

2050 - APPLICATION PROCESSING OVERVIEW

POLICY STATEMENT	The Medicaid application process begins with the agency's receipt of a signed application for assistance and is complete upon notification to the Assistance Unit (AU) of the eligibility determination.
BASIC CONSIDERATIONS	
Request for Information and Application	<p>An inquiry regarding public assistance programs can be made at any time, either in person, by mail, by telephone, or at another designated agency. Information regarding public assistance programs must be provided to any individual without requiring that an application be filed.</p> <p>An application must be provided to anyone upon request.</p> <p>An application may be requested in person, by mail, telephone, facsimile, e-mail, or at any designated agency.</p>
Where to Apply	The A/R may apply for Medicaid at numerous locations throughout the state. These include the local county DFCS office, Social Security Administration, health departments, and some hospitals and nursing homes. Applications are also available at local RSM Project offices. The A/R can use the RSM Project website to locate an office in their county. The website is www.rsm.dhr.state.ga.us . An application can also be requested by contacting the RSM Project at 1-800-809-7276.
Who May Apply	<p>Anyone may apply for Medicaid benefits, including the following individuals:</p> <ul style="list-style-type: none"> • the individual requesting assistance • a personal representative (PR) acting on behalf of the applicant. The PR can be a relative, friend, guardian or any person in a position to know the applicant's circumstances • the parent, specified relative or individual who provides/provided care and control of a child or deceased individual • an individual acting on behalf of an AU, including a representative of a private law firm or cost recovery company • a child requesting assistance for himself/herself • a Medicaid provider, for a newborn via DMA Form 550, Newborn Eligibility Certification Form or via the web portal.

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**BASIC
CONSIDERATIONS
(cont'd)**

**The Completed
Application (cont'd)**

If an individual requests an application by mail, the right to same day filing is met if the application is mailed to the individual on the same day s/he makes the request to the agency.

“Right to Same Day Filing” affects the following:

- beginning date for processing standard

determination of which three prior months may be considered for eligibility.

**Application
Date**

The date of application is the date the application form is received by the county office, whether in person, or by mail. When received via internet or facsimile, the date of application is the date the form was transmitted.

EXCEPTION: The application date is the day an application is received by a health department, disproportionate share hospital, public hospital or a federally funded, 330 health center, regardless of when the application is forwarded to the county office for processing. For PCK rebounds, the application date is the “create date” stamped on the VIDA system screen prints by RSM Project. Refer to [Section 2718](#).

**Application
Processing**

An application must be registered within 24 hours of receipt by the agency.

Eligibility for Medicaid must be determined under all COAs before an application is denied. Refer to [Section 2052](#), Continuing Medicaid Determination (CMD).

Eligibility for Medicaid coverage for the three months prior to the month of application must be considered for every Medicaid application filed.

Completion of the application process is defined as notification to the applicant of the approval or denial of Medicaid benefits.

An individual may withdraw an application for Medicaid at any time during the application process. A withdrawn application must be registered and denied. The applicant must be notified of the disposition of the withdrawn application.

Refer to [Section 2011](#), Health Information Portability and Accountability Act, for information regarding privacy of health information.