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STATE OF CALIFORNIA – OFFICE OF ADMINISTRATIVE LAW
NOTICE PUBLICATION/REGULATIONS SUBMISSION

STD. 400 (REV. 01-2013)
OAL FILE NUMBERS
NOTICE FILE NUMBER: **Z-** 2014-0204-06
REGULATORY ACTION NUMBER: 2014-0522-01C
EMERGENCY NUMBER: [Blank]

For use by Office of Administrative Law (OAL) only
[Blank]
NOTICE
[Date Stamp]
2014 MAY 22 PM 1:44
OFFICE OF ADMINISTRATIVE LAW
REGULATIONS

For Use by Secretary of State Only
[Date Stamp]
Endorsed Filed in the Office of 2014 JUN 19 PM 1:54
Debra Bowen
Secretary of State

AGENCY WITH RULEMAKING AUTHORITY: Managed Risk Medical Insurance Board
AGENCY FILE NUMBER (if any): ER-4-13

A. PUBLICATION OF NOTICE (Complete for publication in Notice Register)

1. SUBJECT OF NOTICE: [Blank]
   TITLES: [Blank]
   FIRST SECTION AFFECTED: [Blank]
2. REQUESTED PUBLICATION DATE: [Blank]
3. NOTICE TYPE
   Notice re Proposed Regulatory Action: [Blank]
   Other: [Blank]
4. AGENCY CONTACT PERSON: [Blank]
   TELEPHONE NUMBER: [Blank]
   FAX NUMBER (Optional): [Blank]

OAL USE ONLY

ACTION ON PROPOSED NOTICE

Approved as Submitted	[Blank]
Approved as Modified	[Blank]
Disapproved/Withdrawn	[Blank]

NOTICE REGISTER NUMBER: 2014, 7-Z
PUBLICATION DATE: 02/14/2014

B. SUBMISSION OF REGULATIONS (Complete when submitting regulations)
1a. SUBJECT OF REGULATIONS: Modify MRMIP Eligibility Standards
1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBERS:
2013-1213-02 E
2. SPECIFY CALIFORNIA CODE OF REGULATION TITLES AND SECTIONS **(Including Title 26, if toxics related)**
SECTIONS AFFECTED **(List all section numbers individually. Attach additional sheet if needed.)**
ADOPT: [Blank]
AMEND: 2698.200
REPEAL: [Blank]
TITLES: 10

3. TYPE OF FILING
Regular Rulemaking (Gov. Code Section 11346): [Blank]
Resubmittal of disapproved or withdrawn nonemergency filing (Gov. Code Sections 11349.3, 11349.4): [Blank]
Emergency (Gov. Code, Section 11346.1(b)): [Blank]
Certificate of Compliance: The agency officer named below certifies that this agency complied with the provisions of Gov. Code Section 11346.2-11347.3 either before the emergency regulation was adopted or within the time period required by statute: [Checked]
Resubmittal of disapproved or withdrawn emergency filing (Gov. Code, Section 11346.1): [Blank]
Emergency Readopt (Gov. Code, Section 11346.1(h)): [Blank]
File & Print: [Blank]
Changes Without Regulatory Effect (Cal. Code Regs., Title 1, Section 100): [Blank]
Print Only: [Blank]
Other (Specify): [Blank]

4. ALL BEGINNING AND ENDING DATES OF AVAILABILITY OF MODIFIED REGULATIONS AND/OR MATERIAL ADDED TO THE RULEMAKING FILE (Cal. Code Regs, Title 1, Section 44 and Gov. Code Section 11347.1): N/A

5. EFFECTIVE DATE OF CHANGES (Gov. Code, Section 11343.4, 11346.1(d)); Cal. Code Regs, Title 1, Section 100):
Effective January 1, April 1, July 1, or October 1 (Gov. Code Section 11343.4(a)): [Blank]
Effective on filing with Secretary of State: [Checked]
Section 100 Changes Without Regulatory Effect: [Blank]
Effective other (Specify): [Blank]

6. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY.
Department of Finance (Form STD. 399) (SAM Section 6660): [Checked]

Fair Political Practices Commission: [Blank]
State Fire Marshal: [Blank]
Other (Specify): [Blank]

7. CONTACT PERSON: Alissa Harris
TELEPHONE NUMBER: 916-324-0571
FAX NUMBER (OPTIONAL): 916-445-0898
EMAIL ADDRESS (Optional): aharris@mrmib.ca.gov

8. I certify that the attached copy of the regulations is a true and correct copy of the regulations identified on this form, that the information specified on this form is true and correct, and that I am the head of the agency taking this action, or a designee of the head of the agency, and am authorized to make this certification.
SIGNATURE OF AGENCY HEAD OR DESIGNEE: [Original Signed]
TYPED NAME AND TITLE OF SIGNATORY: John Ramey, Executive Director
DATE: 5/21/2014

For use by Office of Administrative Law (OAL) only

[Stamp]
Endorsed Approved
JUN 19 2014
Office of Administrative Law

Title 10. Investment

Chapter 5.5. Major Risk Medical Insurance Board
Article 2. Eligibility, Application, and Enrollment
Section 2698.200

2698.200. Basis of Eligibility.

(a) All eligibility requirements contained herein shall be applied without regard to sex, race, creed, color, sexual orientation, health status, national origin, occupation, or occupational history of the individual applying for the program.

(b) To be eligible for the program, an applicant shall meet the requirements of either (1) or (2):

(1) Meet all of the following requirements;

(A) Be a resident of the State of California; and

(B) Not be eligible for Part A and Part B of Medicare, except those applicants on Medicare solely because of end-stage renal disease; and

(C) Not be eligible to purchase any health insurance for continuation of benefits under the provisions of Health and Safety Code section 1366.20 et. seq., or under the provisions of Insurance Code section 10128.50 et. seq. or have exhausted any health insurance for continuation of benefits under the provisions of 29 US Code 1161 et. seq.; and

(D) Be unable to secure adequate private coverage. An individual shall be deemed unable to secure adequate private health coverage if the individual within the previous 12 months:

1. Has been denied individual coverage; or

2. Has been involuntarily terminated from health insurance coverage for reasons other than nonpayment of premium or fraud; or

3. Has been offered an individual, not a group, health insurance premium rate in excess of the subscriber rate for the individual's first choice participating health plan.

(E) Clauses 2 and 3 of subparagraph (D) shall not apply to applications received on and after January 1, 2014.

(2) Be a dependent of an individual meeting the requirements of (b)(1) of this section.

(c) To remain eligible a subscriber, enrolled dependent or dependent subscriber shall:

(1) Remain a resident of the State of California; and

(2) Not become eligible for Part A and Part B of Medicare, except those applicants who become eligible for Medicare solely because of end-stage renal disease; and

(3) Not exceed a total of 36 consecutive months of enrollment from his/her respective start of coverage date in the program as required by section 2698.204(a)(7); and

(4) Make subscriber contribution payments as required by section 2698.403.

Note: Authority cited: Sections 12711 and 12712, Insurance Code. Reference: Sections 12711, 12725 and 12733, Insurance Code; and Sections 297, 299 and 299.2, Family Code.