DEPARTMENT OF HEALTH SERVICES

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September 15, 1995

TO: All County Welfare Directors

All County Administrative Officers

All County Medi-Cal Program Specialists/Liaisons

Letter No. 95-56

CLIENT'S SIGNATURE ON DEPARTMENT OF HEALTH SERVICES' HEALTH INSURANCE QUESTIONNAIRE (DHS 6155)

The purpose of this All County Welfare Directors Letter is to clarify the Department of Health Services' (DHS) policy that the client's signature is <u>not</u> required on the DHS 6155. This allows county staff the flexibility to obtain Other Health Coverage information over the telephone or in other situations where obtaining a signature is not practical.

The DHS 6155 is used by the Aid to Families with Dependent Children cash grant, Medically Needy (MN) and Adoptions case workers to report information regarding a client's health insurance coverage and also to refer clients to the Health Insurance Premium Payment Program and the Employer Group Health Plan Program. The last item on the form asks for the signature of the applicant authorizing the release of information assignment of benefits. The signature requirement may be disregarded.

Under the provisions of Section 14008.6 and 14023 (d) of the Welfare and Institutions Code, the client's receipt of Medi-Cal covered services operates as an assignment of benefits. Therefore, the client's signature on the DHS 6155 is not required for the Department to carry out its health insurance related activities.

County staff is advised to have the client complete and sign the DHS 6155 when possible because this reinforces the client's responsibility to use and report changes in the client's private health insurance coverage. However, if this is not possible, DHS staff will process the document without a signature. The client should be given a copy of the completed document and a copy kept in the case file.

If you have any questions, please call Ms. Susan Shafer, Health Insurance Section, Third Party Liability Branch, at (916) 323-1974.

Sincerely,

ORIGINAL SIGNED BY

Frank S. Martucci, Chief Medi-Cal Eligibility Branch