## (1) Adopt Section 50188 as follows:

## § 50188. Reporting Updated Beneficiary Contact Information.

(a) When a Medi-Cal managed care plan receives updated beneficiary contact information from a beneficiary, the Medi-Cal managed care plan shall seek consent from the beneficiary before providing this updated beneficiary contact information to the Department and county department. The beneficiary may provide consent to the Medi-Cal managed care plan through mail, telephone, Internet or other commonly available electronic means, if those means are available to the Medi-Cal managed care plan.

(b) When a Medi-Cal managed care plan receives updated beneficiary contact information from a beneficiary, the Medi-Cal managed care plan shall provide that updated beneficiary contact information to the Department and county department. If a beneficiary has not provided the Medi-Cal managed care plan with consent to provide updated beneficiary contact information to the Department and county department, the Medi-Cal managed care plan shall inform the Department and county department that consent was not given when it provides the information to them.

(c) A Medi-Cal managed care plan shall provide only the following updated beneficiary contact information to the Department and county department:

<u>(1) Name;</u>

(2) Address; and

(3) Telephone number.

(d) If a Medi-Cal managed care plan informs the county department that the beneficiary did not consent to providing the updated beneficiary contact information,

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the county department shall attempt to verify that the updated beneficiary contact information is correct before updating the beneficiary's case file.

(1) The county department shall review information available to the county department, including, but not limited to, the beneficiary's CalWORKs and CalFresh case files of the beneficiary, or his or her immediate family members, which are open, or were closed within the last 90 days, and other sources of relevant information reasonably available to the county department to attempt to verify the updated beneficiary contact information.

(2) If the county department is unable to verify the updated beneficiary contact information pursuant to subsection (d)(1) above, the county department may attempt to contact the beneficiary to verify the updated beneficiary contact information using the method of contact identified by the beneficiary as the preferred method of contact, if a method has been identified.

(3) If a county department acquires updated beneficiary contact information from a source other than a Medi-Cal managed care plan or directly from a beneficiary, the county department shall contact the beneficiary to attempt to verify that the updated beneficiary contact information is accurate, prior to updating the information in the beneficiary's case file.

Note: Authority cited: Section 20, Health and Safety Code; Sections 10725, and 14005.36, Welfare and Institutions Code. Reference: Section 14005.36, Welfare and Institutions Code.

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