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Once eligible, AHCCCS will send an AHCCCS ID Card with health plan information for each eligible person in your household We would like to show you a description here but the site won't allow us Additional ProvisionsI WILL NOT contact or ask AHCCCS, DES or the Community Partner-Assistor Organization Call Center for information related to a customer unless I or someone from my organization has Go to AHCCCS Available Health Plans to find information about health plans, to pre-enroll, or to change enrollment in your anniversary month. Help with your Medicare APPLICATION FOR ARIZONA LONG TERM CARE SYSTEM (ALTCS) USE ONLY Customer Name: Person: AHCCCS ID: Name of Applicant What is this application for? Cash Assistance/Temporary Assistance for Needy Families (TANF) Tuberculosis Control Complete and submit the Health-e-Arizona Plus application for AHCCCS Health Insurance, Nutrition Assistance, and Cash Assistance. REQUEST FOR APPLICATION FOR ARIZONA LONG TERM CARE System (ALTCS) To start the Use this application to see if you and members of your household qualify for: Free or low-cost health insurance from AHCCCS Medical Assistance. You can also call () if you need health plan enrollment information. Visit Health-e-Arizona Plus and apply on-line today! Name of the Community Partner OrganizationIndividual Request for Application for AHCCCS Long Term Care Services. Complete and submit the Health-e-Arizona Plus application for AHCCCS Health Insurance, Nutrition Assistance, and Cash Assistance. information, apply for benefits, report changes, renew eligibility, or troubleshoot an application. View and confirm receipt of your Individual User Application for Access to Stat of Arizona Health-e-Arizona Plus (HEAplus)Organization Information. Nutrition Assistance. Help with your Medicare costs. Use this application to see if you and members of your household qualify for: Free or low-cost insurance from AHCCCS.
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