



# The Landscape of Medicaid Expansion in the Carolinas

**North Carolina providing healthcare  
coverage to more people through Medicaid**



## Quick Facts About North Carolina's Medicaid Expansion:

- North Carolina expanded who can get Medicaid starting December 1, 2023.
- Adults ages 19 through 64 earning up to 138% of the federal poverty line (e.g., singles earning about \$20,120/year or families of three earning about \$34,000/year) may be eligible.
- The best way to apply is in-person at DSS, with your authorized rep, by phone, fax, or mailed in applications. The processing time for applications can be up to 45 days. Applications submitted online may be processed faster if you choose to use EPASS.
- The coverage is comprehensive, covering many different types of services.
- Current beneficiaries with full Medicaid coverage will not see any changes.



## Most people can get NC Health Coverage through NC Medicaid if:

- You live in North Carolina
- You are ages 19 through 64 years old
- You are a citizen (some non-US citizens can also get health care coverage through Medicaid).
- And if your household income falls within the chart on the next slide.



Household size	Monthly income, before taxes
Single Adults	\$1,732/month or less
Family of 2	\$2,351/month or less
Family of 3	\$2,970/month or less
Family of 4	\$3,588/month or less
Family of 5	\$4,207/month or less
Family of 6	\$4,286/month or less




## What health services will North Carolina cover?

- Primary care so you can go to a doctor for a check-up or when you are not feeling well
- Hospital services when you need to stay overnight (inpatient) or when you can go home the same day (outpatient)
- Maternity and postpartum care if you are pregnant and after giving birth



## Health services covered continued:

- Vision and hearing services
- Prescription drug benefits
- Behavioral health
- Preventive and wellness services
- Dental and oral health services
- Medical-related devices and other therapies



## How long will it take to find out if I am eligible for Medicaid Expansion once I apply?

- It may take up to 45 days after you apply. Incomplete applications may take longer. If your application is incomplete or we need more information, you will hear from your local DSS office requesting additional information. You may be contacted by mail, phone, email and/or text message, so it is important to make sure your contact information is up to date and complete so your caseworker can reach you. You will receive a letter in the mail that will tell you if you are approved or denied. Authorized Representatives will receive the same communication.

Request for Information

To: \_\_\_\_\_ County Case No. \_\_\_\_\_
Address: \_\_\_\_\_ District No. \_\_\_\_\_
\_\_\_\_\_ Worker's Name \_\_\_\_\_
Date: \_\_\_\_\_ Telephone Number \_\_\_\_\_

We need additional information to process your Medicaid/Special Assistance application/re-enrollment. Provide this information by \_\_\_\_\_ to ensure that your application/re-enrollment is processed promptly. If you need more time, contact us.

If you cannot get the items checked below, there are other items we can use. Continue reading for other items we can accept.

- 1. Medical bills from \_\_\_\_\_ to present and any old unpaid medical bills.
2. Medical verification of pregnancy \_\_\_\_\_
3. FL-2 completed by doctor \_\_\_\_\_
4. Proof of income for \_\_\_\_\_ for the month(s) of \_\_\_\_\_
5. Proof of self-employment income and expenses from \_\_\_\_\_ or income tax return for the year \_\_\_\_\_
6. Bank account numbers or statement(s) showing balance for the months of \_\_\_\_\_
7. Bank Consent form/Release of Information forms signed by \_\_\_\_\_
8. Life insurance policies or the name of the insurance companies and policy numbers for \_\_\_\_\_
9. Proof of beneficiary of the annuity \_\_\_\_\_
10. Proof that North Carolina Medicaid Program is named as a Remainder Beneficiary for an annuity \_\_\_\_\_
11. Name and contact information for issuer of an annuity \_\_\_\_\_
12. Social Security Number for \_\_\_\_\_
13. Documentation of alien status for \_\_\_\_\_
14. Apply for Unemployment Benefits for \_\_\_\_\_
15. Apply for Social Security Disability for \_\_\_\_\_
16. DMA-5028, Consent for Release of Information, signed by \_\_\_\_\_
17. Health Insurance card or the name of the company and policy number \_\_\_\_\_
18. Proof of Citizenship and Identity for \_\_\_\_\_
19. Proof of State Residence for \_\_\_\_\_
20. Proof of homesite equity \_\_\_\_\_
21. Documentation to rebut a transfer of assets sanction or to prove a transfer of assets sanction will cause an undue hardship or both. (See attachment) \_\_\_\_\_
22. Other \_\_\_\_\_

Do you need help or more time to get the information to complete your application/re-enrollment?

- 1. Call your Medicaid caseworker \_\_\_\_\_ at \_\_\_\_\_ OR
2. Sign and return the bottom portion of this form to DSS.
I need help getting the information to complete my application / re-enrollment.
I need more time to get the information.

Applicant's Name \_\_\_\_\_ Telephone Number \_\_\_\_\_
Address \_\_\_\_\_



(Provider completes)

**North Carolina Division of Medical Assistance  
Notice of Case Status**

Enter Name and Address of County DSS

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NOTE:** DO NOT make this referral without the knowledge or consent of the patient and/or his family.

Please determine whether the patient is eligible for medical assistance under Title XIX Medicaid. Use the reverse side to notify us of your decision.

1. Patient's Name (First, MI, Last)		2. Telephone number	
3. Address			
4. Date of Birth	5. Social Security Number	6. Sex <input type="checkbox"/> Female <input type="checkbox"/> Male	
7. Spouse's Name			
8. Parent's/Guardian's Name (Give only if patient is a minor child)			
9. Inpatient Hospital Admission Date: _____ Month _____ Day 20 _____ Year			
10. Estimated Discharge Date: _____ Month _____ Day 20 _____ Year			
11. Daily Charges-to-Date: _____ Attached _____ Will be provided upon discharge.			
_____ Name of person completing form		_____ Date	_____ Title
Provider's Name and Address		Telephone Number	
Consent of Patient/Parent/Guardian to referral			
_____ Signature		_____ Date	_____ Relationship to Patient

Instructions

1. Provider:

- a. Do not make this referral without the knowledge or consent of the patient and/or his family.
- b. Prepare original and one copy. Send original to the county DSS and retain the copy for your files.

2. County:

See reverse side of this form for detailed instructions.

**North Carolina Division of Medical Assistance**  
**Notice of Case Status**  
**County Department of Social Services**

Enter name and Address of Provider

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

1. Name: (First, MI, Last)		
2. Individual ID Number	3. Aid Program/Category	4. Classification Code
5. This response acknowledges receipt of your referral and informs you of the status:		
a. <input type="checkbox"/> Medicaid authorization begins on: _____ Patient payment due hospital: \$ _____		
b. <input type="checkbox"/> An application has been filed and is being processed. You will be notified when the decision is made.		
c. <input type="checkbox"/> We are waiting for the applicant/recipient to return necessary information to make a determination of eligibility.		
d. <input type="checkbox"/> Medical information required to establish incapacity has not been returned from the patient's doctor. Form DMA-5006 is attached for completion. Please return to this office when completed.		
e. <input type="checkbox"/> The individual was notified on _____ to come to the agency to file an application for Medicaid.		
f. <input type="checkbox"/> Patient is not eligible for Medicaid.		
6. Carolina ACCESS <input type="checkbox"/> Yes <input type="checkbox"/> No		
Primary Care Provider is _____		(Name)
County Director Signature /Designee		Date


Instructions: County Department of Social Services

- A. Within 15 workdays after receipt, complete status information. Return original to the provider and retain a copy for your file.
1. If the patient is eligible, enter the Medicaid ID number in block 2.
  2. If the individual is eligible for dates of hospitalization, check block 5.a. and enter authorization from date.
  3. If the case has a deductible, enter in block 5.a., the amount of the deductible balance applied to the hospital charges on date of authorization. This amount must agree with the deductible balance amount entered in EIS.
- B. If block 5. b. c. d. or e. is checked, you must notify the provider of the final disposition. Note the final disposition on the file copy and send a copy to the provider.
- C. Use this form to notify the hospital of the deductible amount due the hospital for any hospitalized recipient whether or not hospital has initiated referral.**



## When does my Medicaid health coverage begin?

- You apply for Medicaid in December. Your application is not processed until January (or later). But you need care in December. If you are eligible, your Medicaid coverage will be retroactive to December 1. That means if you get care in December, your provider can bill for services that Medicaid covers. You should not have to pay out of pocket but you may have to pay a copay.



When does my Medicaid health coverage begin continued:

- You apply for Medicaid in January 2024 (or later) but have medical bills you need to pay from services you received in December 2023. When you apply for Medicaid, make sure you answer the questions that ask about medical bills from prior months. You can request that your Medicaid coverage be retroactive for up to three months before the month you applied. So, if you apply in March and you are eligible, Medicaid can pay bills for covered services from December, January and February. Remember, coverage under expansion can only go back to December 2023.

## APPENDIX E

### Medical Bills


This form or the medical bills are not required for you to submit an application. If needed, this information may be requested by a caseworker.


Do you, your spouse or children under the age of 21 need help paying medical bills for services received during the last three calendar months?  Yes  No

If yes, please provide a copy of the medical bills from the last 3 calendar months.

**\*If you do not have copies of your medical bills, please fill out the chart below.\***

◆ Tell us about your medical bills.		
Who owes the bill(s) Please give us the Patient's name	List the name of the doctor, clinic, hospital, telephone number and city where treated	Date of medical treatment

 **NEED HELP WITH YOUR APPLICATION?** Contact your County DSS (<http://www.ncdhhs.gov/dss/local/>) or call us at 1-800-662-7030. Para obtener una copia de este formulario en Español, llame 1-800-662-7030. If you need help in a language other than English, call 1-800-662-7030 and tell the customer service representative the language you need. We'll get you help at no cost to you. TTY users should call 1-800-452-2514.



Under the new rules, how much will people pay in monthly premiums and copays?

- You do not have to pay any monthly premiums. Medicaid pays the cost for most health care services. The highest copay is \$4 and that is only required for some services.



# Are non-U.S. citizens eligible for health care coverage through NC Medicaid?

Some non-U.S. citizens can get health coverage through Medicaid. To be eligible you must be:

- A person living in North Carolina
- A qualified non-citizen for at least five years
  - » This means a person must wait five years after receiving “qualified” immigration status before they can get Medicaid.
  - » There are exceptions. For example, refugees, asylees or lawful permanent residents who used to be refugees or asylees do not have to wait five years. Individuals without documents are not eligible for Medicaid unless they have an emergency condition as defined under federal law – such as someone in a car accident who is taken to the emergency room, labor and delivery, or a life threatening surgery, and etc.

## Immigration Status and Eligibility for Medicaid Express

Esc

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NC MEDICAID  
FOR MORE PEOPLE

NC Medicaid now covers people ages 19 through 64 with higher incomes. You may be able to get health care coverage through Medicaid even if you did not qualify before. Medicaid pays for doctor visits, yearly check-ups, emergency care, dental care, mental health and more – at little or no cost to you.

As of December 1, 2023, most people can get health care coverage through NC Medicaid if:

- You live in North Carolina
- You are ages 19 through 64
- You are a citizen ([some non-U.S. citizens can also get health care coverage through Medicaid](#)).
- And if your household monthly income falls within the chart below:

Household Size	2024 Monthly Income*
Single Adults	\$1,732 or less
Family of 2	\$2,351 or less
Family of 3	\$2,970 or less
Family of 4	\$3,588 or less
Family of 5	\$4,207 or less
Family of 6	\$4,826 or less

*\*Income limits are updated annually.*

Some non-U.S. citizens can get health coverage through Medicaid. To be eligible you must live in North Carolina and be a non-citizen with qualified immigration status. Many people in this category must wait five years before they can apply for Medicaid (although there are some exceptions, as explained below).

Qualified immigration status includes:

- Lawful Permanent Residents (LPR/Green Card Holder)
- Asylees
- Refugees
- Cuban/Haitian entrants
- Paroled into the U.S. for at least one year
- Conditional entrant granted before 1980
- Battered non-citizens, spouses, children or parents (“Battered” means someone who has experienced abuse from a family member.)
- Victims of trafficking and their spouse, child, sibling or parent or individuals with a pending application for a victim of trafficking visa
- Granted withholding of deportation (a specific situation similar to asylum)
- Noncitizen members of a federally recognized Indian tribe or American Indian born in Canada
- Citizens of the Marshall Islands, Micronesia and Palau who are living in one of the U.S. states or territories (referred to as Compact of Free Association or COFA migrants)

Some of the non-U.S. citizens on the list above do NOT have to wait 5 years to be eligible for Medicaid, including pregnant women, children under the age of 19, asylees, refugees, victims of trafficking, Cuban-Haitian Entrants, and people who now have LPR status and who were previously asylees, refugees, victims of trafficking, or Cuban-Haitian entrants. Also, all non-citizens from the list above who are connected to the military such as veterans, active-duty military (and their spouses and children) do not have to wait five years for Medicaid eligibility. All other non-citizens in the list above must wait five years from the time of receiving their qualified immigration status to be eligible for Medicaid.

If none of the qualified immigration statuses listed above apply to you:

If you are not a U.S. citizen or part of these immigration categories, but you would otherwise qualify for NC Medicaid, you may still apply to get emergency coverage that includes:

- **Payment for the costs of childbirth.** Get coverage for medical costs during labor and delivery. You can apply up to three months after birth.
- **Payment for emergency services.** Get coverage for the medical costs of treating an emergency, like a heart attack, stroke, or serious accident. You can apply up to three months after the emergency.

To get this emergency coverage, apply for NC Medicaid as normal – but you do not need to show documentation or answer questions about your immigration status.

Can my information be shared for immigration enforcement?

Medicaid does not report any information to law enforcement or Immigration and Customs Enforcement (ICE). Your information will be kept private and confidential. This includes information for your family members with different immigration statuses. Your information cannot be used for immigration enforcement purposes.

You only need to provide immigration status or Social Security numbers for family members who are applying for coverage. For instance, a parent who is not an eligible immigrant could apply on behalf of a child who is eligible. The parent would not need to provide their own immigration status. For more information on health insurance eligibility for immigrants, [read this brochure from the NC Justice Center](#).

Is applying or receiving Medicaid considered public charge?

No. Applying for or receiving Medicaid does not make someone a “public charge”. It will not affect your immigration status or your immigration application. Only three benefits are considered negatively if you are submitting an immigration application: Supplementary Security Income (SSI), Temporary Assistance for Needy Families (TANF), and Medicaid only if used for long-term hospitalization or nursing home care.



All other benefit and health programs are safe to use. If you are applying for Medicaid, you should not report any information to the state. For more information on public charge, read the [flyer from the NC Justice Center](#).

Press Esc to exit full screen

number for themselves if they are not applying for Medicaid. Medicaid does not report any information to the state.

#### Are undocumented immigrants eligible for Medicaid?

Undocumented immigrants are eligible for emergency Medicaid. However, undocumented immigrants are not eligible to enroll in federally funded health coverage including full Medicaid, CHIP, or Medicare, or to purchase coverage through the Health Care Marketplace (ACA). Undocumented immigrants are only potentially eligible for emergency Medicaid or labor and delivery services.

#### What are emergency Medicaid services and who is eligible?

Everyone is potentially eligible for emergency Medicaid as long as they meet the income and North Carolina state residence eligibility requirements (provide proof they live in North Carolina, such as photo ID with your address, a utility bill, a lease or documentation of employment). Undocumented non-U.S. citizens who do not qualify for full health coverage under Medicaid may be able to get coverage for emergency medical services. North Carolina has a state emergency medical review contractor who determines if the incident is a medical emergency and determines the dates that Medicaid could cover. The coverage is limited to certain dates, beginning with the date the medical emergency occurs and ending with the date the medical emergency is stabilized. For example, when someone is in a car accident and are taken to the ER or women who give birth and do not have insurance.

#### Who is eligible for Medicaid in a mixed immigration status household?

All applicants must meet state residence and income requirements. Parents can apply for themselves and/or their children.

- Parents who do not have a valid immigration status, are eligible for emergency services only.
- Their children may be eligible for full Medicaid if they have a qualified immigration status. This is true even if their parents do not have qualified immigration status.

If only one family member is applying for insurance or assistance, only the applicant(s) must provide immigration status information or their social security number. Other family members who are not applying do not have to provide immigration information.

#### What information do undocumented parents have to provide if they have children who are eligible for Medicaid?

Parent(s) who apply for their eligible children need to give the names of all members in their household, their mailing address, any verification of any income, and proof of state residency from the parent(s) to determine the child's eligibility along with a signed application. Parents do not need to give immigration information or a social security

#### Can people with Temporary Protected Status (TPS) apply for Medicaid?

No, people with TPS cannot apply for full health coverage through Medicaid. However, they may be eligible for emergency Medicaid as long as they meet the income and North Carolina state residence eligibility requirements. Pregnant women and children under 19 with TPS are eligible to apply for Medicaid if they meet all other eligibility requirements and are not subject to the five-year wait period. People with TPS can apply for coverage and help paying for insurance under the Health Care Marketplace (ACA).

#### Can Deferred Action for Childhood Arrivals (DACA) recipients get Medicaid?

No. Under rules issued by the Centers for Medicare and Medicaid Services (CMS), people with [Deferred Action for Childhood Arrivals](#) status are not considered lawfully present for purposes of health coverage eligibility. People with DACA are eligible for emergency Medicaid services when needed.

#### Are farmworkers with an H-2A visa eligible for Medicaid?

Farmworkers with a lawfully present status are potentially eligible if they are a pregnant woman or child under age 19. All other individuals are eligible to receive emergency Medicaid services. People with an H-2A visa can apply for coverage and help paying for insurance under the Health Care Marketplace.


#### Are nonimmigrant visa holders (including student, tourist, work, U visas and many more) eligible for Medicaid?

They are potentially eligible and exempt from the five-year bar if they are a pregnant woman or child under age 19. Nonpregnant adults who are 19 and older are only eligible for emergency Medicaid services. People applying only for emergency services are not required to provide documentation of immigration status. People with nonimmigrant visas who are residents of North Carolina can apply for coverage and help paying for insurance under the Health Care Marketplace.

**Need help? Schedule a free enrollment appointment with an expert Navigator.** Appointments can be scheduled online at <https://ncnavigator.net/schedule-online> or by phone at 1-855-733-3711. Navigators can help with both Health Care Marketplace and Medicaid applications, and services are available in 20+ languages.

For more information, visit [Medicaid.nc.gov/immigration](https://medicaid.nc.gov/immigration).





## Do parents have to meet additional requirements to get NC Medicaid?

- Parents who do not meet eligibility requirements for coverage as a Parent/Caretaker can still qualify under the expanded rules if they are aged 19 through 64 and meet other eligibility requirements. All children in the home under 21 years of age must have health insurance that meets the Affordable Care Act requirements. That health insurance could be Medicaid or private health coverage.



# What information do I need to apply?

It takes time to complete the application. Here is some of the information you will be asked to provide for each person applying:

- Full legal name
- Date of birth
- Social Security number (or immigration documents)
- North Carolina residency
- Income information (from paystubs, W-2 forms, tax returns or business records)

North Carolina uses external resources to verify the information you provide. If more information is needed, you will receive a letter in the mail from your local DSS.




<b>North Carolina Residency</b>	<ul style="list-style-type: none"><li>• A photo ID with your NC address listed, or</li><li>• A utility bill, or</li><li>• A lease or mortgage agreement, or</li><li>• Vehicle registration, or</li><li>• Documentation of employment, or</li><li>• If you do not have any documentation, you can check a box in ePASS labeled "NC Residency Declaration."</li></ul>
<b>Income</b>	<ul style="list-style-type: none"><li>• If you're <b>Employed</b> - pay stubs, employer verification or your most recent tax return to show proof of your income.</li><li>• If you're <b>Self-Employed</b> - your most recent tax return or copies of your business records. If you don't have that, you can fill out a <a href="#">Verification Form for Self-Employment Income and Expenses</a> form.</li></ul>
<b>Date of Birth</b>	<ul style="list-style-type: none"><li>• A photo ID with your date of birth listed, or</li><li>• Birth certificate.</li></ul>
<b>Social Security Number</b>	<ul style="list-style-type: none"><li>• A copy of your Social Security card, or</li><li>• Another official document containing your name and Social Security number, or</li><li>• A military ID card.</li></ul>
<b>Citizenship</b>	<ul style="list-style-type: none"><li>• Birth Certificate, or</li><li>• Passport.</li></ul>
<b>Immigration Status</b>	<ul style="list-style-type: none"><li>• A copy of your VISA/immigration card.</li></ul>




## What is limited Family Planning Medicaid and who is eligible?

- Family Planning Medicaid provides reproductive health care at no cost to people with incomes up to 195% of the federal poverty line – that’s about \$2,370 a month for a single person. It covers almost all methods of birth control, testing and treatment for sexually transmitted infections, preventive services and more.



## If I currently receive Family Planning benefits and am now enrolled in full coverage through NC Medicaid, what happens?

- You will get a letter from your local DSS letting you know you now have full Medicaid coverage. These initial letters have already gone out. You will then be assigned a health plan. If you want to change your health plan, you have 90 days to pick a new one. Your health plan will send you a packet in the mail. It will include a new Medicaid ID card. Your ID card also has the name of your primary care doctor. You can change your doctor through your health plan. Medicaid will pay for doctor visits, yearly check-ups, emergency care, mental health services and more – at little or no cost to you.



# What is ePASS? What is an enhanced ePASS account?

- ePASS is a website where people in North Carolina can apply for services like Medicaid. To apply for Medicaid online, visit [ePASS.nc.gov](https://ePASS.nc.gov) to start an application. Read our fact sheet to learn more about ePASS. An enhanced ePASS account allows you to do more online so you don't have to call or go in person to a local Department of Social Services. With an enhanced ePASS account, you can:
  - See applications you may have submitted
  - Report changes (like a change in address or income)
  - Complete recertification paperwork (if needed)
  - Upload documents for your application
  - View notices or messages from your caseworker
  - View office contact details
  - Appeal a Medical Assistance decision



# What is NCID and why do I need it?

- NCID stands for NC Identity Management. Having an NCID account helps protect your personal information. Anyone using ePASS to apply for Medicaid will need to create an NCID. You will be asked to create an account the first time you use ePASS. Instructions for creating an NCID account are online at:

<https://info.ncdhhs.gov/dhsr/es/pdf/how-to-create-NCIDAccount.pdf>

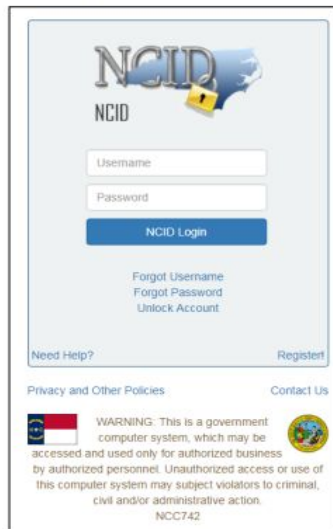


## HOW TO CREATE A NCID ACCOUNT

- If you have an existing NCID account, then you do not need to create a new one for the Enterprise System.
- It is recommended that you use either Microsoft Edge, Google Chrome, or Mozilla Firefox web browsers.


To create a NCID account, please complete the steps below.


1. Go to the [North Carolina Identity Management \(NCID\) website](#).
2. In the lower right corner, select "Register!"



The screenshot shows the NCID login and registration interface. At the top, there is a logo for NCID with a map of North Carolina and a padlock icon. Below the logo are two input fields for "Username" and "Password", followed by a blue "NCID Login" button. Underneath the button are links for "Forgot Username", "Forgot Password", and "Unlock Account". At the bottom of the main content area, there are links for "Need Help?" and "Register!". Below this is a section for "Privacy and Other Policies" and "Contact Us". A warning message is displayed in the center, flanked by the North Carolina state flag on the left and the NCID logo on the right. The warning text reads: "WARNING: This is a government computer system, which may be accessed and used only for authorized business by authorized personnel. Unauthorized access or use of this computer system may subject violators to criminal, civil and/or administrative action. NCC742".

3. Complete the new user registration process by selecting one of the user types from the list provided.



**North Carolina Identity Management** 

**New User Registration**

Please indicate your user type from one of the following categories:

<input type="radio"/> Individual	Request access to the State of North Carolina services as an individual or citizen.
<input type="radio"/> Business	Request access to the State of North Carolina services on the behalf of a business.
<input type="radio"/> State Employee	Currently employed or assigned to work for an agency within the State of North Carolina government.
<input type="radio"/> Local Government Employee	Currently employed or assigned to work for a North Carolina county or municipality.

This system is the property of the State of North Carolina and is for authorized use only. Unauthorized access is a violation of federal and state law. All software, data transactions, and electronic communications are subject to monitoring.

[North Carolina www.nc.gov](#) [Privacy and Other Policies](#) [Contact Us](#)



# What is an “Authorized Representative?”

- An Authorized Representative is an individual who is legally authorized or designated in writing by the person applying to act on their behalf. Only an Authorized Representative can complete a Medicaid application for someone else.



## What does an Authorized Representative need to do to help someone apply?

- A Authorized Representative form - Appendix C form signed by the patient.
- A voice signature designation (your local Department of Social Services can assist with this).
- The Authorized Representative can use ePASS but the AR must create an NCID.

## APPENDIX C


### Designation of Authorized Representative


You can give a trusted person permission to talk about this application with us, see your information, and act for you on matters related to this application, including getting information about your application and signing your application on your behalf. This person is called an “authorized representative.” If you ever need to change your authorized representative, contact the Marketplace or the Department of Social Services in the County where you live (<http://www.ncdhs.gov/dss/local>). If you're a legally appointed representative for someone on this application, submit proof with the application.

1. Name of Applicant/Beneficiary		
2. Name of Authorized Representative		
3. Address		Apt/Suite #
4. City	5. State	6. Zip code
7. Phone Number (    ) -		Language Preference

- I understand that by signing this authorization, I am allowing the above named individual to sign my application, complete my re-enrollment/redetermination, get official information about my case status, and act for me on all future matters with this agency.
- I understand that by signing this authorization, my authorized representative may view and discuss any information contained in my case file or pertaining to my case other than information from another source specifically designated as “Confidential” or “Do Not Release”.
- I understand that my authorized representative and I are responsible for any incorrect or incomplete information provided.
- I understand that I may revoke this designation of Authorized Representative at any time.

Applicant/Beneficiary Signature	Date
Authorized Representative Signature	Date

 **NEED HELP WITH YOUR APPLICATION?** Contact your County DSS (<http://www.ncdhs.gov/dss/local>) or call us at 1-800-662-7030. Para obtener una copia de este formulario en Español, llame 1-800-662-7030. If you need help in a language other than English, call 1-800-662-7030 and tell the customer service representative the language you need. We'll get you help at no cost to you. TTY users should call 1-800-452-2514.



## What if I do not have a physical address, mailing address or email address?

- **Physical Address:** You do not need a physical address to apply for Medicaid. However, you must confirm you are physically in North Carolina and plan to live here. You do not need to plan to stay permanently and do not need to have a fixed address.
- **Mailing address:** If you do not have a mailing address, enter an address where you can pick up mail or enter the address of your local DSS office. Find a DSS office near you at [ncdhhs.gov/localdss](https://ncdhhs.gov/localdss).
- **Email address:** You must have an email address to make an NCID and use ePASS. If you don't have an email address, you may apply at your local DSS office, by phone or by paper application.

# Long Term Care North Carolina Medicaid Nursing Home Eligibility

## Criteria:

### Financial Requirements-

- North Carolina residents have to meet an asset limit and an income limit in order to be financially eligible for Nursing Home Medicaid. The asset limit for a single applicant is \$2,000, and for married couples is 3,000 which means they must have less than this in countable assets.
- Countable assets include bank accounts, retirement accounts, stocks, bonds, certificates of deposit, cash and any other assets that can be easily converted to cash. An applicant's home does not always count as an asset
- The income limit for an applicant is the amount North Carolina Medicaid pays for nursing home care in the applicant's area of residence. This amount will vary depending on where you are in the state, but it can run as much as \$9,000/month. Almost all income is counted



## Vendor LTC referral process:

- A case manager referral is received for an LTC application via email.
- Complete screening with the patient, if eligible complete a MAD application.
- If the patient is unable to sign, a spouse cannot sign for patient. You will have to complete an incompetent letter, and the doctor will have to sign. Then as their AR we sign the application
- Next submit the application to DSS, include all medical bills with the unpaid balances from the past two years. If you know the facility the patient will discharge to, include that info on top of application (Ex. LTC/Discharge to ECHR 4/15/24)
- The FL2 will need to be completed and submitted to DSS by the LTC facility, we do not request these.
- Follow up for the LTC approval from DSS.



**Recipient Information**

Press Esc to exit full screen

1. Recipient Last Name: \_\_\_\_\_ 3. Recipient DOB: \_\_\_\_\_  
 4. Recipient ID #: \_\_\_\_\_ 5. Recipient Gender: \_\_\_\_\_ 6. SSN: \_\_\_\_\_  
 7. Admission Date (current location): \_\_\_\_\_ 8. Facility Name: \_\_\_\_\_ 9. PASRR #: \_\_\_\_\_  
 10. Facility Address: \_\_\_\_\_ 11. Provider Number: \_\_\_\_\_  
 12. Attending Physician Name/Address: \_\_\_\_\_  
 13. Relative Name/Address: \_\_\_\_\_  
 14. Current Level of Care:  Home  SNF  ICF  Hospital  Dom  Other: \_\_\_\_\_  
 15. Requested Level of Care:  Vent Care  Nursing Facility  NF Rehab  Spec. Hosp Rehab  Extended Care  
 OOS NF  OOS Vent  CAP/CH SNF  CAP/CH Hosp  CAP/DA SNF  CAP/DA ICF  Other: \_\_\_\_\_  
 16. Discharge Plan:  Home  SNF  ICF  Dom  Other: \_\_\_\_\_

**Diagnosis Information**

	Admitting Diagnosis (code AND description)	Date of Onset	Primary <input checked="" type="checkbox"/>
1			
2			
3			
4			
5			

**Patient Information**

Disoriented	Ambulatory Status	Bladder	Bowel
Constantly	Ambulatory	Continent	Continent
Intermittently	Semi-Ambulatory	Incontinent	Incontinent
Inappropriate Behavior	Non-Ambulatory	Indwelling Catheter	Colostomy
Wanderer	Functional Limitations	External Catheter	Respiration
Verbally Abusive	Sight	Communication of Needs	Normal
Injurious to Self	Hearing	Verbally	Tracheostomy
Injurious to Others	Speech	Non-Verbally	Other:
Injurious to Property	Contractures	Does Not Communicate	O2 PRN: Cont:
Other:	Activities Social	Skin	Nutrition Status
Personal Care Assistance	Passive	Normal	Diet
Bathing	Active	Other:	Supplemental
Feeding	Group Participation	Decubiti - Describe:	Spoon
Dressing	Re-Socialization		Parenteral
Total Care	Family Supportive		Nasogastric
Physician Visits	Neurological	Dressings:	Gastronomy
30 Days	Convulsions/Seizures		Intake and Output
90 Days	Grand Mal		Force Fluids
Over 180 Days	Partial Mal		Weight
	Frequency		Height
Special Care Factors	Frequency	Special Care Factors	Frequency
Blood Pressure		Bowel & Bladder Program	
Diabetic Urine Testing		Restorative Feeding Program	
PT (by licensed PT)		Speech Therapy	
Range of Motion Exercises		Restraints	

Medications - Name & Strength, Dosage and Route	
1.	7.
2.	8.
3.	9.
4.	10.
5.	11.
6.	12.

X-ray and Laboratory Findings/Date: \_\_\_\_\_

Additional Information: \_\_\_\_\_

Physician's Signature \_\_\_\_\_

Date \_\_\_\_\_

# NC MEDICAID FOR MORE PEOPLE



Beginning on Dec. 1, 2023, NC Medicaid now covers people ages 19 through 64 years with higher incomes. You may be able to get health care coverage through Medicaid even if you didn't qualify before.

Medicaid pays for doctor visits, yearly check-ups, emergency care, mental health and more – at little or no cost to you.

#### NC Medicaid covers most health services, including:

- **primary care** so you can go to a doctor for a check-up or when you are not feeling well
- **hospital services** when you need to stay overnight (inpatient) or when you can go home the same day (outpatient)
- **maternity and postpartum care** if you are pregnant and after giving birth
- **vision and hearing services**
- **prescription drug benefits** to pay for your medicines
- **behavioral health**
- **preventive and wellness services**
- **dental and oral health services**
- **medical-related devices and other therapies**

Most people will be able to get health care coverage through Medicaid if they meet the requirements below. If you were eligible before, you still are.

- **You live in North Carolina**
- **Age 19 through 64**
- **You are a citizen** (some non-U.S. citizens can also get health coverage through Medicaid)
- **If your household income** fits within the chart below:

Household Size	Annual Income
Single Adults	\$20,120 or less
Family of 2	\$27,214 or less
Family of 3	\$34,307 or less
Family of 4	\$41,400 or less
Family of 5	\$48,493 or less
Family of 6	\$55,586 or less

#### How to apply for Medicaid:



ePASS | [HealthCare.gov](https://HealthCare.gov)  
[ePASS.nc.gov](https://ePASS.nc.gov) | [HealthCare.gov](https://HealthCare.gov)



Paper application  
[medicaid.nc.gov/  
print-application](https://medicaid.nc.gov/print-application)



In person at your  
local DSS office  
[ncdhhs.gov/localDSS](https://ncdhhs.gov/localDSS)



Call DSS office  
[ncdhhs.gov/localDSS](https://ncdhhs.gov/localDSS)

Learn more at:  
[Medicaid.nc.gov](https://Medicaid.nc.gov)

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[NCDHHS.gov](https://NCDHHS.gov) • NCDHHS is an equal  
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# NC MEDICAID PARA MÁS PERSONAS



Desde el 1 de diciembre de 2023, NC Medicaid cubre a personas de 19 a 64 años que tienen ingresos más altos de lo que se permitía antes. Es posible que puedas obtener cobertura médica de Medicaid incluso si no calificaste antes.

Medicaid paga las visitas al médico, los chequeos médicos de rutina anuales, la atención de emergencia, servicios de salud mental y más, a bajo costo o sin costo para ti.

#### Medicaid cubre la mayoría de los servicios de salud, incluyendo:

- **atención primaria** para que vayas al médico para un chequeo de rutina o cuando no te sientas bien
- **servicios hospitalarios** cuando necesitas pasar la noche en el hospital (paciente hospitalizado) o cuando puedes irte a casa el mismo día (paciente ambulatorio)
- **atención de maternidad y posparto** si estás embarazada y después de dar a luz
- **servicios de visión y audición**
- **beneficios para pagar tus medicamentos recetados**
- **salud del comportamiento**
- **servicios preventivos y de bienestar**
- **servicios de salud dental y bucal**
- **dispositivos médicos y otras terapias**

La mayoría de personas podrán obtener cobertura médica a través de Medicaid si cumplen con los criterios a continuación. Y si eras elegible antes, todavía lo eres.

- **Vivir en Carolina del Norte**
- **Tener entre 19 y 64 años**
- **Ser ciudadano** (algunas personas que no son ciudadanos estadounidenses también pueden obtener cobertura médica a través de Medicaid)
- Y si los **ingresos de tu hogar** están dentro del cuadro a continuación:

Tamaño del hogar	Ingreso anual
Adultos solteros	\$20,120 o menos
Familia de 2 personas	\$27,214 o menos
Familia de 3 personas	\$34,307 o menos
Familia de 4 personas	\$41,400 o menos
Familia de 5 personas	\$48,493 o menos
Familia de 6 personas	\$55,586 o menos

#### Cómo solicitar Medicaid:



ePASS | [CuidadoDeSalud.gov](https://CuidadoDeSalud.gov)  
[ePASS.nc.gov](https://ePASS.nc.gov) | [CuidadoDeSalud.gov](https://CuidadoDeSalud.gov)



Solicitud impresa  
(en papel)  
[medicaid.nc.gov/  
solicitud-para-imprimir](https://medicaid.nc.gov/solicitud-para-imprimir)



En persona, en tu oficina  
local del Departamento de  
Servicios Sociales (DSS)  
[ncdhhs.gov/localDSS](https://ncdhhs.gov/localDSS)



Llamando a tu  
oficina local del DSS  
[ncdhhs.gov/localDSS](https://ncdhhs.gov/localDSS)

Obtén más información:

[MasMedicaid.nc.gov](https://MasMedicaid.nc.gov)

Departamento de Salud y Servicios Humanos  
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# NFV Healthcare Group

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At NFV Healthcare Group, we are a trusted partner to healthcare providers, demonstrating an unwavering commitment to delivering superior customized services to our clients. We place a strong emphasis on quality, prioritizing it over quantity. By staying adaptable to industry regulations and harnessing the power of technology, we optimize performance and drive positive change. Through tailored approaches, we aim to create quantifiable differences in revenue, efficiency, transparency, customer service, patient satisfaction, and community outreach. Please visit [www.nfvgroup.com](http://www.nfvgroup.com) and learn about the NFV difference.