

KS Medical Assistance Program  
P. O. Box 3571  
Topeka, KS 66601

**Important changes**

**RESPONSE REQUIRED**

**By XXXXXX**

Jane Q. Public  
123 Main Street  
Anywhere, KS 12345-1234

Spanish Only – Si necesita asistencia para entender esta información, por favor llame al 1-866-305-5147

Dear KanCare Household,

July 9, 2013

We are writing to tell you about changes that are being made to the way we figure KanCare coverage. We need more information about you and your household. **This change may affect your KanCare coverage so make sure to read this letter very carefully.**

**What do we need from you?**

There are **2 forms** in this envelope that you **must fill out and return** in the postage paid envelope by XXXXXX. **If you have questions about how to fill the forms out, call 1-855-751-4012.**

1. **Federal Income Tax Information** - There are 4 questions. We need to know if the people in your household plan to file income taxes in 2014. Fill out questions 1 through 4 for each person in your household. The way you answer the questions will be used when figuring your KanCare coverage.
2. **Relationship Information** – This form lists everyone we have listed as living in your household. We need you to tell us how the listed people are related to each other. If there are people in your household we did not list on the form call the KanCare Clearinghouse at 1-800-792-4884. This information will also be used when figuring your KanCare coverage.

**Why do we need this new information?**

- New eligibility rules start on October 1, 2013. The new rules change the kind of information we need when figuring KanCare coverage. If the forms are not filled out and returned it could cause a break in your KanCare coverage.
- We are getting a new computer system. The new system must have the information from these 2 forms so it can be ready on October 1, 2013. That means we need the information about you and your household as soon as possible. Follow the directions on the forms carefully. It is important the information is correct and complete. Return the forms by XXXX.