

Division of Economic Assistance DSS-EA-209 04/21

## **NOTICE OF ACTION**

NOTICE FOR: DAVID E SCHIED (000522733)

DAVID E SCHIED PO BOX 321 SPEARFISH SD 57783-0321

THIS NOTICE IS BASED ON FACTS FOR FEBRUARY, 2022

MEDICAL: YOUR MEDICAL ASSISTANCE APPLICATION FOR FEBRUARY, 2022 HAS BEEN DENIED FOR THE FOLLOWING PEOPLE BECAUSE:

YOU INDICATED ON THE APPLICATION THE FOLLOWING INDIVIDULAL(S) HAS A PHYSICAL, MENTAL OR EMOTIONAL HEALTH CONDITION THAT CAUSES LIMITATIONS (LIKE BATHING, DRESSING, DAILY CHORES, ETC) OR LIVES IN A MEDICAL FACILITY OR NURSING HOME. THEREFORE, THIS PERSON MAY BE ELIGIBLE IN ANOTHER MEDICAL ASSISTANCE PROGRAM. THE DEPARTMENT OF SOCIAL SERVICES WILL CONTACT YOU TO GATHER ADDITIONAL INFORMATION TO DETERMINE IF THE INDIVIDUAL(S) IS ELIGIBLE.

DAVID E SCHIED

WHILE YOU ARE WAITING FOR AND ELIGIBILITY DETERMINATION FOR ONE OF THESE MEDICAL ASSISTANCE PROGRAMS, YOU ARE ELIGIBLE TO ENROLL IN INSURANCE COVERAGE THRU THE MARKETPLACE AND MAY BE ELIGIBLE FOR HELP PAYING FOR THE COVERAGE. THIS PERSON'S APPLICATION INFORMATION HAS BEEN FORWARDED TO THE MARKETPLACE. YOU WILL BE CONTACTED DIRECTLY BY THE FEDERALLY FACILITATED MARKETPLACE REGARDING ELIGIBILITY FOR HELP PAYING FOR INSURANCE COVERAGE.

CONTACT YOUR ECONOMIC ASSISTANCE BENEFITS SPECIALIST IF YOU HAVE ANY QUESTIONS.

INDIVIDUALS DENIED FOR MEDICAID STILL MAY BE ABLE TO GET HEALTH INSURANCE - AND HELP PAYING FOR IT - THROUGH THE HEALTH INSURANCE MARKETPLACE, FOR MORE INFORMATION ON THE HEALTH INSURANCE MARKETPLACE, PLEASE CALL 1-800-318-2596 (TTY: 1-855-889-4325).

\* \* \* \* DO NOT THROW YOUR PLASTIC MEDICAL CARD AWAY \* \* \* \*

IF YOU BECOME ELIGIBLE FOR MEDICAL ASSISTANCE AGAIN, YOU WILL NEED TO

USE THE SAME PLASTIC MEDICAL CARD, YOUR MEDICAL CARD WILL Not work when you are not eligible for medical assistance.

FEB 23, 2022 DATE KIM TERRILLBENEFITS SPECIALIST892-2731DEPT OF SOCIAL SERVICES609 FIFTH AVE609 FIFTH AVEBELLE FOURCHESD 57717-1405

Please turn over – your fair hearing rights are explained on back of this form.