

CNS Paragraph Form

Date: 09.13.99

Program Area	03	(01=PA, 02=FS, 03=MA, 04=HP)
Paragraph Number	U0012	
Version Number		
Effective Date	1999	
Title	Stenson – Continue Unchanged	
Comment		
Reason Code	C11	

We will continue Medical Assistance unchanged for:

Name Client I.D. #
Name #
Name #

The Social Security Administration has told us that you are no longer eligible for Supplemental Security Income (SSI) benefits; however, you will continue to be entitled to full services under the Medical Assistance Program.

This decision is based on Regulation 18 NYCRR 360-3.3(b).

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Nosotros continuaremos la Asistencia Medica sin cambio alguno para:

Nombre No. de I.D. del Cliente
Nombre #
Nombre #

La Administracion del Seguro Social nos ha informado que usted ya no es elegible para el Ingreso Suplementario del Seguro (SSI); sin embargo, usted continuara teniendo derecho a servicios completos bajo el Programa de Asistencia Medica.

Esta decision esta basada en la Regulacion 18 NYCRR 360-3.3(b).