



**MISSOURI
DEPARTMENT OF SOCIAL SERVICES
FAMILY SUPPORT DIVISION**

03/10/2008

CASE ID:

COUNTY:

LOAD:

According to the information available to the Family Support Division, your net income will be _____ in April 2008. Since this income must be considered in determining eligibility for benefits (13 CSR 40-2.200), you are no longer eligible for MO HealthNet on a non-spenddown basis effective May 1, 2008.

You may be eligible for MO HealthNet on a spenddown basis. Spenddown is like a deductible on insurance policies, in that you and/or your spouse must be charged for medical care up to a certain point before your MO HealthNet coverage can begin. The maximum income for MO HealthNet for Aged, Blind, and Disabled non-spenddown is \$737.00. Your spenddown amount is _____. Within ten (10) days of this letter, you will receive a notice explaining your options for meeting spenddown from the MO HealthNet Division.

If you have questions about the spenddown program, contact your Eligibility Specialist.

If you believe this decision is not correct, you have the right to request a hearing by phone, in person, or in writing. If you wish to request a hearing after the above action, you have 90 days from March 10, 2008 to make the request.

At the hearing, you may present your case or be represented by someone else including an attorney. You may bring or question witnesses.

Sincerely,

Load #
Phone #