

Department of Human Resources 311 West Saratoga Street Baltimore MD 21201

Control Number: #11-03

Family Investment Administration ACTION TRANSMITTAL

Effective Date: October 1, 2010

Issuance Date: September 7, 2010

TO:

DIRECTORS, LOCAL DEPARTMENTS OF SOCIAL SERVICES
DEPUTY/ASSISTANT DIRECTORS FOR FAMILY INVESTMENT
FAMILY INVESTMENT SUPERVISORS AND ELIGIBILITY STAFF

DIVISION OF ELIGIBILITY WAIVER SERVICES

HEALTH OFFICERS, LOCAL HEALTH DEPARTMENTS LOCAL HEALTH DEPARTMENT ELIGIBILITY STAFF

FROM:

KEVIN M. MCGUIRE, EXECUTIVE DIRECTOR, FIA

DEBBIE RUPPERT, EXECUTIVE DIRECTOR, DHMH/OES

RE:

PUERTO RICO INVALIDATES ALL BIRTH CERTIFICATES ISSUED

PRIOR TO OCTOBER 1, 2010

PROGRAM AFFECTED: ALL PROGRAMS

ORIGINATING OFFICE: OFFICE OF ELIGIBILITY SERVICES/FAMILY

INVESTMENT ADMINISTRATION

BACKGROUND:

Puerto Rico Law 191 invalidates all Puerto Rican birth certificates issued prior to July 1, 2010. On June 28, the Government of Puerto Rico extended the validity of current Puerto Rico birth certificates through September 30, 2010. All birth certificates will remain valid through September 30, 2010. After this date, every birth certificate must have been reissued by the Puerto Rico Health Department Vital Statistics Record Office.

The law was enacted to address national security concerns that the U.S. Department of State calculates are the source of approximately 40 percent of its passport fraud cases. Law 191 establishes measures to reduce forgery and fraud, by strengthening Puerto Rico's vital statistics technology and by making it illegal for any public or private entity to retain an original copy of any Puerto Rico issued birth certificate.

ACTION REQUIRED:

Medical Assistance

Because DHMH requires individuals to provide documentation of citizenship and identity as a condition of eligibility (see AT 08-05), beginning October 1, 2010, Puerto Rican applicants (unless their citizenship can be verified on SVES per AT 10-27 Revised) will need a reissued birth certificate, with a date of issuance on or after October 1, 2010, in order to provide proof of citizenship. As U.S. citizens, applicants born in Puerto Rico

are allowed a "reasonable opportunity" period (as defined in AT 10-27 Revised) to produce a birth certificate document.

Food Supplement Program (FSP) and Temporary Cash Assistance (TCA) – Verification of Identity, Citizenship and Age

For the FSP, verification of an applicant's identity is mandatory. For TCA, it is required only if questionable. Identity is verified through readily available documentary evidence, or if this is unavailable, through a collateral contact. Due to the new law, as of October 1, 2010, you cannot use a voided Puerto Rican birth certificate to verify the identity of a household member. Accept any other documents that reasonably establish the applicant's identity. Do not deny a household member based solely on possessing a voided Puerto Rican birth certificate.

Verification of citizenship is required only if the customer's statement as to his or her citizenship status is questionable. Since Puerto Ricans are U.S. citizens, verification of the member's citizenship status is not required, unless questionable. Otherwise, the case manager must accept any reasonable documentary evidence provided by the household, including collateral statements and participation in another program, as acceptable verification of citizenship status.

Although verification of age is not mandatory, you may need this to determine whether an individual is elderly or subject to work requirements. While you cannot use voided Puerto Rican birth certificates for citizenship status, if you need verification of age and there is no other form of verification, you can use a voided Puerto Rican birth certificate for that purpose.

Note for all programs:

Puerto Rico-born citizens carrying U.S. passports, like those with citizenship verified by SVES, do not need new birth certificates to qualify for benefits.

Local offices may assist Puerto Rican applicants who need to acquire a new birth certificate. The English and Spanish versions of the mail-in application form are attached to this transmittal. In addition, a bilingual on-line application form is available at http://www.pr.gov/.

ENCLOSURES:

- BIRTH CERTIFICATE APPLICATION BY MAIL
- SOLICITUD DE CERTIFICADO NACIMIENTO POR CORREO

INQUIRIES:

Please direct Medical Assistance policy questions to the DHMH Division of Eligibility Policy or MCHP policy questions to the MCHP Division, both at 410-767-1463 or 1-800-492-5231 (select option 2 and request extension 1463). Please direct FSP questions to Phyliss Arrington at 410-767-7079 or Rick McClendon at 410-767-7307 and TCA question to Marilyn Lorenzo at 410-767-7333 or Gretchen Simpson at 410-767-7937.

cc: DHMH Executive Staff

FIA Management Staff

Constituent Services

DHR Executive Staff

DHMH Management Staff

DHR Help Desk

COMMONWEALTH OF PUERTO RICO DEPARTMENT OF HEALTH DEMOGRAPHIC REGISTRY

BIRTH CERTIFICATE APPLICATION BY MAIL

| PART I: | REGISTRA | NT'S INFORMATION |
|---------|----------|------------------|
| | | |

| Father's Last Name | Mother's Last Name | First Name | Middle Name | |
|--|--|--|--|--|
| 2. Date of birth: (month/date/year) | | 3. Place of birth: (town and hospital) | | |
| 4.Father's Name: | | 5. Mother's Name: | | |
| 6. The certificate will be | used for: | 7. Number of copies: | | |
| art II: APPLICANT'S I | FORMATION* | | | |
| 1.Applicant's Name: | | | 2. Relationship: ** | |
| Father's Last Name M | other's Last Name First Nan | ne Middle Name | | |
| 3. Applicant's address: | | 4. Address where | 4. Address where you want the certificate to be sent | |
| | | | | |
| 5. Applicant's identificati | on included: Other | 6. Applicant's signature and date: | | |
| Driver's Lic,State Assistance, Other | ID,Passport,Public | | | |
| MPORTANT: FIRST CO | PY \$5.00 EACH / ADDITION | IAL COPY \$4.00 O | F SAME PERSON | |
| 1. Applicants living o | ut of Puerto Rico send the application | on to the following addr | ress: Demographic Registry PO Box 11854 | |
| San Juan Puerto R | | | | |
| | s in Puerto Rico can visit any Local | | iouse to complete an application. | |
| | d a photocopy of a recent valid phot | | | |
| 4. Applicant in Puerto additional copy for | | evenue Stamp for the 1 | irst copy requested and \$4.00 for each | |
| •• | erto Rico: Please send \$5.00 Money | Order navable to Secr | etary of the Treasury. | |
| | | and physical to been | | |
| •• | ddressed-stamped-envelope to mail | in your certificate. | | |

^{*}Applicant – means registrant, their children over 18 years of age, legal representative.

**Relationship – relation between the applicant and the registrant. This blank will be filled out if applicant and Registrant is not the same person.

ESTADO LIBRE ASOCIADO DE PUERTO RICO DEPARTAMENTO DE SALUD REGISTRO DEMOGRAFICO



SOLICITUD DE CERTIFICADO NACIMIENTO POR CORREO

| PARTE I: INFORMACIÓN SOBRE EL INSCRITO: | | | | | | | |
|---|--|--|--|--|--|--|--|
| 1.NOMBRE DE INSCRITO | | | | | | | |
| | | | | | | | |
| APELLIDO PATERNO APELLIDO MATERNO | | NOMBRE | | | | | |
| 2. FECHA DE NACIMIENTO (DIA/MES/AÑO) | 3. LUGAR DE NACIMIENTO (PUEBLO Y HOSPITAL) | | | | | | |
| 4.NOMBRE DEL PADRE: | | 5 NOMBRE DE LA MADRE: | | | | | |
| 6. USO QUE SE DARÁ AL CERTIFICADO: | | 7. NÚMERO COPIAS SOLICITADAS: | | | | | |
| PARTE II: INFORMACIÓN SOBRE EL SOLICITANTE* | | | | | | | |
| 1. NOMBRE DEL SOLICITANTE: | | 2. PARENTESCO: ** | | | | | |
| APELLIDO PATERNO APELLIDO MATERNO NOMBRI | | | | | | | |
| 3. DIRECCIÓN DEL SOLICITANTE: | | 4. DIRECCIÓN POSTAL: | | | | | |
| | | | | | | | |
| 5. COPIA DE IDENTIFICACIÓN ENVIADA | | 6. FIRMA DEL SOLICITANTE Y FECHA DE SOLICITUD: | | | | | |
| LIC. CONDUCIRID ESTADOPASAPORTE OTRO | | | | | | | |

Importante:

- SI EL NACIMIENTO OCURRIÓ DESPUÉS DEL 21 DE JUNIO DE 1931, DEBE SOLICITAR SU CERTIFICADO A: DEPARTAMENTO DE SALUD REGISTRO DEMOGRÁFICO PO BOX 11854, SAN JUAN PUERTO RICO 00910 DIRECCIÓN FÍSICA: CALLE QUISQUEYA #171, HATO REY, PUERTO RICO 00918
- 2. SI EL NACIMIENTO OCURRIÓ ANTES DEL 21 DE JUNIO DE 1931, DEBE SOLICITARLO AL REGISTRO LOCAL DEL PUEBLO DONDE OCURRIÓ EL NACIMIENTO.
- 3. ACOMPAÑE LA SOLICITUD CON UNA COPIA DE UNA IDENTIFICACIÓN RECIENTE (CON RETRATO) DEL SOLICITANTE.
- 4. RESIDENTES FUERA DE PUERTO RICO: ENVIAR GIRO POSTAL A NOMBRE DEL SECRETARIO DE HACIENDA. EL COSTO DEL CERTIFICADO ES \$5.00 LA PRIMERA COPIA Y \$4.00 LA COPIA ADICIONAL SOLICITADA AL MISMO TIEMPO.
- 5. SI RESIDE EN PUERTO RICO: ENVÍE SELLO DE RENTAS INTERNAS DE \$5.00 POR LA PRIMER COPIA Y \$4.00 POR LA COPIA ADICIONAL ORDENADA AL MISMO TIEMPO.
- DEBE ENVIAR UN SOBRE CON SELLO Y PRE-DIRIGIDO CON LA DIRECCIÓN BIEN CLARA DONDE RECIBIRÁ EL CERTIFICADO

^{*} SOLICITANTE- SIGNIFICARA EL INSCRITO; SI ES MAYOR DE EDAD, SU PADRE, MADRE, HIJOS O REPRESENTANTE

^{**} PARENTESCO- SIGNIFICARÁ LA RELACIÓN ENTRE EL SOLICITANTE Y EL INSCRITO, ESTE ESPACIO SERÁ LLENADO POR SI EL INSCRITO Y EL SOLICITANTE NO SON LA MISMA PERSONA.