

CNS Paragraph Form

Date: 03.18.04

Program Area 03 (01=PA, 02=FS, 03=MA, 04=HP)
Paragraph Number S0002
Version Number 00003
Effective Date 2004 (YYMMDD)
Title **Informational Letter SD Met Pay-In Only No Bills Receipts**
Comment
Reason Code T02

INFORMATIONAL LETTER-SPENDDOWN MET

Name	Client I.D. #
Name	#
Name	#

This is to inform you that you have met your excess income liability and are being provided coverage as follows:

INSTRUCTION

CHOOSE ONE OF THE FOLLOWING MESSAGES:

MESSAGE 1

You have made a payment of \$_____ to our Agency to meet your excess income liability for the period from _____ to _____. Outpatient coverage has been authorized for this period.

MESSAGE 2

You have made a payment of \$_____ to our Agency to meet your excess income liability for the six month period from _____ to _____. Coverage for both outpatient and inpatient care and services has been authorized for this period.

Choose One Of The Following:

Message 1
S0020 (Community Coverage: No LTC)

Message 2
S0021 (Community Coverage With Community-Based LTC)

Message 3
None Of The Above

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CARTA INFORMATIVA--REQUISITOS DE INGRESOS EXCESIVOS CUMPLIDOS

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

La presente es para informarle que usted ha cumplido con su responsabilidad de ingresos excesivos, y se le esta proveyendo cobertura de Asistencia Medica de la siguiente manera:

INSTRUCTION

CHOOSE ONE OF THE FOLLOWING MESSAGES

MESSAGE 1

Usted ha hecho un pago de \$_____ a nuestra Agencia para cumplir con su responsabilidad de ingresos excesivos por el periodo de _____ a _____. La cobertura para pacientes externos ha sido autorizada para este periodo.

MESSAGE 2

Usted ha hecho un pago de \$_____ a nuestra Agencia para satisfacer su responsabilidad de ingresos excesivos por el periodo de seis meses de _____ a _____. La cobertura para todos los beneficios (paciente externo e interno) ha sido autorizada para este periodo.

Choose One Of The Following:

Message 1
S0020 (Community Coverage: No LTC)

Message 2
S0021 (Community Coverage WITH Community-Based LTC)

Message 3
None Of The Above