

**Revised Pages for:**  
**CALIFORNIA MEDICAID STATE PLAN**  
**Under Transmittal of**  
**STATE PLAN AMENDMENT (SPA)**  
**10-007\***

All new pages will have this SPA\* number identified as the new TN No., so it will not be repeated for each new insert pages.

Instruction:

- 1) Remove Section 4.31, page 79
- 2) Insert Section 4.31, page 79 (new)

Revision: HCFA PM 87-14 (BERC)

OMB No. : 0938-0193

State/Territory: CaliforniaCitation

455.103

44 FR 41644

1902(a) (38)

Of the Act

P.L. 100-93

**4.31 Disclosure of Information by Providers and Fiscal Agents**

The Medicaid agency has established procedures for the disclosure of information by providers and fiscal agents as specified in 42 CFR 455.104 through 455.106 and sections 1128(b) (9) and 1902 (a) (38) of the Act.

435.940

through 435.960

52 FR 5967

**4.32 Income and Eligibility Verification System**

(a) The Medicaid agency has established a system for income and eligibility verification in accordance with the requirements of 42 CFR 435.940 through 435.960.

(b) Attachment 4.32-A describes, in accordance with 42 CFR 435.948(a) (6), the information that will be requested in order to verify eligibility or the correct payment amount and the agencies and the State(s) from which that information will be requested.

1903(r) (3)  
of the Act

(c) The Medicaid agency has an eligibility determination system that provides for data matching through the Public Assistance Reporting Information System (PARIS), or any successor system, including matching with medical assistance programs operated by other states. The information that is requested will be exchanged with states and other entities legally entitled to verify title XIX applicants and individuals eligible for covered title XIX services consistent with applicable PARIS agreements.

TM No. 10-007

Supersedes:

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