

**NORTH CAROLINA DIVISION OF SERVICES FOR THE BLIND  
PROGRAMS AND FACILITIES SECTION  
SPECIAL ASSISTANCE FOR THE BLIND PROGRAM**

---

<b>Section:</b>	<b>Chapter 10</b>
<b>Title:</b>	<b>Redetermination of Eligibility</b>
<b>Revision History:</b>	<b>Revised 08/02</b>

---

**REDETERMINATION OF ELIGIBILITY**

**Introduction**

This section outlines the procedures for redetermination of eligibility for Special Assistance for the Blind.

**I. FOR ALL RECIPIENTS**

- A. To authorize assistance you must have a current FL-2/MR-2, Level of Care Recommendation/Mental Retardation Services, signed and dated by a physician recommending the appropriate level of care.**
- B. Place a current FL-2/MR-2 in the eligibility record.**

- 1. Obtain a new FL-2/MR-2 within 12 months from the date of the last one, before reauthorizing assistance.
- 2. Do not reauthorize SAB when the date on the FL-2/MR-2 is more than 12 months old.
- 3. If the FL-2/MR-2 is due during the last month of the payment review period, do not recertify until FL-2/MR-2 is received.

- C. The SAB Eligibility Specialist will have mechanism for keeping up with due dates of FL-2/MR-2's and will request current ones as needed.**

**II. ALL SAB RECIPIENTS**

A complete redetermination of eligibility factors subject to change is required once every 12 months. The signed redetermination document should be completed by the SAB cutoff but NEVER later than the pull-check date of the last month of the payment review period.

**A. Mail Redetermination**

- 1. Send the recipient/representative the redetermination form and instructions, along with any other forms, requiring completion of the review.

---

<b>Section:</b>	<b>Chapter 10</b>
<b>Title:</b>	<b>Redetermination of Eligibility</b>
<b>Revision History:</b>	<b>8/02</b>

---

**Page 1 of 2**

2. Notify the recipient in writing of the date that all forms above must be returned.
3. Notify recipient/representative that if information is not received within fifteen (15) workdays SAB benefits will be held in Controller's Office until the information is received.

#### **B. Completing Redetermination**

1. Document the case record regarding the recipient's statement and all third party verifications.
2. Evaluate ongoing eligibility.
3. Send letter to recipient which states eligibility decision and gives any required notices for action on the case. Prepare DSB-7209, SAB Authorization, and mail to County DSS for approval along with copy of letter to recipient. Submit white copy of DSB-7209 with transmittal and two copies of Check Register to the Office of the Controller.