



MICHELLE BAASS  
DIRECTOR

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



GAVIN NEWSOM  
GOVERNOR

Date:

Dear Medi-Cal Recipient:

The Department of Health Care Services (DHCS) is sending you this notice to inform you that your Medi-Cal record may contain incorrect information. In January, DHCS reported information about you and your health care coverage to the Internal Revenue Services (IRS) to comply with the rules of the Affordable Care Act (ACA). However, the IRS determined your information had errors or did not match their records. The IRS did not identify the specific error. It is usually the result of the first and last name and/or Social Security number on your Medi-Cal record not matching what was used on your federal tax filings.

**What should I do now?**

The personal information on your Medi-Cal record will need to be reviewed. If any inaccurate information is found, your record should be updated and DHCS will send any corrected information to the IRS. You will not be required to take any further action once your Medi-Cal record has been reviewed and/or updated.

- If you have Medi-Cal or CalWORKs provided through your county, please call or visit your local county human services agency to request assistance from a county eligibility worker. To find contact information for your local county office, please visit DHCS' County Offices webpage: <http://dhcs.ca.gov/COL>.
- If you have Medi-Cal provided through Supplemental Security Income (SSI) or State Supplementary Payment (SSP), please contact the Social Security Administration (SSA) to request assistance. To find contact information for your local SSA office, please visit SSA's Office Locator webpage: <https://secure.ssa.gov/ICON/main.jsp> or by phone: 1-800-772-1213.
- If you have Medi-Cal through County Children's Health Initiative Program (CCHIP) or Medi-Cal Access Program (MCAP), please contact your program administrator, Maximus, by phone to request assistance. For CCHIP: 1-833-912-2447 or for MCAP: 1-800-433-2611.

If you have any questions about this notice, or if you need additional information regarding Form 1095-B, please visit the DHCS website: <http://dhcs.ca.gov/1095> or call the Medi-Cal 1095-B Helpline: 1-844-253-0883 or TTY: 1-844-357-5709.