

DEPARTMENT OF HEALTH SERVICES

1744 P STREET

SACRAMENTO, CA 95814



August 29, 1985

ERRATA NOTICE

TO: All County Welfare Directors
County Administrative Officers

BEGINNING MONTH OF ELIGIBILITY AND INTERCOUNTY TRANSFER PROCESS FOR
FOUR MONTH AND NINE MONTH CONTINUING MEDI-CAL COVERAGE

RE: ACWD LETTER NO. 85-54 DATED JULY 29, 1985

The above-referenced ACWD letter provides three examples of the procedures required to determine the beginning month of eligibility for Continuing Medi-Cal Coverage. The third example shows that a family who has already received three months of AFDC cash-based Medi-Cal cards for January through March, is entitled to aid code 39 Medi-Cal cards for the period from April through September. The correct aid code for Medi-Cal cards produced for the April through September period is aid code 59. Therefore, please strike out aid code 39 and write in aid code 59.

As previously noted, inquiries regarding this issue should be directed to Catherine Buber-Chatten at (916) 324-4972.

Sincerely,

Original signed by

Doris Z. Soderberg, Chief
Medi-Cal Eligibility Branch

cc: Medi-Cal Liaisons
Medi-Cal Program Consultants

Expiration Date: December 31, 1985