

NYC Notice Language
Excess Income

Your eligibility for Medical Assistance will end effective _____.

This is 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 compare 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 \$_____.

Even though the child(ren) are no longer eligible for Medical Assistance as explained in this notice, we will continue coverage until the date shown under the CONTINUATIONS/ EXTENSIONS section of this notice. After that date 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.

Under Child Health Plus B, children must enroll in a health plan to get medical services. If your child(ren) is already 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. Continue to use the benefit card you currently have until the new card arrives. The health plan will contact you to confirm the child's eligibility for Child Health Plus B.

If your child(ren) 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 us. 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 may go to any local Medical Assistance Program office 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.