MISSOURI DEPARTMENT OF SOCIAL SERVICES DIVISION OF MEDICAL SERVICES PO BOX 6500 JEFFERSON CITY MO 65102-6500



Division of Medical Services Premium Payments P.O. Box 805109 Kansas City, MO 64180-5109

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MATT BLUNT GOVERNOR

## Late Payment Notice

POLICY NUMBER: 99999999 INVOICE NUMBER: 0000999999

DATE: 04-18-2006

Our records show that we have not received your premium payment of \$120.00 for your children's MC+ health care coverage. If you have already mailed your payment, this payment notice does not apply to you.

We must get your late payment no later than 05-07-2006 or coverage will **STOP** on 05-07-2006. MC+ will not pay for any medical bills once coverage stops. If your income is above 225% of federal poverty, your children will not have coverage for (6) months if full payment is not received by 05-07-2006.

## HOW TO PAY THE PREMIUM

- 1. Write a check or money order out to Division of Medical Services for \$120.00.
- 2. Write your policy number on the check or money order.
- 3. Tear off the invoice below. Mail the invoice with your check or money order to Premium Payments at the address listed on the invoice. Allow 5-7 days for the post office to deliver your payment.

Future premium amounts may change if your monthly income or family size changes. Report changes in income, family size, or address to your caseworker at the local Family Support Division Office. Report any changes within 10 days. Be sure that your caseworker has your correct income, family size, and address.

Automatic Withdrawal: You can have the premium amount taken out of your bank account each month. This is called automatic withdrawal and will help make sure your payment is received on time. You can get the automatic withdrawal form on-line at www.dss.mo.gov/dms.

For payment and automatic withdrawal questions, call the Premium Collections Unit toll free: 1-877-888-2811.

## PLEASE TEAR ON DOTTED LINE AND SEND WITH PAYMENT

Policy Number: 99999999 Invoice Number: 0000999999

Invoice Number: 0000999999 SEPTEMBER 2006

Amount: \$120.00

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Mail with Payment to:

Premium Payments P.O. Box 805109 Kansas City, MO 64180-5109

This invoice can only be used for SEPTEMBER coverage. If you want to make a payment but don't have the correct invoice, call the Premium Collections Unit at 1-877-888-2811.