



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



GRAY DAVIS
Governor

DIANA M. BONTÁ, R.N., Dr. P.H.
Director

December 23, 2002

Medi-Cal Eligibility Branch Information Letter No.: I 02 -09

TO: ALL COUNTY WELFARE DIRECTORS
ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS

SUBJECT: NOTIFICATION TO MEDI-CAL BENEFICIARIES-CRAIG V. BONTÁ
(Reference ACDWL NO. 02-45, MEDI-CAL ELIGIBILITY BRANCH
INFORMATION LETTER NO. 02-08)

The purpose of this letter is to inform the county welfare departments that the enclosed notice (English and Spanish) will be mailed to Medi-Cal beneficiaries by December 10, 2002. This notice is being released to all Medi-Cal beneficiaries who did not receive the previous notice for extended eligibles under the Ramos v. Meyers settlement, yet subject to coverage under the Craig v. Bontá lawsuit.

This notification serves to inform the affected Medi-Cal population regarding their entitlement under the Craig v. Bontá lawsuit. Due to the court's temporary order, the Department of Health Services will not terminate a beneficiary's SSI linked Medi-Cal benefits as of June 30, 2002, or later. The order excludes those persons whose SSI has terminated due to death or incarceration.

If you have any questions regarding this letter, please contact Ms. Debra Hader at (916) 654-2279.

Sincerely,

ORIGINAL SIGNED BY

Beth Fife, Chief
Medi-Cal Eligibility Branch

Enclosure

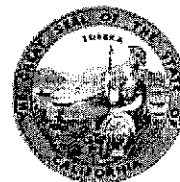


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www.consumerenergycenter.org/flex/index.html

714 P STREET, ROOM 1692, P.O. BOX 942732, SACRAMENTO, CA 94234-7320
(916) 657-2941

Internet Address: www.dhs.ca.gov

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Notice Preparation Date:

«First» «M» «Last»
«address1»
«address2»
«city» «state» «zip»

Supplemental Security Income/State Supplemental Payment

Social Security Number: «ssn»

Beneficiary ID Number: «beneid»

The Social Security Administration notified the Department of Health Services (DHS) that your Supplemental Security Income/State Supplemental Payment (SSI/SSP) cash payment stopped. However, due to recent litigation in the matter of the Craig v Bontá lawsuit you will continue to receive full scope Medi-Cal benefits without a share-of-cost until further notice.

Your eligibility for Medi-Cal will continue. **Do not throw away your Medi-Cal plastic card. If you have lost or thrown away your Medi-Cal card, contact your local Medi-Cal office for a replacement.**

If you have any questions regarding this notice or your Medi-Cal, please contact the State of California, Department of Health Services, Medi-Cal Eligibility Branch, at (916) 654-9162.



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DEPARTMENT OF HEALTH SERVICES

714/744 P STREET

P.O. BOX 942732

SACRAMENTO, CA 94234-7320



Fecha De Notificación:

«First» «M» «Last»

«address1»

«address2»

«city» «state» «zip»

Seguridad de Ingresos Suplementario/Pago Suplementario del Estado**Numero de Seguro Social: «ssn»****Numero de Identificación de Beneficiario: «beneid»**

El Departamento de Servicios de Salud (DHS) recibió notificación de la Administración de Seguro Social que su pago de Seguridad de Ingresos Suplementarios/Pago Suplementario del Estado (SSI/SSP) ha parado. Sin embargo, debido a litigación reciente en el caso de Craig v Bontá, usted continuará recibiendo beneficios de Medi-Cal completos, sin costo, hasta que se le avise de lo contrario.

Su elegibilidad para Medi-Cal continuará. **No tire su tarjeta plástica de Medi-Cal. Si usted a perdido o ha tirado su tarjeta de Medi-Cal, llame a su oficina local de Medi-Cal para reemplazarla.**

Si tiene preguntas acerca de este aviso o de su Medi-Cal, por favor comuníquese con el Estado de California, Departamento de Servicios de Salud, División de Elegibilidad de Medi-Cal al (916) 654-9162.