§ 436.408

CMS encourages States to use automated capabilities to verify citizenship and identity of Medicaid applicants. Automated capabilities may fall within the computer matching provisions of the Privacy Act of 1974, and CMS will explore any implementation issues that may arise with respect to those requirements. When these capabilities become available, States will be required to match files for individuals who used third or fourth tier documents to verify citizenship and documents to verify identity, and CMS will make available to States necessary information in this regard. States must ensure that all case records within this category will be so identified and made available to conduct these automated matches. CMS may also require States to match files for individuals who used first or second level documents to verify citizenship as well. CMS may provide further guidance to States with respect to actions required in a case of a negative match.

- (j) Record retention. The State must retain documents in accordance with 45 CFR 74.53.
- (k) Reasonable opportunity to present satisfactory documentary evidence of citizenship. States must give an applicant or beneficiary a reasonable opportunity to submit satisfactory documentary evidence of citizenship before taking action affecting the individual's eligibility for Medicaid. The time States give for submitting documentation of citizenship should be consistent with the time allowed to submit documentation to establish other facets of eligibility for which documentation is requested. (See §435.930 and §435.911 of this chapter.)

[71 FR 39226, July 12, 2006, as amended at 72 FR 38695, July 13, 2007]

§436.408 [Reserved]

Subpart F—Categorical Requirements for Medicaid Eligibility

§ 436.500 Scope.

This subpart prescribes categorical requirements for determining the eligibility of both categorically needy and medically needy individuals specified in subparts B, C, and D of this part.

DEPENDENCY

\$436.510 Determination of dependency.

For families with dependent children who are not receiving AFDC, the agency must use the definitions and procedures used under the State's AFDC plan to determine whether—

- (a) An individual is a dependent child because he is deprived of parental support or care; and
- (b) An individual is an eligible member of a family with dependent children.

[43 FR 45218, Sept. 29, 1978, as amended at 58 FR 4936, Jan. 19, 1993]

AGE

$\$\,436.520$ Age requirements for the aged.

The agency must not impose an age requirement of more than 65 years.

[58 FR 4936, Jan. 19, 1993]

§ 436.522 Determination of age.

- (a) In determining age, the agency must use the common law method (under which an age is reached the day before the anniversary of birth) or the popular usage method (under which a specific age is reached on the anniversary of birth), whichever is used under the corresponding State plan for OAA, AFDC, AB, APTD, or AABD.
- (b) The agency may use an arbitrary date, such as July 1, for determining an individual's age if the year, but not the month, of his birth is known.

[58 FR 4936, Jan. 19, 1993]

BLINDNESS

§ 436.530 Definition of blindness.

- (a) *Definition*. The agency must use the definition of blindness that is used in the State plan for AB or AABD.
- (b) State plan requirement. The State plan must contain the definition of blindness, expressed in ophthalmic measurements

§ 436.531 Determination of blindness.

In determining blindness—

(a) A physician skilled in the diseases of the eye or an optometrist, whichever the individual selects, must examine