

6. Medicaid Household Composition – Document in section 7 below all members of the applicant’s Medicaid household.

NOTE: Use MAGI Household Composition Chart

7. Household Income – Document gross income of all individuals determined to be in applicant’s Medicaid Household

Name (First, M.I., Last)	Income Type	Amount	Frequency	Gross Monthly Income	Calculation space
Total Gross Income:					
No. in Family Size:					
Family Size Income Limit:					

I understand that this is a temporary determination of my eligibility for Medicaid and that if I do not file an official application for Medicaid by the last day of the month following the month this form is signed my eligibility will stop on that date. I also attest that I have provided true and accurate information about my household and income.

Date

Signature

Provider Name/NPI#

Completed by (print)

Title

Signature/Date

INSTRUCTIONS FOR PROVIDER

I. General

- A. Use black ink.
- B. Complete 3 copies
- C. Mail or deliver to the County DSS of the applicant's county of residence no later than 5 working days after the presumptive determination.

II. Patient information

- A. Give the patients current mailing address.
- B. Indicate the name of the county to which the DSS referral will be sent
- C. Document whether patient was determined eligible or ineligible for presumptive.

III. Household – refer to Administrative Letter 18-13 for instructions on how to determine family size.

- A. Enter family members names in the following order:
 - 1. Patient
 - 2. Patient's spouse, if married
 - 3. Other household members
- B. Enter birth date for household members.
- C. Enter household member's relationship to the patient.
- D. Enter sex code for each member.
- E. Enter Social Security number for patient. Optional for other household members.
- F. Indicate if patient is a resident of North Carolina.
- G. Indicate if patient attest to: U.S. Citizenship, U.S. National or eligible immigration.

Eligible Immigration:

Lawful Permanent Resident (LPR/Green Card holder)	Asylee
Refugee	Cuban/Haitian Entrant
Paroled into the U.S.	Conditional Entrant Granted before 1980
Battered Spouse, Child and Parent	Victim of Trafficking and his/her spouse, child, sibling or parent
Temporary Protected Status (TPS)	Deferred Enforced Departure (DED)
Lawful Temporary Resident	Resident of American Samoa
Individual with Non-immigration status (includes worker visas, student visas, and citizens of Micronesia, the Marshall Islands, and Palau)	
Granted withholding of Deportation/Removal, under the immigration Convention against Torture (CAT)	
Deferred Action Status	