



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



GAVIN NEWSOM
GOVERNOR

DATE: September 27, 2021

Medi-Cal Eligibility Division Information Letter No.: 21-22

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

SUBJECT: Translation of the Qualified Medicare Beneficiary, Specified Low-Income Medicare Beneficiary, and Qualifying Individuals Application (MC 14A).
(Reference: [Medi-Cal Eligibility Division Information Letter No. I 20-01](#)).

The purpose of this Medi-Cal Eligibility Division Information Letter is to provide counties and the Statewide Automated Welfare Systems with the revised version of the Qualified Medicare Beneficiary, Specified Low-Income Medicare Beneficiary, and Qualifying Individual Application (MC 14A (03/21)).

The revised MC 14A English version (03/21) has been updated with the current Federal Poverty Level (FPL), property limits, and other minor edits. The form has been translated into all 18 threshold languages: Arabic, Armenian, Cambodian, Chinese, Farsi, Hindi, Hmong, Japanese, Korean, Laotian, Mien, Punjabi, Russian, Spanish, Tagalog, Thai, Ukrainian, and Vietnamese. Additionally, the list of county contacts for the Medicare Savings Programs has been updated.

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 Minel Tobertga at (916) 345-8075 or by email at Minel.Tobertga@dhcs.ca.gov.

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