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Director

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Department of Health Care Services



EDMUND G. BROWN JR.
Governor

September 14, 2018

Medi-Cal Eligibility Division Information Letter No.: I 18-13

TO: ALL COUNTY WELFARE DIRECTORS
ALL COUNTY HEALTH EXECUTIVES
ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS
ALL COUNTY WELFARE ADMINISTRATIVE OFFICERS

SUBJECT: ANNUAL REDETERMINATION SIGNATURE REQUIREMENTS

Purpose

The purpose of this Medi-Cal Eligibility Division Information Letter is to provide counties with clarification on the annual redetermination signature requirements for the:

- [MC 216](#) - Modified Adjusted Gross Income (MAGI) pre-populated Medi-Cal Renewal Form,
- [MC 210 RV](#) - Non-MAGI Medi-Cal Annual Redetermination Form, and
- [MC 604 IPS](#) – Additional Income and Property Information Needed for Medi-Cal (supplement form used in conjunction with the MC 216).

Signature Requirements

42 Code of Federal Regulations (CFR) [435.916](#), which references CFR [435.907\(f\)](#), and Welfare and Institutions Code Section [14005.37\(r\)](#) mandate the annual renewal form signature requirements, as well as, the means in which responses may be made to the county:

- A renewal form must be signed under penalty of perjury.
 - Acceptable signatures include a physical handwritten signature, electronic signature, or telephonic recorded signature.
- The beneficiary may respond to the county via the Internet, by mail, by telephone, in person, or through other commonly available electronic means if those means are available in that county.

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- Electronic signatures, including telephonically recorded signatures and handwritten signatures transmitted via any other electronic transmission, must be accepted.
 - The Uniform Electronic Transaction Act, California Civil Code Section 1633.2, defines electronic signatures as meaning an electronic sound, symbol, or process attached to or logically associated with an electronic record and executed or adopted by a person with the intent to sign the electronic record. For purposes of this title, a “digital signature” as defined in subdivision (d) of Section 16.5 of the Government Code is a type of electronic signature.

- If the beneficiary mails the renewal form or submits it to the county in person, the form must be signed.

If you have any questions, or would like to request additional information, please contact Jessie Choi at (916) 345-8077 or by email at jessie.choi@dhcs.ca.gov.

Original Signed By

Sandra Williams, Chief
Medi-Cal Eligibility Division