Hawki

Healthy and Well Kids in Iowa

Confirmation of MCO Choice

This letter confirms your Managed Care Organization (MCO) choice. This means that you will have health coverage from a different MCO than the one that was assigned to you when you enrolled in the Hawki Program. Your health coverage with a new MCO begins **<Effective Date>**. You may contact your new MCO at the phone number below for more information about your benefits.

You have until <90 Day Choice End Date> to change your MCO for any reason. After that you may change your MCO during your Annual Choice Period or throughout the year for reasons of Good Cause.

ID Number	Member Name	MCO	MCO Phone Number
<0000000X>	<MEMBER NAME>	<MCO>	<###-###-####>
<0000000X>	<MEMBER NAME>	<MCO>	<###-###-####>
<0000000X>	<MEMBER NAME>	<MCO>	<###-###-####>
<0000000X>	<MEMBER NAME>	<MCO>	<###-###-####>
<0000000X>	<MEMBER NAME>	<MCO>	<###-###-####>
<0000000X>	<MEMBER NAME>	<MCO>	<###-###-####>
<0000000X>	<MEMBER NAME>	<MCO>	<###-###-####>
<0000000X>	<MEMBER NAME>	<MCO>	<###-###-####>
<0000000X>	<MEMBER NAME>	<MCO>	<###-###-####>
<0000000X>	<MEMBER NAME>	<MCO>	<###-###-####>

*ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **1-800-257-8563 (TTY: 1-800-735-2942).***

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 ***1-800-257-8563 (TTY: 1-800-735-2942).***

Hawki Member Services: 1-800-257-8563 | www.dhs.iowa.gov/hawki