PHYSICIAN'S STATEMENT OF SPECIAL HEALTHCARE NEEDS

FROM: _____   PHONE (   ) _____   DATE _____
_____   FAX NO: (   ) _____
_____

Case Name: _____

Case DCN: _____

Child's Name: _____
            (Patient)

I authorize the release of information regarding healthcare for patient above as described below to representatives of the Missouri Family Support Division. I hereby release any persons, firm, physician, clinic or hospital from any liability for information furnished pursuant to this authorization. This information will be used solely for the purposes of establishing eligibility for MC+ healthcare coverage.

_____   _____
PARENT/CARETAKER'S SIGNATURE   DATE:

FOR PHYSICIAN/PSYCHOLOGIST USE ONLY

The following information is needed to evaluate the above patient's current eligibility for MC+ healthcare coverage:

Does the child listed above have a medical condition which left untreated would result in death or serious physical injury to the child?
□ YES   □ NO

IF YES, NATURE OF THE MEDICAL CONDITION::

_____

_____

_____

Completed by: _____

Date: _____

_____County Family Support Division
_____
_____

_____
Date

_____
_____
_____

Dear _____

You have indicated on your MC+ application that _____ has a special healthcare need.   To further evaluate eligibility for healthcare coverage for this child, please have the child's treating physician complete the reverse side of this notice and return to our office by _____.

Children in families with income above the MC+ Non-CHIP limit (100%, 133% or 185% Federal Poverty Level based on the child's age and below 300% of the federal poverty level must meet additional eligibility criteria in order to qualify for MC+ healthcare coverage. A review of your application reveals income above the Non-CHIP Limits.

To be eligible in any of the higher income ranges a child must be uninsured and not have had health insurance in the six months prior to application. If health insurance is dropped without "good cause", the child is ineligible for six months from the month coverage ended.   RSMo 208.647 eliminates the six month penalty period for a child that does not have access to affordable employer subsidized health insurance if the child has special healthcare needs.   Special healthcare need is defined as having a medical condition that left untreated would result in the death or serious physical injury of the child. The thirty (30) day waiting period for families with income between 225% and 300% of the federal poverty level has also been eliminated for children with special healthcare needs.

If we have not received this information or had any contact regarding this form by the above date, eligibility may be denied or delayed.

Sincerely,

Caseworker
Phone#

IM-60MC (07/04)