

It's time to renew your Medicaid for Children and Adults/Dr. Dynasaur

March 20, 2023 Respond by: September 12,2022 Master Case ID: 1-1782113443

Contact ID: 1-TH0V5Y

Parent One 123 Test Avenue, Burlington, VT 05405

You can renew your
Medicaid for Children and
Adults/Dr. Dynasaur in
any one of these ways

- By phone: Call 1-855-899-9600 (toll free) Monday Friday, 8 a.m. to 4:30 p.m.
- **Online:** For the quickest way to renew, visit **VermontHealthConnect.gov**.
- In Person: There is someone who can help in your area. https://info.healthconnect. vermont.gov/find-local-help
- By mail: Mail your completed, signed form to:

Vermont Health Connect, 280 State Drive, NOB 1 South, Waterbury, VT 05671-8100

Bring it to a district office. Call 1-855-899-9600 for help finding the office closest to you.

If you choose mail -Here's how to complete this paper renewal form and send it back to us in the enclosed envelope

- 1. Answer all of the questions on the form.
- 2. Read the information about you and each member of your household. Add any missing information. Write in the correct information if anything has changed.
- 3. You must sign and date this form in Step 12 and return it by September 12,2022. Forms returned without a signature will NOT be processed. If you don't return a signed form by this date, you may lose your Medicaid for Children and Adults/Dr. Dynasaur as early as September **30,2022.**(HBEE Rule 75.03(b))

renew

What we need when you We need information about each person living in your household or listed on your tax return, including:

- Those who get Medicaid for Children and Adults/Dr. Dynasaur now,
- Those who don't get Medicaid for Children and Adults/Dr. Dynasaur now but would like to apply, and
- Those who don't get Medicaid for Children and Adults/Dr. Dynasaur now and don't want to.

We will check your answers using information from electronic data sources. If the information does not match, we may ask you to send more information

What happens after you renew

We'll send you a letter telling you about your benefits. If you don't qualify for Medicaid for Children and Adults/Dr. Dynasaur, we'll check to see if you qualify for other health coverage.

If you need interpretation services...

1-855-899-9600 إذا آنت ترغب خدمات الترجمة الفورية اتصل برقم (Arabic) Ako su Vam potrebne usluge tumačenja, pozovite 1-855-899-9600. (Bosnian) စကားပြန် ဝန်ဆောင်မှုလုပ်ငန်းကိုအလိုရှိပါက 1-855-899-9600 သို့ဖုန်းဆက်ခေါ်ပါ။ (Burmese) Si vous avez besoin de services d'interprétation, appelez le 1-855-899-9600. (French) Mugihe woba ushaka impfashanyo yo gusigurirwa, hamagara uyu murongo 1-855-899-9600. (Kirundi) यदि तपाईलाई दोभाषे सेवाको जर्रत परेमा 1-855-899-9600 मा कल गन्र्होस्। (Nepali) Haddii aad u baahan tahay adeegyo turjumaan, wac 1-855-899-9600. (Somali) Si usted necesita servicios de interpretación, llame al 1-855-899-9600. (Spanish) Ikiwa unahitaji huduma za ukalimani, piga simu 1-855-899-9600. (Swahili) Nếu quý vị cần dịch vụ thông ngôn, hãy gọi 1-855-899-9600. (Vietnamese)





Form 205IFAR

Revised 12/2022



1 Your Contact Information					
" Review your contact information here.	" Correct any wrong or missing information here.				
Parent One	Name (firs	t, middle, last & suffix)			
Physical address: 123 Test Avenue	Physical ac	ldress		Apartment #	
Burlington,VT 05405	City (home)	State	Zip code	
Mailing address:	Mailing ad	ldress		Apartment #	
	City (maili	ng)	State	Zip code	
Phone: Home: (999) 999-9999	Best phone number to reach you Home Work Cell Number:				
Work: Cell:	Other phone number, if you have one Home Work Cell Number:				
Email address:	Email address, if you have one:				
2 Information about tax You can still renew even if you do					
" Review the information below for peopl	•			•	
earned this year. Note: Married people filing				out anything that is	
wrong. Write correct information in the space right next to it. Fill in any missing information. Name Check here if this person do					
Parent One			plan to file a tax return		
Spouse on tax return Parent Two		Dependents on tax retu Baby Child	ırn		
Name		Check here if this person does not plan to file a tax return.			
Spouse on tax return	Dependents on tax return				
" Will anyone in your household be claime			se's tax return?		
Yes No <i>If yes</i> , write the name of the dependents and the tax filer.					
Name of dependents (first, middle, last & suffix)					
Name of tax filer (first, middle, last & suffix)					

