DEPARTMENT OF HEALTH SERVICES 714/744 P STREET CRAMENTO, CA 95814 .916) 445-1912



November 28, 1980

To: All County Welfare Directors

Letter No. 80-46

MEDI-CAL BROCHURE UPDATE

The Department will be reprinting the Medi-Cal Brochure in the near future. As the Brochure has not been updated in some time, we are requesting confirmation of the general information address and phone number listed for each county. A copy of the current Brochure is attached for your information.

Please complete and return the attached questionnaire even if there is no change to the current address or phone number. If you have any questions, please contact Tony Planchon at (916) 445-1797. Thank you.

Sincerely,

Original signed by

Barbara V. Carr, Acting Chief Medi-Cal Eligibility Branch

Attachments

cc: Medi-Cal Liaisons Medi-Cal Field Representatives

St 230

MEDI-CAL BROCHURE QUESTIONNAIRE

| 1. | Is the current county address different from the one that the attached Brochure? | appears | in |
|------|--|----------|---------------|
| | | YES | _ |
| | | NO | |
| | (If yes, indicate current address) | | |
| 2. | Is the current county general telephone number different f that appears in the attached Brochure? | From the | one |
| | (If yes, indicate current phone number)(area code) | NO | _ |
| 3. | Who can we contact if clarification is required? | | |
| | Name: | | |
| | County: | | |
| | Phone Number: | | |
| Plea | ase return this questionnaire by December 19, 1980 to: | | |
| | Medi-Cal Eligibility Branch 714 P Street, Room 1692 Sacramento, CA 95814 Attention: Tony Planchon | | |