

50135 Application Made in County Other Than County of Responsibility

(a)

The county in which a person applies for Medi-Cal shall accept the application and a Statement of Facts from such person or family on behalf of the county of responsibility. If a Statement of Facts cannot be obtained, the county accepting the application shall provide information to the county of responsibility for the latter county to locate the applicant.

(b)

The information described above shall be forwarded to the county of responsibility not later than 15 days from the date of application.

(c)

The county in which a person applies may with the consent of the applicant or beneficiary, choose to become the county of responsibility for determining initial eligibility and initiating an intercounty transfer.