

**Department of Health Care Services**

1501 Capitol Avenue, MS 4607

Sacramento, CA 95899-7417



TOBY DOUGLAS  
DIRECTOR

State of California—Health and Human Services Agency  
**Department of Health Care Services**



EDMUND G. BROWN JR.  
GOVERNOR

## **Important Information About Your Application for Health Insurance**

Date:

Dear Applicant:

Thank you for applying for affordable health insurance in California. We know you or your family members are waiting to learn what health insurance you can get this year, and whether you can get Medi-Cal benefits.

### **What happened to my health insurance application?**

We are sorry that you have not yet heard back from us about your Medi-Cal application. Unfortunately, because we received so many applications, and because of computer problems, we have not finished processing all of the applications. We want to let you know that we have your application and will make a decision as soon as possible about you or your family's health coverage based on the information you gave us. **You do not need to apply again.**

### **Do you need more information from me about my application?**

If we need more information, we will send you a letter asking for the information we need to finish making a decision about whether you can get Medi-Cal benefits. If you get a letter asking for additional information, please reply to the contact person on that letter with the information that is needed. If we don't get this information from you by the due date in the letter, we will have to deny your application. Don't worry if you are not asked to provide more information. This means we have what we need, your application will be reviewed and we will send you an answer as soon as we can.

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### **When will I get an answer about my application?**

We hope to make a decision about your application as soon as possible, but we cannot give you a certain date. After we finish reviewing your application and decide which health coverage you or your family can get, you will get a letter that tells you what was decided. That letter will also tell you how to start using your health coverage, or how to appeal our decision if you don't agree with the decision. If you or someone in your family is eligible for Medi-Cal, you will get a Medi-Cal Benefits Identification Card (BIC) in the mail. You may get your BIC before you get the letter stating you are eligible for Medi-Cal, if so you may begin using it upon receipt. If you have an old BIC, it will be re-activated. If you previously had a BIC but no longer have it, you can contact your county human services agency to ask for a new card after your application has been approved.

### **What if I need health care while I am waiting?**

If you need medical treatment right now, you should go to a doctor, health clinic, or hospital. Make sure to keep any receipts for anything you pay for the treatment. You may be able to get a refund for the health care services you paid for if you are eligible for Medi-Cal. If you need treatment and you go to a doctor or clinic that accepts Medi-Cal as insurance, they can help you get a refund later if you are found eligible for Medi-Cal. If you need urgent medical care but can't get it without insurance, call your county human services agency at the phone number on the enclosed county list and ask them to review your application more quickly because of your urgent medical need.

### **What if I have medical bills for health care that I got while I have been waiting?**

If you are found eligible for Medi-Cal, your coverage will go back to the month you applied. You can ask your doctor to bill Medi-Cal for the health care you received while you were waiting. You may also be able to get a refund if you paid for health care services. Also, if you are approved for Medi-Cal and qualify for retroactive coverage, Medi-Cal may be able to help pay for most medical services you have received in the three months before the month you applied. For more information, go to [www.healthconsumer.org](http://www.healthconsumer.org).

If you currently have medical bills, you can:

- 1) Call the number on the bill and tell them you are waiting to hear about your Medi-Cal eligibility. Ask them not to send your bill to the collection agency. You can also send them a copy of this letter.
- 2) You should also contact your county human services agency if you are found eligible for Medi-Cal to let them know that you have medical bills and the date(s) you received the medical care (not the date of the bill). This will be helpful for determining if you are eligible for retroactive coverage.

### **Will I have to pay a tax penalty for not having insurance while I am waiting?**

You will not have to pay the tax penalty for the past months that you did not have insurance because you applied during open enrollment in 2014 and are still waiting to get an answer from us. Under the new health care law, most people must have health insurance this year or will have to pay a tax penalty in April 2015. You may also be able to avoid paying the tax penalty if you have other reasons that you could not get insurance this year. If you have any questions, you can contact the Health Consumer Alliance at 1-888-804-3536.

### **Where can I get more information about my application?**

Call your county human services agency at the phone number on the enclosed county list for more information about your application. Please know that it is important you do not submit any additional applications while waiting for a response. Doing this can cause more delays in processing the application that you already submitted.

### Language Services Notice

If you do not understand this information or notification, call your county Medi-Cal worker. You have the right to interpreter services provided by the county at no cost to you.

Si no entiende esta información o notificación, llame al trabajador de Medi-Cal de su condado. Tiene derecho a obtener servicios de intérpretes proporcionados por el condado sin costo para Ud. (Spanish)

إذا لم تفهم هذه المعلومات أو هذا الإبلاغ . إتصل بموظف Medi-Cal الخاص بمقاطعتك . لديك حق الحصول على خدمات ترجمة مجانية متوفرة لك من قبل المقاطعة. (Arabic)

Եթե դուք չեք հասկանում այս տեղեկությունը կամ հայտարարությունը, զանգահարեք ձեր քառնքիի Medi-Cal-ի աշխատակցին: Դուք իրավունք ունեք քառնքիի կողմից տրամադրված թարգմանչական անվճար ծառայություն ստանալու: (Armenian)

បើសិនជាអ្នកមិនយល់ព័ត៌មាន ឬសេចក្តីជំរាបនេះទេ សូមទូរស័ព្ទទៅអ្នកធ្វើការខាង Medi-Cal នៅខោនធីរបស់អ្នក ។ អ្នកមានសិទ្ធិទទួលសេវាពីអ្នកបកប្រែ ដែលបានផ្តល់ដោយខោនធី ដោយឥតគិតថ្លៃអ្វីផលអ្នកឡើយ ។ (Cambodian)

如果您不理解此處的資訊或通知,請電洽您所在縣的Medi-Cal工作人員。您有權免費獲得縣政府提供的免費口譯服務。(Chinese)

اگر این اطلاعات و یا اطلاعیه را درک نمی کنید. با مددکار Medi-Cal کانتی خود تماس بگیرید. شما این حق را دارید که به طور رایگان از خدمات مترجم از طریق کانتی استفاده کنید. (Farsi)

Yog koj tsis totaub txog cov kev qhia lossis tsab ntawv no, hu rau koj tus neeg tuav ntaub ntawv Medi-Cal hauv lub county. Koj muaj cai tau txais kev pab txhais lus dawb los ntawm lub county. (Hmong)

이 정보나 통지서를 이해할 수 없는 경우에는 카운티 Medi-Cal 담당 직원에게 전화하십시오. 가입자는 카운티가 무료로 제공하는 통역 서비스를 받을 권리가 있습니다. (Korean)

Если вы не понимаете данную информацию или уведомление, позвоните сотруднику компании Medi-Cal вашего округа. У вас есть право на получение услуг переводчика, которые предоставляются округом бесплатно. (Russian)

Kung hindi ninyo naiintindihan ang impormasyon o paunawang ito, tawagan ang inyong manggagawa sa Medi-Cal ng county. Kayo ay may karapatang magkaroon ng mga serbisyo ng tagasalin na ibibigay ng county na walang bayad sa inyo. (Tagalog)

Nếu quý vị không hiểu chi tiết hoặc thông báo này, hãy điện thoại cho nhân viên Medi-Cal tại quận quý vị. Quý vị có quyền được quận cung cấp dịch vụ thông dịch miễn phí cho quý vị. (Vietnamese)

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# County Social Services Agencies

If the information on this list has changed, you may verify the information in the phone directory under the county government listings.

## A - L Counties

### **Alameda County (01)**

(510) 383-8523

### **Alpine County (02)**

(530) 694-2235

### **Amador County (03)**

(209) 223-6550

### **Butte County (04)**

Oroville (530) 538-7711

### **Calaveras County (05)**

(209) 754-6448

### **Colusa County (06)**

(530) 458-0250

### **Contra Costa County (07)**

(866) 663-3225

### **Del Norte County (08)**

(707) 464-3191

### **El Dorado County (09)**

(530) 642-7300

### **Fresno County (10)**

Call Center – Main Number  
(559) 600-1377  
Services: Heritage Center, Fresno  
Coalinga Regional Center  
Selma Regional Center  
Reedley Eastside Services

### **Glenn County (11)**

(530) 934-1421

### **Humboldt County (12)**

(877) 410-8809

### **Imperial County (13)**

(760) 337-6800

### **Inyo County (14)**

(760) 872-1394

### **Kern County (15)**

(877) 410-8812

### **Kings County (16)**

(877) 410-8813

### **Lake County (17)**

(707) 995-4200

### **Lassen County (18)**

(530) 251-8152

### **Los Angeles County (19)**

Customer Service Center  
(866) 613-3777 Toll-Free  
(626) 569-1399  
(310) 258-7400  
(818) 701-8200

## M - O Counties

### **Madera County (20)**

(559) 675-2300

### **Marin County (21)**

(415) 473-3400

### **Mariposa County (22)**

(209) 966-2000

### **Mendocino County and Fort Bragg Office (23)**

(707) 962-1000  
(877) 327-1677 Toll-Free  
in Mendocino

Ukiah Office (707) 463-7700  
(877) 327-1711 Toll Free  
in Mendocino

### **Merced County (24)**

(209) 385-3000

### **Modoc County (25)**

(530) 233-6501

### **Mono County (26)**

North County Office  
(760) 932-5600

South County Office

(760) 924-1770

### **Monterey County (27)**

(831) 755-8500

(831) 755-4650

### **Napa County (28)**

(800) 464-4214 Toll-Free

(707) 253-4511

### **Nevada County (29)**

(888) 809-1340 Toll-Free

(530) 265-1340

### **Orange County (30)**

(800) 281-9799

## P - R Counties

### **Placer County Human Services (31)**

(888) 385-5160 Toll-Free

(916) 784-6000 From outside  
of the County

### **Plumas County (32)**

(530) 283-6350

**Riverside County (33)**

Call Center – Customer Service  
(800) 274-2050

**S Counties**

**Sacramento County (34)**

(916) 874-3100

**San Benito County (35)**

(831) 636-4180

**San Bernardino County (36)**

(877) 410-8829

**San Diego County (37)**

(855)-342-4204

**City & County of  
San Francisco (38)**

(855) 355-5757

**San Joaquin County (39)**

(209) 468-3711

**San Luis Obispo County (40)**

(805) 781-1600

**San Mateo County (41)**

(800) 223-8383

**Santa Barbara County (42)**

Access Cal Win:  
(866) 404-4007

Santa Barbara Office  
(805) 681-4401

Santa Maria Office  
(805) 346-7135

Lompoc Office  
(805) 737-7080

**Santa Clara County (43)**

(408) 758-3800 Benefits  
Assistance Center

(408) 758-3600 or  
(877) 962-3633  
Automated Assistance

**Santa Cruz County (44)**

Benefit Call Center:

(888) 421-8080

Santa Cruz  
(831) 454-4165

Watsonville  
(831) 763-8500

**Shasta County (45)**

(877) 652-0731

**Sierra County (46)**

Loyalton  
(530) 993-6721

Downieville  
(530) 289-3711

**Siskiyou County (47)**

(800) 662-7031

**Solano County (48)**

(707) 784-8555

**Sonoma County (49)**

(877) 699-6868 Toll-Free

**Stanislaus County (50)**

(877) 652-0734 Toll-Free

**Sutter County (51)**

(877) 652-0735

**T - Y Counties**

**Tehama County (52)**

(530) 527-1911

**Trinity County (53)**

(800) 851-5658 Toll-Free  
(530) 623-1265

**Tulare County (54)**

(800) 540-6880 Toll-Free

**Tuolumne County (55)**

(209) 533-5711

For mailed application  
(209) 533-5725

**Ventura County (56)**

Administrative Office  
(805) 477-5100  
(866) 904-9362 Toll-Free

Regional Offices:

Oxnard (805) 385-9363

Ventura (805) 658-4100

Santa Clara Valley  
(805) 933-8300

East County  
(805) 584-4842

**Yolo County (57)**

Woodland  
(530) 661-2750

West Sacramento  
(916) 375-6200

**Yuba County (58)**

(530) 749-6311