



**Michigan Department of Community Health  
Division of Health, Wellness and Disease Control  
Michigan Dental Program (MDP)**

**Medicaid Eligible MDP Renewal Application Guidance  
FY 08/09**

Please read through the following information carefully prior to completing the MDP renewal application.

To receive dental coverage from the Michigan Dental Program (MDP), applicants must meet the following criteria:

1. Applicant must provide documentation of HIV disease.
2. Applicant must be a resident of the State of Michigan.
3. Applicant cannot have any private dental insurance.
4. Applicant must have a determination of Medicaid eligibility through their local Michigan Department of Human Services (DHS) office.
5. Applicants gross income cannot exceed 450% of the current Federal Poverty Level (F.P.L.)

450% of the current F.P.L. (As of January 24, 2007)  
Earned Income and/or Unearned Income (income from employment or self-employment, SSI, SSDI, disability etc.)

<b>Family size</b>	<b>You can earn this per month:</b>
1	\$3,828.75
2	\$5,133.75
3	\$6,438.75
4	\$7,743.75
5	\$9,048.75

To determine your eligibility for assistance you must do the following:

- 1. Complete the MDP renewal application in its entirety.
- 2. An MDP participating dental provider must sign or stamp the application to verify that you are in care. If you do not have a dental provider, please contact the MDP office.
- 3. You must apply for Medicaid and/or the Adult Medical Program (AMP) at your local county Department of Human Services office prior to submitting your application to the MDP. Please do not submit your MDP application until your Medicaid/AMP application has been reviewed and is pending, denied, or in spenddown status. Applicants who have active Full Medicaid or the Adult Benefits Waiver (ABW) do not need to reapply. **Please Note: If you are approved for Medicaid you must seek dental services from a Medicaid dental provider.**

- 4. Read, sign and date page 2 of the application. Provide additional names of person(s) MDP can speak to pertaining to your eligibility and access to services provided by the MDP.
  
- 5. Mail or fax the completed application to:

Michigan Dental Program  
109 Michigan Avenue  
9<sup>th</sup> Floor  
Lansing, Michigan 48913

Toll Free Phone Number: 1-888-826-6565  
Fax Number: 517-335-7723

**Please Note: Incomplete applications will not be processed and will result in a delay in processing. Applications received after March 31, 2008 may result in a lapse in MDP coverage.**