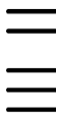


Health Insurance Processing Center  
P.O. Box 4405  
Taunton, MA 02780-0419



You can get this information large print and Braille. Call 1-800-841-2900 from Monday to Friday, 8:00 A.M. to 5:00 P.M. TTY: 1-800-497-4648



John Q. Public  
100 Main Street  
Boston, MA 02118

Date: [Month DD, YYYY of Notice creation]  
Notice ID: [PA determination ID]/  
[Member MEC Number]/[Template ID]-[Timestamp of PA determination date in DDMMYY format]  
Member ID: [MMIS ID]  
SSN: [xxx-xx- last four digit]

Dear [FirstName MiddleName LastName Suffix]

**Please read this letter carefully!**

MassHealth has received information about you and/or your health insurance and has determined that that you can no longer get premium assistance. **MassHealth has stopped your Premium Assistance payments.**

This may be because:

- your health insurance ended;
- your job ended;
- your employer changed the amount they contribute towards your coverage;
- your employer changed health plans and/or your plan no longer meets MassHealth rules;
- you are eligible for Medicare;
- other reasons.

Call us to find out which of these reasons apply. If our information is not correct and your circumstances have not changed, please contact the Premium Assistance Unit at 1-800-862-4840.

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Questions? Visit [www.mahealthconnector.org](http://www.mahealthconnector.org) or call 1-800-841-2900 (TTY: 1-800-497-4648)

**How did we make this decision?**

MassHealth has determined that you or your family member no longer has health insurance or the health insurance no longer meets MassHealth rules for Premium Assistance. This is according to MassHealth regulations at 130 CMR 506.012.

**What if you do not agree with our decision?**

You can ask for a fair hearing if you do not agree with our decision. Read ***How to Ask for a Fair Hearing*** that came with this letter.

Thank you,

MassHealth Premium Assistance Unit

SAMPLE