

Medi-Cal Program Guide Letter #701

June 2, 2010

Subject **ARTICLE A – CLARIFICATION TO THE GRANT OF LIEN SIGNATURE REQUIREMENT**

Effective Date Upon receipt

Reference County Policy

Purpose To clarify the signature requirement for CMS Grant of Lien form (CMS-122).

Background All CMS and CMS Hardship applicants are required to sign a Grant of Lien as a condition of eligibility. The lien form instructions (A.5 Appendix 5A) state, “Signed-CLIENT MUST SIGN FULL NAME INCLUDING MIDDLE NAME. Compare signature with identification documents.”

Clarification An applicant/beneficiary may sign their legal signature which may or may not include their middle name. This signature is sufficient for the Grant of Lien form. The signature should match the signature on the identification given.

Automation Impact None

Forms Impact None

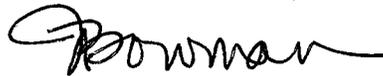
Quality Assurance Impact Effective with the July 2010 review month, QA will cite with appropriate error any case that does not comply with the requirements outlined in this letter.

**Summary of
Changes**

The table below shows the changes made to the Program Guide.

Article	Changes
A.5, Appendix A	Update to signature requirement

**Manager
Approval**



Janya Bowman, Assistant Deputy Director
Health Care Policy Administration
Strategic Planning and Operational Support Division

SB

APPENDIX 5A

CMS Grant of Lien and Completion Instructions

Instructions

Item	Action
1	Case Name - Print client's full name: Last name, first name, middle name.
2	Case Number - Print the CMS member number.
3	AKA - Print all other names the client and or spouse uses, or used in the past. If driver's license or social security cards have different names or spellings, print them here. Maiden name, indicate if maiden name or previous married name.
4	Spouse Information - If applicable (Divorced or Legally Separated, this section is not applicable but documentation is required)
5	Marital Status - Check appropriate box and confirm whether AKA information is required or not.
6	Lien Upon Property Information - Check appropriate boxes; Check the "Other Person(s)" box if there is another person on the title of the home who is not the spouse (mother, aunt etc.) and write in name and relationship.
7	Signed – Clients legal signature is acceptable. Compare signature with identification document.
8	AKA - Client signs name using aka. CLIENT MUST SIGN AKA ON THE LIEN.
9	Address - Print complete address of where the client lives which may be different from the Real Property owned; if homeless, print "homeless."
10	Spouse Signature - If applicable
11	AKA - Spouse signs name using aka. SPOUSE MUST SIGN AKA ON THE LIEN.
12	Address - Print complete address of where the spouse lives; if homeless, print "homeless."
13	Property Description (Single Family Residence, Duplex, Condominium, etc.) - List any property that the client/spouse owns. Also add property address if different than home address listed on item 9.
14	Date Lien signed.
15	Print Deputized worker or Notary Public name and line through the non-applicable title. (Example: A Deputized worker would line through Notary Public)
16	Print full name and AKAs of the client, and spouse, if

	applicable.
17	Deputized worker or Notary Public signature (lining through the non-applicable title).
18	Deputized worker or Notary Public signature (lining through the non-applicable title) and date.
The worker of record must review the Grant of Lien form (CMS-122) for completion and correctness before sending it to central files MS 0557A.	

Note: A Certificate of Acknowledgement is acceptable in lieu of Notary Public signature on the CMS-122, if the certificate is signed and dated by a Notary Public and contains the CMS Grant of Lien form title.

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SAMPLE