



CMSP Letter No.: 19-02
Issue Date: June 6, 2019

TO: All County Welfare Directors

SUBJECT: CMSP Eligibility Manual Update

The purpose of this All County Letter is to transmit revisions to the CMSP Eligibility Manual. On May 30, 2019, the CMSP Governing Board approved the following manual changes:

- Revised instructions regarding the appointment, duration, and scope of responsibilities of Authorized Representatives (AR) [Sections 1-023.1, 3-011.1, 3-019, 3-020, 3-024.2, 3-032, 3-034.1];
- Updated descriptions of lawfully present immigration statuses to align with CalHEERS changes [Section 5-013];
- Eliminated the reference to the Primary Care Benefit (PCB) Pilot Program as the Governing Board has incorporated the PCB into the Standard CMSP benefit [Section 1.082.1]; and,
- Various technical corrections to the components listed on the CMSP identification card and updated language regarding CMSP posters [Sections 3-012.4 & 12-023].

Counties should print and share the entire CMSP Eligibility Manual (effective June 1, 2019) with staff as page numbers and item numbers have changed. Please note, the CMSP Governing Board's website has been updated and CMSP has a new program logo. The complete CMSP Eligibility Manual is posted on the CMSP Governing Board's website at <https://www.cmspcounties.org/county-forms/#tab-id-2> under the "Eligibility Manual" tab. CMSP Eligibility Forms are located under the "Forms" tab at <https://www.cmspcounties.org/county-forms/#tab-id-1>.

If you have any questions about the manual changes please contact Alison Kellen, Program Manager at (916) 649-2631 ext. 119 or akellen@cmspcounties.org.

Sincerely,

A handwritten signature in blue ink, appearing to read "Kari Brownstein". The signature is fluid and cursive, with a long, sweeping tail that extends to the right.

Kari Brownstein
Administrative Officer

Attachment

- 1-050. Fair Market Value
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- 1-052. Fleeing Felon
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- 1-082.1 Primary Care Benefit Pilot Program
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- 1-084.2 Property
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- 1-089. Property--Share of Community
- 1-090. Public Agency
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PCBPP	Primary Care Benefit Pilot Program
PRUCOL	Present Under Color of Law
SSA	Social Security Administration
SSI/SSP	Supplemental Security Income/State Supplemental Payment
SSN	Social Security Number
USCIS	U.S. Citizenship and Immigration Services
UIB	Unemployment Insurance Benefits

1-013. Adequate Consideration

Adequate Consideration means receiving fair value in cash or property, under the circumstances considering the net market value of the property, for property belonging to the Applicant or Beneficiary, which is sold, converted, or transferred to another.

1-014. Adult

Adult means a person who is 21 years of age or older.

1-015. Adverse Action

Adverse Action is any action, which the County Department takes that results in an increase in a CFBU's Share of Cost or results in the discontinuance of CMSP eligibility. Discontinuance due to any of the following reasons shall not be considered Adverse Actions:

- A. Death, for a one person CFBU;
- B. The whereabouts of the Beneficiary is unknown and the post office has returned County Department mail addressed to the Beneficiary indicating that he/she has moved and left no forwarding address;
- C. Admission to an Institution that renders the Beneficiary ineligible;
- D. It has been determined that the Beneficiary has full-scope CMSP or Medi-Cal eligibility under another identity or category, or will have such dual eligibility as of the first of the next month if discontinuance action is not taken;
- E. Resides in another County or state;
- F. Receipt of the Beneficiary's clear written or verbal statement that does either of the following:
 - (1) States the Beneficiary no longer wishes CMSP benefits; or
 - (2) Gives information that requires discontinuance and includes the Beneficiary's acknowledgement that the information supplied would result in discontinuance; or

1-021. Applicant

Applicant means the individual or family making, or on whose behalf is made, an Application, Reapplication, or request for Restoration of aid.

1-022. Application or CMSP Supplemental Application

Application or CMSP Supplemental Application means a written request for CMSP aid using a standardized approved CMSP application form.

1-023. Approval of Eligibility

Approval of Eligibility means the determination made by the County Department that a person or family is eligible for CMSP.

1-023.1. Authorized Representative

An individual(s) or organization(s) chosen by a competent Applicant/Beneficiary to assist, accompany, and/or represent him/her for a limited time.

1-023.2 Beneficiary

An individual approved for and receiving CMSP benefits, also known as a Member.

1-024. Beneficiary Identification Card (BIC) or State of California BIC (CA-BIC)

The Beneficiary Identification Card (BIC) or State of California BIC (CA-BIC) is a plastic card issued by the State of California to each individual in a MFBU or CFBU which provides eligibility documentation that allows access to medical care, provider billing, and Share of Cost tracking. The CA-BIC replaces the State of California paper cards and may be kept after discontinuance and used again if the individual is determined eligible for either Medi-Cal or CMSP at a later date.

1-025. Burial Insurance

Burial Insurance means insurance, which by its terms can only be used to pay the burial expenses of the insured.

1-026. California Alternative Assistance Program (CAAP)

California Alternative Assistance Program (CAAP) means a program, which provides child-care payment or other services to CalWORKs eligible persons who do not wish to receive cash assistance payments.

1-027. CalWORKs

CalWORKs means the assistance program resulting from the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996, which replaced the Aid to

1-079. Overpayment

Overpayment means the receipt of CMSP benefits when there is no entitlement to all or a portion of the benefits received.

1-080. Parent

Parent means the natural or adoptive Parent of a Child.

1-081. Patient

Patient means a person receiving individual professional services directed by a licensed practitioner of the healing arts towards maintenance, improvement, or protection of health or the alleviation of disability or pain.

1-082. Persons Living In The Home

Persons Living in the Home means any of the following:

- A. Persons physically present in the home;
- B. Persons temporarily absent from the home because of hospitalization, visiting, vacation, trips in connection with work or because of similar reasons.
 - 1. A temporary absence is normally one in which the person leaves and returns to the home in the same or following month;
 - 2. A Child temporarily absent from the home shall be considered to be living in the home as long as the Parent continues to have responsibility for the care and control of the child. If a Child is absent from the home, but claimed as a tax dependent by the Parent(s), the Child shall be considered to be living in the home; or
- C. Persons away at school or vocational training who will resume living in the home as evidenced by the person returning home for vacations, weekends, and at other times.

1-082.1 Primary Care Benefit Pilot Program (PCBPP)

The Primary Care Benefit Pilot Program (PCBPP) is a time-limited health care benefit "pilot program" operated by the Governing Board that provides coverage of a defined set of health care services, composed primarily of primary care and prescription drug services, for eligible CMSP members in Aid Codes 89 and 50, and for which regular CMSP Share of Cost requirements do not apply.

Article 3. Application Process

- 3-010. County Medical Services Program (CMSP)
- 3-011. Application Process—General
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 - 3-012.1 Medi-Cal Linkage and Disability
 - 3-012.2 Evaluation of Other Program Linkage
 - 3-012.3 Evaluation for Expanded (MAGI-Based) Medi-Cal and Covered California
 - 3-012.4 Information and Education for Potentially Eligible Persons
 - 3-012.5 Interface with CMSP County Wellness and Prevention Pilot Project
- 3-013. Persons Who May File an Application for CMSP
- 3-014. CMSP Supplemental Application Form
- 3-015. Application for Retroactive CMSP
- 3-016. CMSP Application for Medi-Cal LTC Aid Code 53, Acute Care
- 3-017. Date of Application
- 3-018. Withdrawal of Application--Request for Discontinuance
- 3-019. Face-To-Face Interview
- 3-020. Persons Who May Complete and Sign the CMSP Supplemental Application
- 3-021. Filing the CMSP Supplemental Application
- 3-022. Obtaining Information for the Completion of the CMSP Supplemental Application
- 3-023. Verifications--Prior to Approval
 - 3-024.1. Verification of Identity
 - ~~3-024.2. Verification of Identity of an Authorized Representative~~
- 3-025. Clarification of CMSP Supplemental Application
- 3-026. Verification by Signature
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- 3-028. Denial or Discontinuance Due to Lack of Information, Noncooperation, or Loss of Contact
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- 3-031. Promptness Requirements
- 3-032. Notice of Action for CMSP Determinations
- 3-033. Corrective Action on Denied Applications
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 - ~~3-034.1. Responsibilities and Powers of the Authorized Representative~~
- 3-035. Unconditionally Available Income
- 3-036. Social Security Numbers
- 3-037. Case Records and Confidentiality

Article 3 Application Process

3-010. County Medical Services Program (CMSP)

For purposes of this section, persons are considered 21 years of age on the first day of the month following the month in which they reach age 21. Persons are considered 65 years of age on the first day of the month in which they reach age 65. A person's eligibility under CMSP shall be determined if that person:

A. Is at least 21 years of age but less than 65 years and any of the following:

- (1) A person who cannot meet the linkage/income factors necessary to be eligible for the Medi-Cal program; or
- (2) Not yet determined eligible for Medi-Cal as a PA or Other PA Recipient or as an MN person because of a pending Application for Medi-Cal eligibility based on allegations of blindness or disability; or

B. Meets the other eligibility requirements specified in this manual.

A person who is otherwise eligible for Medi-Cal but fails to provide proper documentation of legal status and/or citizenship as required under state or federal law and regulation shall not be eligible under CMSP pursuant to A and B above.

3-011. CMSP Supplemental Application Process--General

The County Department shall receive and act upon all CMSP Supplemental Applications, Reapplications, and requests for Restoration without delay and in accordance with the provisions of this article.

3-011.1 Application Process—Appointment of an Authorized Representative

~~Any competent Applicant may appoint an Authorized Representative to assist, accompany and represent him/her in the CMSP Supplemental Application or Reapplication process. A written appointment form (MC 306 or another substantially similar form accepted by the County) must be submitted to the County by the Applicant and must have original signatures of both the Applicant and the individual chosen to act as the Authorized Representative. The MC 306 will be valid for one year from the date signed unless the Applicant revokes it earlier.~~

Any competent Applicant/Beneficiary may appoint an Authorized Representative to assist, accompany and represent him/her in the CMSP Supplemental Application or Reapplication process. The county may accept any written, telephonic, or electronic method (allowed by Medi-Cal) from the Applicant/Beneficiary to designate an Authorized Representative.

The Applicant/Beneficiary may define the scope of authorized duties each Authorized Representative will have. Authorized Representatives shall receive copies of notifications if previously requested by the Applicant/Beneficiary via any written, telephonic, or electronic method (allowed by Medi-Cal). Only the Applicant/Beneficiary may modify the authorized duties for an Authorized Representative by contacting the county via any written, telephonic, or electronic method (allowed by Medi-Cal).

Either the Applicant/Beneficiary or Authorized Representative may cancel the Authorized Representative appointment at any time. The county may accept any written, telephonic, or electronic method (allowed by Medi-Cal) from the Applicant/Beneficiary or Authorized Representative to cancel the designation.

3-012. Evaluation of Medi-Cal Linkage

The County Department shall evaluate potential Medi-Cal linkage of each applicant prior to and as a part of processing the CMSP Supplemental Application.

For any Applicant or Beneficiary who alleges a disability, either in writing or orally, the County Department shall discuss a disability referral for the applicant. If there is a potential disability, the County Department shall give the Applicant or Beneficiary a DDSD Application with instructions to complete and return the application within 10 calendar days.

3-012.1 Medi-Cal Linkage and Disability

The County shall not approve CMSP eligibility until the completed disability Application, including all appropriate forms and verifications necessary for a Medi-Cal application is submitted to the County by the Applicant. The singular exception shall be when a person claims to be a U.S. citizen and is making a good faith effort to provide verification in accordance with federal standards and the person has completed all other aspects of the Medi-Cal application.

If all required forms and verifications are not received timely, the CWD shall contact the Applicant or Beneficiary and give 10 additional days for the required forms and verifications to be returned. If not received timely, County shall deny the Application unless good cause is demonstrated in accordance with Article 3-030.

3-012.2 Evaluation of Other Program Linkage

CMSP is the "payer of last resort." Individuals seeking treatment for HIV/AIDS, family planning, genetic conditions covered by the Genetically Handicapped Persons Program (GHPP), or Hepatitis C must apply for the public and other programs that specifically provide services for these conditions. CMSP is a secondary payer to these programs and any other public programs for which applicants or enrollees of CMSP are otherwise eligible.

- viii. A qualified individual or enrollee gains access to new CCPs as a result of a permanent move; this also applies to individuals recently released from incarceration; or,
 - ix. A qualified individual who is an Indian may enroll in a CCP or change to another one time per month.
- 4. If the attestation described in 3 (b) finds none of the conditions are applicable, a determination of eligibility for CMSP shall be made following receipt of all other information required to determine eligibility.
- 5. If the attestation described in 3 (b) finds one or more of the conditions are applicable, the applicant shall be required to do the following:
 - a. Provide electronic or written evidence to the county that an application has been made to Covered California for health insurance coverage.
 - i. Such evidence may be obtained by the county through electronic interface as systems may allow.
 - b. Provide electronic or written evidence to the county that the applicant has paid the first month's premium for participation in Covered California.
 - i. Such evidence may be obtained by the county through electronic interface as systems may allow.
- 6. If the applicant fails to provide the evidence described in 3 (b) or 5 (a) and 5 (b) within sixty (60) days of the qualifying date for the special circumstance, or as otherwise required by Covered California, the CMSP application shall be denied.

3-012.4 Information and Education for Potentially Eligible Persons

~~Beginning October 1, 2016~~ The County Department shall do all of the following:

- A. Notify all persons (21 – 64 years of age) determined ineligible for Medi-Cal, and not eligible for Medicare, of the opportunity to apply for CMSP. Such notification may be provided by the County Department through a follow up letter with an enclosed copy of the CMSP Supplemental Application; a notification generated by the County Department that provides information on how to obtain a Supplemental CMSP Application and submit the application; or, as an added section to the Denial Notice of Action provided to the Medi-Cal applicant, as long as such additional section provides information on how to obtain a Supplemental CMSP Application and submit the application.
- B. ~~Post the flyers "New CMSP Eligibility Rules and Benefits — CMSP Primary Care Benefit" provided to Counties in ACL 16-05 (English version and Spanish version) in a public area of the County Department where applications are taken for Medi-Cal, CMSP and other public health care coverage programs.~~

C.B. Provide a copy of the flyer "New CMSP Eligibility Rules and Benefits – CMSP Primary Care Benefit" (English version and Spanish version back-to-back) in the Medi-Cal/Covered California application package and/or Medi-Cal informing packet sent to applicants.

3-012.5 Interface with CMSP County Wellness and Prevention Pilot Project

Beginning January 1, 2017 in all counties that receive CMSP Wellness and Prevention Pilot Project funding, the County Department shall establish a linkage with the lead department or agency for the CMSP Wellness and Prevention Pilot Project that provides a reliable process for referring persons served by the Pilot Project to the County Department and provides an inter-departmental strategy for educating the public about CMSP and the CMSP Primary Care Benefit.

3-013. Persons Who May File an Application for CMSP

Any person who wishes to receive CMSP may file a CMSP Supplemental Application. If the Applicant, for any reason, is unable to apply on his/her own behalf, or is deceased, any of the following may complete and file the CMSP Supplemental Application for the Applicant:

- A. The Applicant's spouse, guardian, conservator or executor.
- B. A person who knows of the Applicant's need to apply.
- C. A Public Agency representative.

The case record must clearly specify why anyone other than a spouse has applied for the Applicant.

3-014. CMSP Supplemental Application Form

A person or family applying for CMSP shall submit a completed CMSP Supplemental Application form.

The Applicant shall be given two opportunities to submit the completed CMSP Supplemental Application form including all verifications necessary to establish the Applicant's eligibility for CMSP. The timeframe for return of the required forms and verifications shall be 10 calendar days for each request.

Note: The MC 13 should still be used if the CMSP Applicant is claiming and verifying amnesty alienage, lawfully permanent residency and PRUCOL (Permanent Residency Under Color of Law).

3-015. Application for Retroactive CMSP

C. Shall be conducted by a representative of the County Department unless, for good reason, a direct interview between the County Department and the Applicant or the person completing the CMSP Supplemental Application is not possible. In such a situation, the interview may be conducted by another Public Agency acting on behalf of the County Department.

G. ~~An Authorized Representative may accompany an Applicant to a face-to-face interview but may not attend a face-to-face interview in lieu of the Applicant.~~

3-020. Persons Who May Complete and Sign the CMSP Supplemental Application

The Applicant or spouse of the Applicant shall complete and sign the CMSP Supplemental Application. The CMSP Supplemental Application may be signed through a Telephonic Signature Declaration in accordance with the requirements sets forth on CMSP 216. If one of the conditions outlined below is met, the CMSP Supplemental Application may be signed by another party on behalf of the applicant:

A. The Applicant has an Authorized Representative(s), conservator, guardian, or executor. In this case, the Authorized Representative(s), conservator, guardian or executor ~~shall~~ may complete and sign the CMSP Supplemental Application.

(1) ~~An Authorized Representative is not permitted to complete the CMSP Supplemental Application without the Applicant's permission and participation or sign the CMSP Supplemental Application for any Applicant.~~

B. The Applicant is not competent, in a comatose condition or suffering from amnesia, and there is no spouse, conservator, guardian or executor. In this case:

(2) The County Department shall evaluate the Applicant's circumstances and determine whether or not there is a need for protective services.

a) If the County Department determines that there is a need for protective services, it shall make a referral to the public guardian or Adult Protective Services (APS) Division. The public guardian or APS social worker may complete and sign the CMSP Supplemental Application.

b) If the County Department determines that there is no need for a referral to the public guardian or APS division, or if the public guardian or APS division is unable or refuses to complete the eligibility process, then the CMSP Supplemental Application may be completed and signed, in accordance with Section 3-024, by a family representative or a representative of a Public Agency or the County Department.

3-024.2. Verification of Identity of an Authorized Representative

An Authorized Representative appointed by an Applicant/Beneficiary ~~with the MC 306 or other similar form must~~ may be required to provide a valid identification.

3-025. Clarification of CMSP Supplemental Application

When necessary, the County Department shall clarify information on the CMSP Supplemental Application. If additional clarification is needed:

A. The County Department shall inform the person who signed the CMSP Supplemental Application of the information needed and the reason for the request. The Applicant or person who signed the CMSP Supplemental Application shall be responsible for securing the additional information.

B. If the Applicant or person who signed the CMSP Supplemental Application has difficulty in securing the necessary information, the County Department shall, with the person's written consent, obtain the information. The Applicant's Authorization for Release of Information shall identify persons to be contacted and the specific information to be requested.

3-026. Verification by Signature

If the County determines that verification by signature is the only viable method available for any item on the CMSP Supplemental Application, the County shall state that fact in the case record. The signature on the CMSP Supplemental Application shall not be accepted as verification of a person's Application for an SSN.

The signature on the CMSP Supplemental Application shall be accepted as verification of the facts if both of the following conditions are met:

A. The information required for establishing eligibility under these regulations is not available; and

B. The County Department determines that the information provided on the CMSP Supplemental Application is sufficient to determine eligibility. If the information on the CMSP Supplemental Application is insufficient, the County Department shall accept a signed statement, from the person completing the CMSP Supplemental Application that provides the necessary supplemental information.

3-027. Eligibility Determination

After the Applicant has applied for CMSP and provided all essential information and verifications, the County Department shall determine the Applicant's eligibility and Share of Cost. A determination based on the results of a County search for information under Section 3-024 shall be completed in the same manner as any other determination with only the income and resources discovered through the search considered available.

~~D. Authorized Representatives may receive one copy of a specific Notice of Action from the County Department, at the request of the Applicant. Such requests must be documented in the case comments. shall receive copies of the notifications if previously requested by the Applicant or Beneficiary via MC 382, or other written, telephonic or electronic method (allowed by Medi-Cal).~~

3-033. Corrective Action on Denied Applications

A denial of an Application shall be rescinded when the County Department determines that the denial was in error. CMSP eligibility that results from corrective action taken on a denied Application shall be approved based on the date of the CMSP Application that was denied.

3-034. Applicant and Beneficiary General Responsibilities

The County shall assist the Applicant as necessary in meeting the requirements of this Section.

Applicants, persons acting on behalf of such Applicants, or persons who have completed and signed the CMSP Supplemental Application, shall:

- 1) Complete and participate in the completion of all documents required in the Application.
- 2) Make available to the County Department all documents needed to determine eligibility and Share of Cost, as specified in Sections 3-025 through 3-027.
- 3) Report all facts that are pertinent to the determination of eligibility and Share of Cost.
- 4) Report any changes in the facts pertinent to the determination of eligibility within ten calendar days following the date the change has occurred.
- 5) Cooperate fully in any investigation that may be required for Quality Control.
- 6) Report and utilize other health care coverage available to the individual or family group in accordance with Section 13-011.
- 7) Applicant must cooperate fully with the disability determination process following Application to SP-DDSD.
- 8) Be responsible for any action or inaction taken by an appointed Authorized Representative.

~~3-034.1. Responsibilities and Powers of the Authorized Representative~~

The appointed Authorized Representative (AR) has limited powers to assist the Applicant in the determination of CMSP eligibility.

A. The MC 306 authorizes the AR to:

- 1) Sign the SAWS1 to ensure a beginning date of aid;
- 2) Submit requested verifications to the County Department necessary for the determination of eligibility;
- 3) Accompany the Applicant to any required face to face interview(s);
- 4) Provide medical records and other information regarding any medical problems and limitations to the County Department or the State Department of Social Services Disability Determination Services Division (DDSD), and to receive information from the County or DDSD regarding the status of the application;
- 5) Accompany and assist the Applicant/Beneficiary in the hearing process;
- 6) Receive one copy of a specific Notice of Action from the County Department at the request of the Applicant; and
- 7) Examine the case record without the Applicant/Beneficiary being present.

B. The AR may not:

- 1) Act in lieu of the Applicant/Beneficiary;
- 2) Sign the CMSP Supplemental Application, MC 210 or SAWS 2 Statements of Fact, or the MC 220 (Authorization of Release of Medical Information);
- 3) Act for any incompetent person, pursuant to section 3-011.1;
- 4) Transfer or reassign an MC 306 Appointment without a new MC 306 being completed by the Applicant/Beneficiary; or
- 5) Act for the Applicant beyond the determination of eligibility.

3-035. Unconditionally Available Income

At the time of Application/Reapplication an Applicant or Beneficiary shall, as a condition of CMSP eligibility, take all actions necessary to obtain unconditionally available income except as limited in (C) below. This includes applying for such income and cooperating in supplying the information requested by the agency making the award determination.

~~P. Citizens of the Republic of the Marshall Islands, the Federated States of Micronesia, or Palau who, in accordance with 48 USC Sections 1681 through 1695, 1901 and 1931 may live, work, or study in the United States without restrictions: Arrival-Departure Record, USCIS Form I-94, annotated "CFA/MIS" or "CFA/PAL". Citizens of Palau must have a passport or similar travel document which establishes Palauan citizenship.~~

~~Q.P. Aliens granted extended voluntary departure for a specified time due to conditions in their home countries: Arrival-Departure Record, USCIS Form I-94, showing this status or Alien Voluntary Departure Notice, USCIS Form I-210.~~

~~R.Q. Aliens whose USCIS documents have been lost or stolen or are unreadable: An Individual Fee Register Receipt (USCIS Form G-711) which shows the person has applied for replacement of a lost, stolen, or unreadable alien registration, or alien admission document listed in this section.~~

~~R. Aliens living in the United States with the knowledge and permission of USCIS whose departure USCIS does not contemplate enforcing: INS documents which establish these facts.~~

~~S. T. Battered non-citizen, or parent or child of battered non-citizen.~~

~~T. U. Pending application for Creation of Record of Lawful Admission for Permanent Residence, with Employment Authorization.~~

~~U. V. Granted withholding of removal under the Convention against Torture.~~

~~V. W. Granted Temporary Protected Status (TPS), or pending applicants for TPS (pending applicants must have Employment Authorization).~~

~~W. X. Family Unity Beneficiary.~~

~~X. Z. Granted Deferred Enforced Departure.~~

~~Y. AA. Resident of American Samoa.~~

~~Z. AB. Citizens of Micronesia, the Marshall Islands, and Palau.~~

~~AA. AC. Administrative order staying removal issued by the Department of Homeland Security.~~

~~BB. AD. Pending application for asylum with Employment Authorization or is under the age of 14 and has had a pending application for asylum for at least 180 days.~~

CC. ~~AE.~~ Pending application for withholding of removal with Employment Authorization, or is under the age of 14 and has had a pending application for withholding of removal for at least 180 days.

DD. ~~AF.~~ Pending application for legalization under the LIFE Act, with Employment Authorization.

EE. ~~AG.~~ Pending application for suspension of deportation, or cancellation of removal or special rule cancellation of removal, with Employment Authorization.

5-014. Opportunity to Submit Documents

Applicants shall be informed that they must present documents, which serve as reasonable evidence of United States citizenship, or USCIS issued documents, which indicate Satisfactory Immigration Status for CMSP eligibility purposes.

A. Applicants for Full Scope CMSP Benefits under Aid Codes 88 and 89, including persons born abroad and claiming United States citizenship, shall have 30 calendar days, or the time it actually takes the County to process the CMSP Application, whichever is longer, to submit such documents. The 30-day period begins at the time the completed MC 13 (or other appropriate Medi-Cal form declaring citizenship/immigration status) is received by the County Department.

B. Applicants who do not present documentation indicating United States citizenship or Satisfactory Immigration Status within the period prescribed in subsection (A) shall receive Restricted Scope CMSP Benefits under Aid Code 50.

a. Applicants who do not present documentation indicating United States Citizenship or Satisfactory Immigration Status and who receive Restricted Scope Benefits under Aid Code 50 shall have the opportunity to request discontinuance of their CMSP in order to present acceptable documentation and have their CMSP benefits re-evaluated for full-scope benefits. If the County determines that citizenship requirements have been met, the change in status will occur the first day of the month following receipt of the verifications.

C. The County Department shall provide adequate notice to the individual of any Adverse Action and shall accord to the individual an opportunity for a hearing.

5-015. Verification of Satisfactory Immigration Status

Applicants for Full Scope CMSP Benefits under Aid Code 88 or 89, who have declared themselves to be aliens, must also declare in writing whether, to the best of their knowledge and belief, they have a Satisfactory Immigration Status. Such aliens must

- (2) Determined by the County Department as eligible for CMSP benefits with a Share of Cost, which has not been met.
- (3) Determined as eligible for CMSP benefits with a Share of Cost, which has been cleared.

B. The County Department shall report the information specified in (A) (1) and (2) in a timely manner in accordance with Department procedures.

12-020. CA-BIC/Immediate Need Card Signature Requirement

- A. Each Recipient of the CA-BIC shall sign the back of the card prior to presenting it to the provider to obtain CMSP covered service.
- B. For persons who are unable to sign their name, they may make a "mark" in lieu of their signature.
- C. For persons who are unable to sign their name or make their "mark," the provider shall determine that the individual is unable to sign the card due to a disability.

12-021. CMSP Identification Card Use

- A. The CMSP Identification Card is not proof of CMSP eligibility. This card is issued to individuals in addition to the CA-BIC.
- B. The CMSP Identification Card is a paper card and should be retained by the beneficiary until there is a break-in-aid.

12-022. Issuance of CMSP Identification Card

The Governing Board or its Third Party Benefits Administrator will generate a CMSP Identification Card in the following circumstances.

- New Member
- Beneficiary requests a replacement card
- There is a break-in-aid

12-023. Format of CMSP Identification Card

An identification card issued by the Governing Board or its Third Party Benefits Administrator to each eligible member of the CFBU shall include the following information:

- 1. Member's name, gender and I.D. Number
- 3. Date of beneficiary's birth
- 4. Card issuance date

5. ~~Provider Customer Service Telephone Number~~
6. ~~Non-participating Provider Emergency Service Notification Instructions~~
7. ~~Toll-Free Telephone Number for the Member~~

1. Member's name and I.D. Number
2. Date of beneficiary's birth
3. Card Issuance date
4. Provider Customer Service Telephone Number
5. Non-participating Provider Emergency Service Notification Instructions
6. Toll-Free Telephone Number for the Member