## Medical Insurance and Community Services Administration (MICSA) Medical Assistance Program ALERT

October 30, 2006

To: Agencies that assist the DAB (Disabled, Aged, and Blind) population with Mail Renewals: Introduction of MAP-909E, DAB Renewal Notification-Medicaid/Managed Long Term Care

The mail renewal notification for the disabled, aged and blind population has been changed. Beginning with the November 2006 renewal mailings, DAB consumers will receive **MAP form 909E, DAB Renewal Notification-Medicaid/Managed Long Term Care**, instead of MAP form 2094L, Renewal Statement (MRP).

The MAP-909E includes general directions on how to complete the form and what documentation must be submitted. In addition, it is divided into eight sections: Household Information, Health Insurance, Real Estate, Income, Resources, Medicare Health Insurance, Other Health Insurance and Address Where You Live. The MAP 909E will contain pre-printed information from each consumer's case record. The MAP form 909E, DAB Renewal Notification MAP/Managed Long Term Care, is attached.

Consumers and/or their representatives should carefully review each subject area of the renewal application and indicate whether or not that information has changed. If there is a change, it must be noted on the application and supporting documentation must be submitted. The new renewal form also reminds consumers and/or their representatives that **income information must be documented even if it has not changed**. In addition, it strongly urges them to provide proof of their resources if they require community-based long-term services and/or long-term services.

The renewal application should be completed upon receipt and returned to the Medical Assistance Program (MAP) by the date indicated in bold type. Consumers are forewarned that if MAP does not receive their renewal by the specified date, their Medicaid coverage may end.

Furthermore, please note that the Household Information section requires the consumer to inform MAP of their preferred language spoken and read. MAP is currently in the process of translating forms that are sent to consumers into six languages: Arabic, Chinese, Haitian/Creole, Korean, Spanish, and Russian. When these forms are available, consumers with a preferred reading language supported by the Medical Assistance Program will receive mailings relating to their Medicaid coverage in that language, as well as in English.

## PLEASE SHARE THIS ALERT WITH ALL APPROPRIATE STAFF

Medical Assistance Program Alerts are a Public Service of the NYC Human Resources Administration Medical Assistance Program • Office of Eligibility Information Services • 330 West 34<sup>th</sup> Street, New York, NY 10001 Verna Eggleston, *Administrator Commissioner* Mary Harper, *Executive Deputy Commissioner* 

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