

Tips for Completing the Client Eligibility Certification Form

Eligibility in Family PACT is determined through client self-report without supporting documents. The Client Eligibility Certification (CEC) form is critical to the eligibility process because this legal document contains the client information upon which eligibility is based; the client's statement, under penalty of perjury, that the information is correct; and the Family PACT provider's certification that the eligibility determination is correct. Therefore, it is important to assure that the CEC form is completed correctly.

When reviewing completed CEC forms, remember to:

- Make sure your clients meet all eligibility criteria.
- Ascertain whether they have specific obstacles that impede access to care.
- Make sure you ask your clients for their Social Security Number (SSN).
- Make sure you are using the most current family size and income guidelines.
- Make sure the form is completed properly and that both the client and the provider sign and date the document.

Eligibility criteria must be met.

Before a client receives Family PACT services, she or he must apply by completing the CEC form, be found eligible based upon the information provided, and then be enrolled in the program. Only Family PACT providers (or their designees, such as front office staff) can certify that a client is eligible. This determination is based solely on the information provided on the CEC form. You do not need to ask for proof of what the client reports to you. To be eligible, your client must meet these four criteria:

1. Live in California;
2. Have a gross family income at or below 200% of the Federal Poverty Level [updated annually; check the online Family PACT Policies, Procedures and Billing Instructions (PPBI) manual to assure you have the most recent Guidelines];
3. Have a medical necessity for family planning services; and
4. Have no other source of health coverage for family planning services, or meet the criteria specified for eligibility with Other Health Coverage on the following page.

Do they have one of these access to care issues?

Sometimes clients meet three of the eligibility criteria but have Other Health Coverage (OHC). Before deciding that they are not eligible for Family PACT, see if they meet any of the situations described below that may impede their access to care. In these instances, they may still be eligible for Family PACT.

- The health coverage does not include any family planning benefits; or
- The client has not met the health plan deductible on the date of service; or
- The client has Medi-Cal and has an unmet share of cost on the date of service; or
- The client needs to keep the appointment confidential from their partner, spouse, or parent.

All medical appointments are kept confidential. The OHC exclusion due to a need for confidentiality goes beyond the regular confidentiality provided in a medical practice. If a client checks this box on the CEC form, please make sure that they understand the difference between regular confidentiality and Family PACT confidentiality for eligibility. They should check this box only when they need to keep information about the appointment a secret from their partner, their spouse or their parent and are concerned that their OHC would somehow reveal that they had a family planning appointment. This is an important safeguard for many clients.

Ask for a Social Security Number.

Although clients are not required to provide a SSN in order to receive services, as a Family PACT provider you must request a SSN from each client.

- Some clients may not have a SSN or may simply not want to give it out. When a client does not provide a SSN, make sure that the SSN box has the client's reason why the number is not available. Do not leave this box blank!
- If a client is willing to provide a SSN but does not know or remember it, ask the client to call back with the SSN or bring it on the next visit.
- Make an attempt at each visit to obtain SSNs from clients who have not yet provided the information.

Family size and income guidelines change.

Make sure you are clear with your clients about what is meant by a "Basic Family Unit." This can be confusing.

- Explain that the family unit is made up of the applicant (client); their spouse; and children under the age of 18 related by blood, marriage, adoption, or under guardianship, who all live together in the same house.

- This family unit does not count other adults who may live in the house, even if those adults are dependent on the applicant (for example, children 18 years and older, or aging parents).
- Single, childless minors who apply would be a family of one and have only their own income counted.

Be sure to check the Family PACT website (www.FamilyPACT.org) for current family unit, allowable income, and Federal Poverty Level guidelines. Under the Provider tab, select Client Eligibility Enrollment.

Make sure the form is completed properly.

Completing the CEC form is easy when you remember these key points:

- Make sure that all questions have been answered.
- Ask all clients for their SSN.
- Make sure that you are using the correct code when filling in the grey boxes. Pay close attention to the difference between the county and country codes and boxes. You will only enter one code for their place of birth—either a California county, or a non-California state, or a non-U.S. country of birth. Codes are in the Family PACT PPBI manual.
- Verify that the client meets all four eligibility requirements.
 - If they have OHC, check if they have one of the access to care issues described on page 2.
 - Make sure you are using the most current family unit and income guidelines.
- As a legal document, the client and providers, or designees, must sign and date the form.
- Check the PPBI manual (client elig det section and client elig cert section) for additional information.

**Have questions?
Call the Provider Resource Line 1-877-FAM-PACT**

