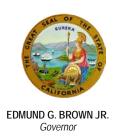


State of California—Health and Human Services Agency Department of Health Care Services



October 24, 2014

Medi-Cal Eligibility Division Information Letter No.: I 14-52

TO: ALL COUNTY WELFARE DIRECTORS

ALL COUNTY WELFARE ADMINISTRATIVE OFFICERS

ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS

ALL COUNTY HEALTH EXECUTIVES

ALL COUNTY MEDS LIAISONS

SUBJECT: Translation of the Qualified Medicare Beneficiary, Specified Low-Income

Medicare Beneficiary, and Qualifying Individuals Application (MC 14A).

The purpose of this letter is to inform counties of the availability of the July 2014 revision to the Qualified Medicare Beneficiary, Specified Low-Income Medicare Beneficiary, and Qualifying Individuals Application, MC 14A.

The revised MC 14A has been translated into all 12 threshold languages. The MC 14A is available on the Department of Health Care Services website at:

http://www.dhcs.ca.gov/formsandpubs/forms/Pages/Index-MC13-MC0805.aspx

If you have any questions about the revised MC 14A application, please contact Tammy Kaylor at (916) 327-0406 or by email at Tammy.Kaylor@dhcs.ca.gov.

Sincerely,

Original Signed By

Tara Naisbitt, Chief Medi-Cal Eligibility Division