

## DEPARTMENT OF HEALTH SERVICES

714/744 P Street  
P.O. Box 942732  
Sacramento, CA 94234-7320



December 22, 1995

Medi-Cal Eligibility Branch Information Letter No.: I-95-34

**TO: All County Administrative Officers****FEDERAL MEDICAID DEMONSTRATION PROJECT**

Pursuant to the requirements of Section 10743.5 of the Welfare and Institutions Code, added by Section 9 of Assembly Bill 911 (Chapter 305, Statutes of 1995), this notice is provided to all California Counties. The State Department of Health Services intends to seek approval of a Federal Medicaid Demonstration Project in Los Angeles County under Section 1115 of the Federal Social Security Act (42 U.S.C. § 1315). Further, it is the intent of the Department to seek to include as many counties as possible in its request.

Each county wishing to participate in the Demonstration Project will have three working days from the date of receipt of this notice to respond to the Department of Health Services, 714 P Street, Room 1550, Sacramento, California 95814, with a written notification to the Department of Health Services of its interest to pursue participation in a Demonstration Project. Negative responses are not required. Counties may fax the interest notification [(916) 657-2541] and follow up with a mailed copy.

The notification to the Department shall include a brief statement of interest to participate in the Demonstration Project. Counties may withdraw from the Demonstration Project process at any point.

It is expected that within 60 days of receiving an indication from counties stating an interest to participate, the interested counties will receive more detailed instructions and information from the State regarding the Demonstration Project process, to include timelines and other particulars.

**Sincerely,**

Original signed by

Benjamin C. Thomas, Chief  
Medi-Cal Eligibility Branch