

# MICHIGAN DENTAL PROGRAM ENROLLMENT INSTRUCTIONS

Michigan Department of Health and Human Services

**1. Application** - Completed and signed application

**2. Proof of Income** - Please provide one of the following:

- The most recent month pay stubs (a 4 week, 30-day period)
- Social Security/Disability Award Letter (SSI or SSDI)
- Tax forms from previous year
- Unemployment benefits award letter
- Corrections release papers with 30 days of release
- Notarized statement from employer showing gross pay for 30 days

If **NONE**, complete MDHHS-5422, Declaration of Residency/No Income or Support/Insurance Ineligibility form.

**3. Insurance Status**

- You must apply for Medicaid if you do not have private health insurance or Healthy Michigan Plan. MDP is the payer of the last resort and must show that all other payment options have been exhausted. If you are approved for Medicaid, you may have both Medicaid and MDP.
- Copy of insurance card

If **NONE**, complete MDHHS-5422, Declaration of Residency/No Income or Support/ Insurance Ineligibility form.

**4. Proof of HIV Status/Lab Required for NEW Members Only** - Existing MDP members, no HIV documentation is required.

**5. Proof of Residency** – Please provide one of the following:

- Current State of Michigan identification card or Driver's License
- Utility Bill in individual's name showing address
- Benefit award letter with individual's name and address
- Lease or mortgage in individual's name showing address
- Voter registration

If **NONE**, complete MDHHS-5422, Declaration of Residency/No Income or Support/Insurance Ineligibility form.

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