

MEDICAL ASSISTANCE FOR WORKERS WITH DISABILITIES

Following are the general eligibility requirements an individual must meet to qualify for benefits under the Missouri Medicaid Program for Workers with Disabilities.

- ◆ An individual must be permanently and totally disabled.
- ◆ An individual must be age 16 through age 64.
- ◆ An individual must be employed.
- ◆ An individual must be a US citizen or a permanent resident.
- ◆ An individual must be a resident of Missouri and intend to remain in Missouri.
- ◆ An individual must provide their Social Security Number or apply for one.
- ◆ An individual may not have "available resources" in excess of \$999.99. Available resources include (but are not limited to) bank accounts, stocks, bonds, certificates of deposit, cash, cash surrender value of life

insurance or prepaid burial, and certain real or personal property not in use.

- ◆ The following assets are not included in available resources:
 - ✓ Up to \$100,000 of assets held in only your spouse's name.
 - ✓ One-half of assets held jointly in the name of both you and your spouse.
 - ✓ The home in which you live.
 - ✓ One vehicle used by the household. Additional vehicles may be excluded depending on use.
 - ✓ Certain Independent Living Development Accounts funded with your earnings while participating in this program.
 - ✓ Retirement accounts funded with your earnings while participating in this program.
 - ✓ Medical expense accounts set up through your employer.
 - ✓ Certain Family Development Accounts.
- ◆ Gross income must not exceed \$1,846 per month. This amount will be updated each April. Up to \$8,333.33 of your spouse's

monthly income will be excluded. Your children's income will not be included.

- ◆ Persons with gross income between \$1,108 and \$1,846 per month must pay a premium to obtain coverage. The amount of the premium varies from \$48 to \$123 per month depending on the amount of your income. The income range and premium amounts will be updated each April.

WHERE DO I REQUEST MEDICAL ASSISTANCE FOR WORKERS WITH DISABILITIES?

You can apply for this assistance with the local Division of Family Services office in the county in which you reside.

HEARING RIGHTS

If you disagree with the decision concerning your eligibility, you may request a fair hearing within 90 days of the date of the decision.

If you request a hearing, you may present your information yourself or may ask anyone else to assist you. You have the right to present witnesses in your behalf and to

question witnesses who appear at the request of the Division of Family Services.

REPORTING RESPONSIBILITY

You must report any changes in circumstances within 10 days of when they happen, no matter what causes the change. You have a continuing obligation to report and cannot wait until you are contacted. Any information provided is subject to verification by Federal, State and Local officials. You may be denied benefits and/or be subject to criminal prosecution for knowingly providing false information.

DISCRIMINATION

You are entitled to fair and equal treatment regardless of your age, sex, race, color, handicap, religion, creed, national origin or political belief. If you feel you have been discriminated against, you may file a complaint under the Civil Rights Act of 1964 with the Department of Social Services, Broadway State Office Building, Jefferson City, MO 65103 or the US Department of Health and Human Services, Washington D.C. 20201.

Missouri
Department of Social Services
Division of Family Services
P.O. Box 88
Jefferson City, MO 65103

"AN EQUAL OPPORTUNITY /
AFFIRMATIVE ACTION EMPLOYER"
services provided on a nondiscriminatory
basis

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**WHAT YOU
SHOULD KNOW
ABOUT**

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FOR

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