

Upstate Notice Language

Medical Assistance eligibility is ending effective_____ for:

Name	Client I.D. #
Name	Client I.D. #
Name	Client I.D. #

However, Medical Assistance coverage for the above child(ren) will continue until _____. At the end of this period, the child(ren) will be enrolled in the Child Health Plus B program, if eligible. Child Health Plus B provides health insurance for certain children who cannot get Medical Assistance because their income is too high, if they have no other health insurance and cannot get health insurance through a state health benefits plan.

Medical Assistance eligibility is ending because your net income (gross income less Medical Assistance deductions) of \$_____ is more than 100% of the Federal Poverty Level of \$_____ which is the income limit for children ages six through eighteen years. Since your income is over 100% of the Federal Poverty Level, we compared your income to the Medical Assistance limit. Your income is over the allowable Medical Assistance limit. The amount over the limit is called excess income or spenddown. Your monthly excess income amount is \$_____.

Under Child Health Plus B, children must enroll in a health plan to get medical services. If a child listed above is enrolled in a Medicaid health plan that also provides Child Health Plus B, the child can continue to receive medical services from that health plan. The health plan will send a new benefit card and information on how to access the medical services covered by the plan. The health plan will contact you to confirm the child’s eligibility for Child Health Plus B.

If a child listed above is not enrolled in a health plan, or the health plan does not provide Child Health Plus B, you will have to pick a Child Health Plus B plan for the child. You will soon receive information about the health plans available and instructions for providing other information to confirm your child’s eligibility for Child Health Plus B. In order to avoid a break in the child’s coverage, you must follow those instructions.

If a child requires special care that the Child Health Plus B program does not cover, the child can change to the Medical Assistance Excess Income program. This means that you will have to submit paid or unpaid medical expenses each month that are equal to or more than your monthly excess income amount.

The services which are not covered under Child Health Plus B, but are covered under Medical Assistance include: long-term home health care, personal care aide services, orthodontia, medical/surgical supplies and non-emergency transportation. If you decide you want to change to the Medical Assistance Excess Income program, contact your worker. If you choose the Excess Income program, you must tell us about your resources, if you have not already done so, since there is a resource limit.

Also, if a child is disabled as defined by the Social Security Administration, that child may still be eligible for Medical Assistance. If you need any of the services not covered by Child Health Plus B and you believe that the child has a disability, you must contact your worker to arrange for a disability review.

Please look at the budget calculation section to see how we figured your income and read the Sections: "Explanation of the Excess Income Program" and "Optional Pay-In Program".

This decision is based on Regulation 18 NYCRR 360-4.8 and Section 366(4)(q)(1) of the Social Services Law.