MO HEALTHNET PREMIUM CHANGE NOTICE

Starting July 1, 2008 MO HealthNet premiums will change. These premium amounts are calculated according to Missouri State law (the State Fiscal Year Budget and Revised Statutes of Missouri Section 208.640). The invoice you get in July 2008 will have the new premium amount you owe. You must send the full payment for your new premium or your child(ren)'s MO HealthNet health care coverage may end. The premium will vary based on your income and family size. Locate your family size and monthly income on the chart below to find the premium you must pay to keep your child(ren)'s MO HealthNet health care coverage. If your premium amount is not found on the chart below, **contact your eligibility specialist at your local Family Support Office.** If your family size or monthly income has changed, **contact your eligibility specialist at your local Family Support Office** right away to be charged the correct premium in July 2008. If you have any questions about your premium, call the Premium Collections Unit at 1-877-888-2811.

MO HealthNet for Kids - SCHIP Premium Chart July 1, 2008 – March 31, 2009			
Family Size	Percent of FPL 7/2008	Monthly Income	Premium Amount
1	>150	\$ 1,300.01 to \$ 1,604.00	\$12
1	>185	\$ 1,604.01 to \$ 1,950.00	\$40
1	>225	\$ 1,950.01 to \$ 2,600.00	\$98
2	>150	\$ 1,750.01 to \$ 2,159.00	\$16
2	>185	\$ 2,159.01 to \$ 2,625.00	\$53
2	>225	\$ 2,625.01 to \$ 3,500.00	\$131
3	>150	\$ 2,200.01 to \$ 2,714.00	\$21
3	>185	\$ 2,714.01 to \$ 3,300.00	\$68
3	>225	\$ 3,300.01 to \$ 4,400.00	\$165
4	>150	\$ 2,650.01 to \$ 3,269.00	\$25
4	>185	\$ 3,269.01 to \$ 3,975.00	\$81
4	>225	\$ 3,975.01 to \$ 5,300.00	\$199
5	>150	\$ 3,100.01 to \$ 3,824.00	\$29
5	>185	\$ 3,824.01 to \$ 4,650.00	\$95
5	>225	\$ 4,650.01 to \$ 6,200.00	\$233
6	>150	\$ 3,550.01 to \$ 4,379.00	\$33
6	>185	\$ 4,379.01 to \$ 5,325.00	\$109
6	>225	\$ 5,325.01 to \$ 7,100.00	\$266
7	>150	\$ 4,000.01 to \$ 4,934.00	\$37
7	>185	\$ 4,934.01 to \$ 6,000.00	\$122
7	>225	\$ 6,000.01 to \$ 8,000.00	\$300
8	>150	\$ 4,450.01 to \$ 5,489.00	\$42
8	>185	\$ 5,489.01 to \$ 6,675.00	\$137
8	>225	\$ 6,675.01 to \$ 8,900.00	\$334
	Premium information for family		request.