

## MISSOURI DEPARTMENT OF SOCIAL SERVICES FAMILY SUPPORT DIVISION ADVERSE ACTION NOTICE

FROM	ADDRESS (STREET, CITY, STATE, ZIP CODE)			D 1 07 0040	
	, MO			December 27, 2013	
ТО	NAME		CASE NAME		
	ADDRESS (STREET OR P.O. BOX NO.)				
			CASE NUMBER		
	CITY	STATE ZIP			
BASED ON	THE INFORMATION WE HAV	E ABOUT YOUR ELIGIBILITY WE MU	IST:		
	nue your		ve for the month of		
reduce your			effective for the mon	ith of	
	son for this decision is that				
		<del>_</del>			
disconti	nue MO HealthNet for				
The last day	of MO HealthNet coverage is	(MONTH)	(DAY) (YEAR)		
The reas	son for this decision is that	, ,	(5/11)		
other: _					
The reas	son for this decision is that	<del>_</del>			
Certificate of part or all of	f Creditable Coverage showing f an exclusionary period for programmer for the following of the control of the c	ner health insurance plan, such as a g g when you were covered by MO Hea e-existing medical conditions. You ma rtificate by calling the MO HealthNet Di	althNet. The certificate ray request a certificate w	nay help prove you have met vithin 24 months of losing MO	
		not have to request a hearing. If y			
		date indicated above. If you believ			
until	that you believe will prove y	od fieed to continue to receive you	d to continue to receive your present amount of assistance, you have to request a hearing.		
If you wish t	o have a hearing you may	(DAY OF WEEK) (MONTH) (DAY) (YEArequest it by mail, by telephone, or	AR) in person. To request	a hearing	
		request a hearing by mail, you ma			
decision sho repaying the	ows that the plan to reduce e amount of benefits you we enefits while your hearing	pove, your benefits may continue properties or close your case were not entitled to receive while you is pending and the hearing decise	as correct, your house r hearing was pending	the hearing. If the hearing hold will be responsible for . If you elect to discontinue	
decision shore repaying the receiving be restored to you reque present you situation. If	ows that the plan to reduce a amount of benefits you we enefits while your hearing you.  est a hearing, we will sche ir information yourself or your	your benefits or close your case were not entitled to receive while you is pending and the hearing decisedule it for you and notify you of thou may be represented by your overy, or cannot afford one, and live in	as correct, your house r hearing was pending sion is ruled in your fine time of the hearing wn attorney or by other	the hearing. If the hearing hold will be responsible for . If you elect to discontinue favor, lost benefits will be . At the hearing, you may er persons who know your	
decision shorepaying the receiving be restored to y  If you requer present you situation. If office, you re	ows that the plan to reduce a amount of benefits you we enefits while your hearing you.  The est a hearing, we will sche in information yourself or you you do not have an attorned.	your benefits or close your case were not entitled to receive while you is pending and the hearing decisedule it for you and notify you of the unay be represented by your overy, or cannot afford one, and live ince.	as correct, your house r hearing was pending sion is ruled in your fine time of the hearing wn attorney or by other an area served by a	the hearing. If the hearing hold will be responsible for . If you elect to discontinue favor, lost benefits will be . At the hearing, you may er persons who know your	
decision shorepaying the receiving be restored to y  If you requer present you situation. If office, you need to you situation to you have the possible of the	ows that the plan to reduce a amount of benefits you we enefits while your hearing you.  The set a hearing, we will sche are information yourself or you you do not have an attorned any be eligible for this services sibility of free legal services.	your benefits or close your case were not entitled to receive while you is pending and the hearing decisedule it for you and notify you of the unay be represented by your overy, or cannot afford one, and live ince.	as correct, your house r hearing was pending sion is ruled in your fine time of the hearing wn attorney or by other an area served by a . You have the righ	the hearing. If the hearing shold will be responsible for . If you elect to discontinue favor, lost benefits will be . At the hearing, you may er persons who know your legal aid or legal services to present witnesses	
decision shorepaying the receiving be restored to y  If you requer present you situation. If office, you need to you situation to you have the possible of the	ows that the plan to reduce a amount of benefits you we enefits while your hearing you.  The set a hearing, we will sche are information yourself or you you do not have an attorned any be eligible for this services sibility of free legal services.	your benefits or close your case were not entitled to receive while you is pending and the hearing decisedule it for you and notify you of thou may be represented by your ovey, or cannot afford one, and live ince.  call:	as correct, your house r hearing was pending sion is ruled in your fine time of the hearing wn attorney or by other an area served by a . You have the righ	the hearing. If the hearing shold will be responsible for . If you elect to discontinue favor, lost benefits will be . At the hearing, you may er persons who know your legal aid or legal services to present witnesses	

MO 886-0747 (01-2014) IM-80 (01-2014)

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	M AND MAIL IT TO:				
NAME OF PERSON REC	QUESTING HEARING	ADDRESS	ADDRESS		
TELEPHONE NUMBER	WHERE YOU CAN BE REACHED	YOUR SIGNATU	JRE	TODAY'S DATE	
USE THIS SPACE TO T	ELL US WHY YOU WANT A FAIR HEARING				
FOR OFFICE USE	ONLY				
CASE NO.	CASEWORKER	LOAD NO.	DATE NOTICE SENT	DATE REQUEST RECEIVED	
			December 27, 2013		

MO 886-0747 (01-2014) | M-80 (01-2014)