

DEPARTMENT OF HEALTH SERVICES

714/744 P Street
P.O. Box 942732
Sacramento, CA 94234-7320
(916) 657-2941



March 17, 1997

TO: All County Welfare Directors
All County Administrative Officers
All County Medi-Cal Program Specialists/Liaisons

Letter No.: 97-09

**ALL COUNTY WELFARE DIRECTORS LETTER (ACWDL) NO. 96-73 - VOLUNTARY
DECLARATION OF PATERNITY**

The purpose of this letter is to clarify procedural instructions which were sent in ACWDL No. 96-73 regarding use of the Declaration of Paternity Form (CS 909).

Upon application for Medi-Cal or redetermination, unmarried parents shall be informed of the availability of the Declaration of Paternity when they are informed about the requirements of medical support and their assignment of rights. They are to be given the option of signing the CS 909 in order to establish paternity. A copy of the brochure which explains the voluntary paternity program (PUB 244 [1/97 revision]), the Information Sheet (CS 910), and the CS 909 shall be given to the applicants at the same time as they are informed about child and medical support enforcement and are given the Child Support Enforcement Program Notice (CS 196) and other support forms.

Completion of the form is **not mandatory** for Medi-Cal eligibility. If the form is not signed, the case will be referred to the Family Support Division/District Attorney (FSD/DA) for paternity establishment. Medi-Cal eligibility will not be denied if the voluntary declaration is not signed at this time. However, cooperation with and information regarding the children's father must be provided for Medi-Cal eligibility approval. If the parents volunteer, or if the parent applying volunteers, the form may be taken home for signature witnessed by a Notary Public, or both parents may return and sign the form in the presence of a county staff person. If there are any legal questions which are not answered in the brochure or information sheet, then refer the case to the FSD/DA.

A revision of the Medical Support Procedures, Article 23, will be sent to counties shortly and will contain more detailed information.

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If there are any questions, please contact Ms. Elena Lara of my staff at (916) 657-0712.

Sincerely,

ORIGINAL SIGNED BY
GLENDA ARELLANO for

Frank S. Martucci, Chief
Medi-Cal Eligibility Branch