

DEPARTMENT OF HEALTH SERVICES

714/744 P STREET
SACRAMENTO, CA 95814



June 24, 1988

TO: All County Welfare Directors
All County Administrative Offices

Letter No.: 88-38

SUBJECT: APPROPRIATE MAILING ADDRESSES

This is to remind all county welfare departments of the appropriate address to send the following correspondence.

- o MC 177 Share-of-Cost (SOC) Forms
Department of Health Services
Data Systems Branch
ATTN: Key Data Entry Unit
P.O. Box 160400
Sacramento, CA. 95816-0400
- o HAS 2007 (Medi-Cal Control Log) and Data Systems Correspondence
Department of Health Services
Data Systems Branch
ATTN: Data Guidance Unit
P.O. Box 160400
Sacramento, Ca. 95816-0400
- o Correspondence from RAMOS beneficiaries and providers should be directed to:
Department of Health Services
ATTN: Medi-Cal Inquiry Unit
P.O. Box 160400
Sacramento, Ca. 95816-0400

NOTE: Medi-Cal cards returned by the post office to the county because the beneficiary is deceased or the card was undeliverable should be destroyed by the county. Do not return these cards to the State. Counties should ensure that the Medi-Cal Eligibility Data System (MEDS) is updated to reflect any changes to the beneficiary's eligibility status or change of address.

To ensure timely delivery, correspondence should be labeled appropriately as indicated above.

All County Welfare Directors
All County Administration Officers
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Your cooperation in this process is appreciated. If you or your staff have any questions, please contact your State Medi-Cal liaison.

Sincerely,

Original signed by

Frank S. Martucci, Chief
Medi-Cal Eligibility Branch

cc: Medi-Cal Liaisons
Medi-Cal Program Consultants
MEDS Coordinators
CID Mail Unit
Data Guidance Unit

Expiration Date: May 1, 1989