IOWA HHS

Iowa Department of Health and Human Services

Request for Termination of Medical Assistance

Important Information

Read this document in its entirety. If you wish to terminate your medical assistance coverage, then sign and date at the bottom of the page.

I understand that:

- Some benefits that I receive (such as State Supplementary Assistance, waiver services, or habilitation services) are directly related to my medical assistance eligibility. If I request to terminate my medical assistance all these benefits, services, and medical coverage will also end.
- The Iowa Department of Health and Human Services will no longer pay my Medicare premiums, Medicare co-insurance, and deductibles if I terminate my medical assistance so I may be responsible for them.
- I have the right to complete and return a renewal form and have an eligibility determination made for my medical assistance coverage based on my criteria.
- Voluntarily terminating my coverage will not impact any future applications for medical assistance with Iowa HHS and I am able to reapply for medical assistance at any time.

Member Information

First Name	Middle Initial	Last Name	
Mailing Address			
City	State	Zip Code	Case Number or State ID Phone Number Date of Birth
Name of Person who helped you with this form		Helper's Org/Company	

Signature

I voluntarily wish to terminate my medical assistance with the Iowa Department of Health and Human Services. (Including but not limited to: Medicaid, HCBS Waiver Services, Facility coverage, Hawki, IHAWP, and Medicare Savings Programs) I understand that by signing this form all of my coverage will be discontinued based on this request. I also understand that services and related benefits that are contingent on my medical assistance coverage will also end (for example Waiver and Habilitation Services and State Supplementary Assistance).

Signature	Date

Please return this form by:
Fax to (515) 564-4017
Email to imagingcenter4@dhs.state.ia.us
Mail to Imaging Center 4, PO Box 2027, Cedar Rapids, Iowa 52406