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Plus. You must com	your representative munplete the enclosed "Acc	cess NY Health Care	
it with certain docum	nentation to the following	g address by <u>(date).</u>	

Failure to return this information will mean you will lose your health care coverage. You may return the form and the information by mail.

You must verify your current income, childcare costs, if any, and other changes that have occurred in your household since last year, such as someone started to get other health insurance coverage from an employer. The enclosed application contains a "Documentation Checklist", which shows you the things you can use to document your situation.

If you have children under age 19 living in your household and receiving Child Health Plus A (Medicaid), we will renew your children's eligibility at the same time we renew your Family Health Plus eligibility. Make sure you provide the information about the child(ren) on the application and submit documentation of any income the child(ren) may have.

If you need help completing the "Access NY Health Care" form, you may call the social services office. In addition to available help at the social services office, there are community organizations and health plans with facilitated enrollers that can help you. You can call 1-877-934-7587 or 1-800-698-4543 to find a health plan or community organization in your area that provides assistance. If you go to one of these organizations for help, you must still return the form and documentation to the address above by the date shown.

Note: If there is someone in your household who would like to apply for coverage, the new person or his/her representative must have a personal interview at the local department of social services or with a community organization. You cannot add the new person by mail.

Enclosures