



North Carolina Department of Health and Human Services  
**Division of Medical Assistance**

2501 Mail Service Center • Raleigh, N. C. 27699-2501 • Tel 919-855-4100 • Fax 919-733-6608

Beverly Eaves Perdue, Governor  
Lanier M. Cansler, Secretary

Craig L. Gray, MD, MBA, JD, Director

January 31, 2011

Dear County Directors of Social Services:

**Re: County Holiday Schedule Changes**

**Attention: Medicaid/Work First Program Managers, Supervisors, and Security Officers**

In mid-June of each year, a letter is mailed to each county that includes a county holiday form that can be used to indicate each holiday date, along with the state's holiday schedule. Each county director is asked to reply to State DSS with their holiday schedule for the upcoming year by a date in mid-August. These dates are critical to ensure notices generated by our automated systems to recipients reflect the correct 10 business days for appeal purposes.

Recently, we have had issues with counties contacting State DSS, on short notice, to request a change in their holiday schedule. Sometimes these changes have been requested after timely notices had already been mailed using the original county holiday schedule. Once automated notices are mailed to recipients with timely notice and appeal dates calculated, the State cannot retroactively change county holiday schedules. We understand that circumstances beyond our control do happen and there may be times when a revision to the schedule will be requested. We will make every effort to accommodate those changes; however, it is imperative that all requests for changes to the holiday schedule be submitted to State DSS 30 calendar days in advance of the requested day to be changed to ensure the dates for automated notices and application reports are calculated correctly. Therefore, effective with this letter, all county holiday schedule revisions **must** be submitted to State DSS 30 calendar days in advance of the requested day to be changed. If revisions are not submitted timely, the State cannot make the changes.

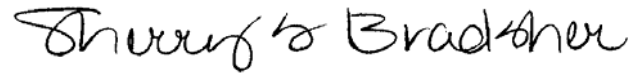
Please notify county boards and other appropriate parties of this requirement as soon as possible.

If you have any questions concerning the information in this letter, please contact the Division of Social Services, Information Support Unit at (919) 733-8938 or the Division of Medical Assistance, Eligibility Information Systems Unit at (919) 855-4000.



Sincerely,

Craig L. Gray, MD, MBA, JD, Director  
Division of Medical Assistance

A handwritten signature in black ink that reads "Sherry S. Bradsher". The signature is written in a cursive, flowing style.

Sherry S. Bradsher, Director  
Division of Social Services

**PM-REM-01-2011**