



# Reporting Suspected Fraud

**Instructions:**

**Use this form for complaints of fraud, waste, or abuse only.** If you would like to file another type of complaint such as problems with the website, service center representatives, or enrollment complaints, please use the form located [here](#) and follow those instructions.

**Questions?** If you need help in another language or would like to file your complaint over the phone, call Covered California at 1-888-217-9309 (TTY:1-888-889-4500)

<b>Information about you</b>			
First Name	Last Name	Middle	
Phone Number:		Email Address	
Street Address			
City	State	Zip Code	Case ID (Optional)

**Reason for review:**

Use extra paper if you need more space to write.

**Tell us how we can help you:**

<p><b>Mail this form to:</b>  Covered  California/Office of  Consumer Protection  P.O. Box 989725  West Sacramento, CA  95798</p>	<p><b>Fax this form to:</b>  1-888-217-9310</p>	<p><b>Email this form to:</b>  ConsumerProtection@Covered.CA.gov</p>	<p><b>Call us at:</b>  1-888-217-9309  (TTY 1-888-889-4500)</p>
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