What you need to apply for Missouri Medicaid



Gather as much of this information as you can. If you have never applied for Missouri Medicaid with the Family Support Division (FSD), you may need all of the information. The more you fill in on this worksheet, the faster you'll be able to fill out the application. If you run out of room, write on another piece of paper. See ways to apply on page 3.

Here is what you'll need to prepare to apply:

Basic information



Household information

For every member of your household who is applying:

- $\hfill A$ social security card or Permanent Resident Card, and
- Basic information including full name and date of birth

After you have filled in your personal information on this worksheet, keep it in a safe place.



Estimated gross income (before taxes or other deductions)

Fill in the yearly gross income for each household earner whose income is reported on your federal tax return, even if the household earner is not applying for health insurance. See examples of income documents on the next page. If you need help calculating your yearly income, make an appointment for free help to apply.

Name	Wages (income shown on a W-2 form, Box 1)	Self-employment income (business income or income shown on a 1099 form, such as 1099-NEC, Box 1)	Social Security income	Other income (unemployment benefits, investment earnings, veteran's benefits, or other)

Examples of income documents

If employed:

• Pay stubs from the last 30 days that show gross income

If employment has ended, either:

- FSD's IM-12 form filled out by the employer
- A letter from the employer (on company letterhead) that includes:
 - Employee name and social security number
 - How often paid (weekly, bi-weekly, or monthly)
 - How many hours they worked (incl. overtime)
 - o Date last worked
 - o Rate of pay
 - o Gross amount of last paycheck
 - Employer's phone number and signature

If self-employed:

- Most recent full tax return with all schedules and bookkeeping records
- Bookkeeping records or a ledger that shows income and deductible expenses



The FSD may request other information as it processes your application. If so, you will need to send the information quickly – in 10 days or less.

Current health insurance

Fill in information for anyone in your household who already has any health insurance and wants to apply for Medicaid

If you need to cancel a current health insurance plan, you can get free help to learn how to cancel it.

Name	Health insurance policy number	Current health insurance company	Phone number of current health insurance company	Date coverage started

How to apply for Missouri Medicaid, called MO HealthNet

Apply through the Missouri Family Support Division (FSD) in one of these ways:



Online at: mydss.mo.gov

Fill in your account information below



By phone with the FSD Call Center at: **855-373-4636** or **855-373-9994**



By mail with a paper application – send to:

Family Support Division 615 E. 13th St. Kansas City, MO 64106

My account information

After you create an account at mydss.mo.gov, fill in your account information below.

Email username	
Email password	
mydss.mo.gov account username	
mydss.mo.gov account password	

