

NOTICE DATE:
 CASE NAME:
 CASE NUMBER:
 WORKER NAME:
 WORKER ID:
 TELEPHONE NUMBER:
 CUSTOMER ID:

NOTICE OF ACTION

MEDI-CAL TERMINATION

Questions? Ask your worker.

Your Medi-Cal is ending on <DATE> because you did not provide the renewal information that we asked for. We need you to give us information about the following to see if you can still get Medi-Cal:

- Proof of your property. Some examples of proof of your property are bank account statements, investments statements, or titles for property that you own.
- Proof of your income. Some examples of proof of your income are a paystub, your most recent tax return, a letter from your employer, or a benefits award letter.

Please call us, visit your county social services office, or return your completed and signed renewal form to give us this information.

You can still get Medi-Cal, but you need to give us more information. We need it within 90 days, by <DATE1>. We can give you Medi-Cal from <DATE2> if you are eligible. If we do not get the information by <DATE1>, you must reapply for Medi-Cal.

State Hearing: If you think this action is wrong, you can ask for a hearing. The back page tells you how. Your benefits may not be changed if you ask for a hearing before this action takes place. You have only 90 days to ask for a hearing. The 90 days started the day after the county sent you this notice.

Rules: These rules apply; you may review them at your local welfare office: California Code of Regulations Title 22 Section 50175, 50189 and WIC 14005.37(i)