



TOBY DOUGLAS  
Director

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



EDMUND G. BROWN JR.  
Governor

February 12, 2015

Medi-Cal Eligibility Division Information Letter No.: I 15-02

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

SUBJECT: Rescind the Instruction for a Third Request for Verification Requirement as Specified in Medi-Cal Eligibility Division Information Letter (MEDIL) I 14-23 Processing Income Verifications on Pended and Current Applications in the Statewide Automated Welfare System

The purpose of this MEDIL is to notify counties that the direction provided in MEDIL I 14-23 requiring counties to send out a third 10-day request for verification for all pending applications will be no longer required. Effective immediately, counties shall return to the Second Contact rules as outlined in All County Welfare Directors Letter 08-07.

If you have any questions regarding this letter, please contact Ms. Sherilyn Walden at (916) 552-9472 or by email at [sherilyn.walden@dhcs.ca.gov](mailto:sherilyn.walden@dhcs.ca.gov).

If you require additional information concerning second contact requirements, please contact Ms. Alison Brown at (916) 319-9565 or by email at [alison.brown@dhcs.ca.gov](mailto:alison.brown@dhcs.ca.gov).

Original Signed By:

Alice Mak, Acting Chief  
Medi-Cal Eligibility Division