Family Support Division   **(Sample Letter – Wilson vs. Sherman Lawsuit Settlement)**
Address
Phone number

Case No.

Client
Address

Request for Information - Medicaid

Medicaid for the following parent or caretaker ended on July 1, 2005:

  Name   DCN

We want to check to see if this person(s) can get Medicaid again. You must call your caseworker or write to the address shown above by **November 18, 2005**, if you want us to check your eligibility. Any written response must be postmarked by November 18, 2005.

The person(s) listed above may be eligible for Medicaid if:

- Your family's net income is below the new income limit. The chart at the end of this letter gives the new net income limits. If you are not sure whether you meet the new income test, ask us;

- There has been a change in your household, like a change in income or the number of people who live with you;

- The parent or caretaker relative had earnings from a job in June 2005;

- The parent or caretaker relative has a physical or mental disability which is expected to last for at least 12 months;

- The parent or caretaker relative is pregnant; or

- The parent or caretaker relative is blind.

How to give us the information: You can call your caseworker at the phone number below. You can visit your local Family Support Division office. Or you can mail the information to the Family Support Division office. The address is at the top of this letter.

 What we will do: We will look at your information to see if the parent or caretaker can get Medicaid again. We will send you a letter with our answer.

DO YOU NEED HELP getting this information? Ask your caseworker for help.

Caseworker
Phone Number

MEDICAL ASSISTANCE FOR FAMILIES
INCOME TABLE EFFECTIVE SEPTEMBER 1, 2005
(Based on July 16, 1996 AFDC Income Standards)

HOUSEHOLD SIZE	MONTHLY INCOME LIMIT*
1	$136
2	$234
3	$292
4	$342
5	$388
6	$431
7	$474
8	$514
9	$554
10	$595
11	$635
12	$675

* Gross income minus $90 work standard exemption for each wage
    earner and childcare expenses

* Add $40 for each additional person