



PARTICIPANT NAME 3101 CHOUTEAU AVE SAINT LOUIS MO 63103-2926

MO HEALTHNET ACTION NOTICE	Page	01	Date 07/01/2021
Head of EU PARTICIPANT NAME			DCN 004444444

This notice is about your MO HealthNet for the Aged, Blind and Disabled (MHABD) benefits and concerns the following individuals:

Departmental Client Number (DCN)

004444444

PARTICIPANT NAME

MO HealthNet benefits for the individual(s) listed have been discontinued for the reason(s) cited. Detailed descriptions for the benefit affected and the reason codes are listed in this notice.

We have determined that you are no longer eligible for Gateway to Better Health TIER1 benefits for the reason listed below. (TIER1/NONE)

PARTICIPANT NAME

End date: 06/30/2021

DCN: 004444444

REASON CODE:

AOA - You are ineligible for MO HealthNet benefits because you have been approved for other medical benefits. (RSMo 208.010)

If you don't believe this decision is right, you can ask for a hearing in the next 90 days from the date of this letter. You can ask for a hearing by calling the FSD Information Center at toll free 1-855-FSD-INFO (1-855-373-4636), going to any FSD office, or mailing a request to any FSD office or to the address at the top of this letter. You have the right to ask for a hearing.

If you ask for a hearing, you can present your case at the hearing by yourself. or you can have someone represent you, including a lawyer. You can have witnesses at the hearing, and you can ask questions of witnesses that the Family Support Division has at the hearing. You may be able to get free help from a lawyer by calling 800-444-0514.

Tax Equity and Fiscal Responsibility Act (TEFRA) Notice: If you get MO HealthNet (Medicaid) while you live in a nursing home, the State of Missouri can file a legal claim against your home. This makes sure that the state will get back the money that has been paid for your medical care if you are unable to leave the nursing home. The state can't take your home, but if you sell, rent, or give your home away, you will first have to give back the money that MO HealthNet paid for your medical care. If you leave the nursing home and go back to living in your home, the legal claim against your home will be dropped. TEFRA does not apply if you are getting only Qualified Medicare Beneficiary (QMB) or Specified





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Low-Income Medicare Beneficiary (SLMB) benefits.

The actions discussed in this letter may affect your benefits or your right to participate in a Family Support Division Program. If you need this letter explained by someone who speaks your language, please call the FSD INFO Center at 1-855-373-4636 to request an interpreter.

Las acciones discutidas en esta carta pueden afectar sus beneficios o su derecho a participar en un programa de la División de Apoyo a la Familia. Si necesita esta carta explicada en español, por favor llame al Centro de Información de FSD al 1-855-373-4636 para solicitar un Intérprete.

Uslovi, razmatrani u ovom pismu, se mogu odraziti na Vase beneficije ili Vasa prava da ucestvujete u "Family Support Division Program" (Odjeljenje za podrsku porodici). Ako trebate objasnjenje ovog pisma na bosanskom jeziku, molim Vas da pozovete FSD INFO Center na broj 1-855-373-4636 i da zahtjevate prevodioca.

If you have any questions or require further information, please contact the FSD Information Center toll free at 1-855-FSD-INFO (1-855-373-4636).

For your convenience, you can now check your account and report changes online at www.dss.mo.gov using the FSD Program Enrollment System.

AUXILIARY AIDS AND SERVICES ARE AVAILABLE UPON REQUEST TO INDIVIDUALS WITH DISABILITIES

TDD/TTY: 800-735-2966 RELAY MISSOURI: 711

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