

50149 Application Form

(a)

An application for Public Social Services shall be used as the application form for all Medi-Cal applications.

(b)

The original of the completed form shall be placed in the case file.

(c)

A copy of the completed form shall be given to the applicant at the time of application.

(d)

Only one person's signature shall be required on the application or any other forms necessary to complete the eligibility determination.

(e)

A new application form shall not be required for: (1) Requests for restoration of aid. (2) Interprogram transfers. (3) Interprogram status changes. (4) Request to add a family member to the Medi-Cal case. (5) Redeterminations. (6) Infants meeting the criteria under the Continued Eligibility Program as described in Section 50262.3.

(1)

Requests for restoration of aid.

(2)

Interprogram transfers.

(3)

Interprogram status changes.

(4)

Request to add a family member to the Medi-Cal case.

(5)

Redeterminations.

(6)

Infants meeting the criteria under the Continued Eligibility Program as described in Section 50262.3.