to state that PCK will verify income before sending rebounds back to RSM/DFCS. Updated info on how to complete report back process.
2752	Remove and Replace	5	Add 1 year time limit for keeping reports
2756	Remove and Replace	1	In last paragraph, reworded 2 <sup>nd</sup> sentence and deleted last part of the last sentence.
2817	Remove and Replace	2	Removed double sentence: "A court order must be initiated with six months of removal and contain `contrary to the welfare` language."
2929	Add		New section on the Georgia Medicaid for Workers with Disabilities Program.
Appendix D	Remove and Replace	30	Added Note for providing explanation for not requiring application for other benefits when potentially eligible.
Appendix F	Remove and Replace		Added providing verification of citizenship (SP), QRF, PeachCare Report back form. Updated versions of 809, 942, and QIT Template. Added GMWD fact sheet. Updated TOC
Appendix G	Insert in front of MT30 Cover Letter		Adds Cover Letter for MT31
Appendix H Overview	Remove and Replace		Updated section with ASO/PERM information and instructions. Added new Medicaid Quality Check form.
Appendix I	Remove and Replace	2,7,18,34,35	Added DRA transfer of resources discovered at review, updated entering SSI income in LA-D Aus with a PL/CS, updated a partial month transfer penalty.
Appendix J	Remove and Replace		Section rewritten to match style of Appendix I.
Main TOC	Remove and Replace		

**Pen and Ink Changes:**

Update the Record of Receipt of Manual Transmittals for ESS Policy Manual Volume 2, Medicaid.