

DATE: October 25, 2023

TO: ALL COUNTY WELFARE DIRECTORS Letter No: 23-19  
ALL COUNTY ADMINISTRATIVE OFFICERS  
ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS  
ALL COUNTY PUBLIC HEALTH DIRECTORS  
ALL COUNTY MENTAL HEALTH DIRECTORS  
ALL CONSORTIA/SAWS PROJECT MANAGERS

SUBJECT: IMPLEMENTATION OF REVISED NA BACK 9 HEARING RIGHTS AND  
HEARING REQUEST FORM

(Reference: All County Welfare Directors' Letters [13-13](#), [15-27](#), [16-14](#), and [17-31](#);  
California Department of Social Services (CDSS) All County Letter (ACL) [23-81](#))

### **Purpose**

The purpose of this letter is to provide counties with the revised California Department of Social Services (CDSS) form NA Back 9 (5/22). The revisions to this notice include, but are not limited to, the claimant's ability to indicate their preferred hearing modality, instructions regarding submitting online and emailed hearing requests, and information regarding on-line appeals accounts.

Counties must start using the revised NA Back 9 (5/22) once it is programmed in the Statewide Automated Welfare System (SAWS). All county-generated notices of action (NOAs) for the Medi-Cal program, including NOAs for Modified Adjusted Gross Income (MAGI) and Non-MAGI based eligibility determinations, shall be programmed to include this revised NA Back 9 (5/22) form. Counties may continue using the currently programmed NA Back 9 until automation is completed in CalSAWS. CalSAWS must make programming changes to automate the revised NA Back 9 (5/22) during the next available SAWS release.

### **Background**

The NA Back 9 form is a universal "back" page to be used on all NOAs for Medi-Cal, the California Work Opportunity and Responsibility to Kids program, and/or CalFresh, that includes all information regarding an applicant's or beneficiary's right to a hearing as

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required by federal and state regulations. [ACWDL 17-31](#) previously instructed counties to use the NA Back 9 (ACA/MED-CAL) version, which included an address for the CDSS ACA Bureau. With the release of this ACWDL, counties are now instructed to use the revised NA Back 9 (5/22) once programmed in SAWS, at which point the NA Back 9 (ACA/MEDI-CAL) form will become obsolete.

### **NA Back 9 (5/22)**

The English and all threshold language versions of the NA Back 9 (5/22) are currently available on the CDSS website.

Counties are reminded that the NA Back 9 and the GEN 1365 multilingual notification must always be included with all system generated or manual Medi-Cal NOAs (MAGI and Non-MAGI). Counties are also reminded to follow all NOA policy requirements as outlined in [ACWDL 13-13](#), such as including the NA Back 9 appeal information and meeting established timelines for determinations, redeterminations and NOAs.

You can find the revised English NA Back 9 (5/22) on the CDSS website at: [NA Back 9 \(5/22\) Required form- no substitute permitted \(ca.gov\)](#)

If you have any questions or require additional information, please contact Priscilla Peco at (916) 345-7802 or by email at [Priscilla.Peco@dhcs.ca.gov](mailto:Priscilla.Peco@dhcs.ca.gov) .

Original Signed By

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