

CHILD HEALTH PROGRAM OVERVIEW

A Healthy Future for Your Children Starts Today

Your children's health can affect everything from physical and emotional well-being to their performance in school. You can help make sure your children receive the health care they need by enrolling them in Kaiser Permanente's Child Health Program (CHP).

CHP offers health coverage to children under 19 who don't have health insurance. For example, if your children don't have access to coverage like Medi-Cal, a job-based health plan, or federal financial assistance through Covered California, they may be eligible for CHP.

With CHP, you receive a subsidy from Kaiser Permanente to help pay your monthly premium.

Your children will also receive medical financial assistance that eliminates out-of-pocket costs for most covered services provided at Kaiser Permanente medical offices and hospitals. If services are not provided at a Kaiser Permanente medical office or hospital, you will have to pay all out-of-pocket costs for your children.

Depending on your family size and income, your monthly payment amount is \$0, \$10 or \$20 per child, for up to 3 children. Additional children are covered at no extra charge.

Are Your Children Eligible for CHP?

Your children are eligible if they are uninsured and:

- live in a Kaiser Permanente service area
- are under the age of 19
- live in a household with incomes up to 300% of the Federal Poverty Level (For example: \$59,370 for a family of 3, \$71,550 for a family of 4 per 2014 guidelines)
- don't have access to other health coverage including, but not limited to, Medi-Cal, Medicare, Covered California, or a job-based health plan.

Even if you have an affordability exemption from the federal government you must still meet the eligibility criteria listed above to be approved for the Kaiser Permanente subsidy. U.S. citizenship is not an eligibility requirement for CHP.

When you no longer meet our eligibility requirements, you will be disenrolled from Kaiser Permanente's CHP, which includes the Kaiser Permanente subsidy and medical financial assistance, and you will be responsible for the Kaiser Permanente Platinum 90 HMO plan monthly insurance premium and any out-of-pocket costs you incur.

Monthly Payment Amounts

Family size (parents/guardians and children) ¹	Monthly Payment Amounts		
	\$0 per child If income before taxes ² is between:	\$10 per child If income before taxes ² is between:	\$20 per child If income before taxes ² is between:
1	\$0 – \$16,105	\$16,106 – \$23,340	\$23,341 – \$35,010
2	\$0 - \$21,707	\$21,708 - \$31,460	\$31,461 - \$47,190
3	\$0 - \$27,310	\$27,311 - \$39,580	\$39,581 - \$59,370
4	\$0 - \$32,913	\$32,914 - \$47,700	\$47,701 - \$71,550
5	\$0 - \$38,516	\$38,517 - \$55,820	\$55,821 - \$83,730
6	\$0 - \$44,119	\$44,120 - \$63,940	\$63,941 - \$95,910
7	\$0 - \$49,721	\$49,722 - \$72,060	\$72,061 - \$108,090
8	\$0 - \$55,324	\$55,325 - \$80,180	\$80,181 - \$120,270
For each additional person	add \$4,060	add \$4,060	add \$4,060

Ranges shown above are subject to change.

¹ A single parent/guardian who lives with 1 child is considered a family of 2.

² Income is your estimated income for 1 year, based on the total monthly household gross income information you submit with your application.

Did You Know?

There are new ways to get health care coverage beginning in 2014 for United States citizens and those lawfully present in the United States.

- Covered California (www.CoveredCa.com) may be able to help you pay for premiums and other out-of-pocket costs.
- Medi-Cal is available for individuals born in the United States or who have been legal residents of the United States for 5 years or more and whose annual income is at or below 133% of the federal poverty level (For example: \$15,521, for an individual, \$31,721 for a family of four per 2014 guidelines).

If you are eligible for Medi-Cal or coverage through Covered California (www.CoveredCa.com), please apply for these programs before you apply for CHP.

Open Enrollment

There's a deadline to apply for health care coverage. You can apply from November 15, 2014 to February 15, 2015.

The effective date of coverage depends on when your application is received per the following:

If Application Received by:	Your Effective date of Coverage will be:
December 15, 2014	January 1, 2015
December 16, 2014 – January 15, 2015	February 1, 2015
January 16, 2015 – February 15, 2015	March 1, 2015

Special Enrollment

After open enrollment, you can still enroll during a special enrollment period if there is a change of your status. In general, the special enrollment period is 60 days after a triggering event such as:

- Marriage
- Birth or adoption of a child
- Divorce
- Loss of job and job-based health coverage

If you have experienced a triggering event, we'll need a letter from you that describes the triggering event along with your Kaiser Permanente Individuals and Families application and documentation supporting your triggering event. Please visit our website at <http://info.kp.org/childhealthprogram> to learn more about the documentation you are required to submit to support your triggering event.

Your Children and Kaiser Permanente

Kaiser Permanente helps your children stay healthy and active. You can choose a personal physician who will get to know your children, provide preventive care exams, and treat your children if they get sick. For your convenience, many of our facilities have lab, X-ray, and pharmacy services all in one location. And we offer evening and weekend hours at some facilities if you can't bring your children in during the day.

Benefit Highlights

Benefits - Kaiser Permanente Platinum 90 HMO*	Out-of-pocket costs if enrolled in CHP (for services at a Kaiser Permanente hospital or medical office)
Preventive Care/screening/immunization	\$0
Primary care office visit	\$0
Specialty care office visit	\$0

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Benefits - Kaiser Permanente Platinum 90 HMO*	Out-of-pocket costs if enrolled in CHP (for services at a Kaiser Permanente hospital or medical office)
Prescription drugs (up to a 30-day supply at a Kaiser Permanente plan pharmacy or through mail-order service)	\$0
Eye exam	\$0
Eye glasses	\$0
Urgent care	\$0
Emergency room services	\$0
Hospital stay (room/doctor fees)	\$0
Most X-rays	\$0
Mental health services	\$0
Dental check-up	Limited to two check ups per year. Covered by Delta Dental

* Please refer to the Summary of Benefits for limitations and exceptions.

How to Apply

Complete the following documents:

1. For health coverage - complete the Kaiser Permanente for Individuals and Families application
2. For the Kaiser Permanente subsidy – complete the Kaiser Permanente Subsidy Eligibility form

You will be notified of your eligibility once we have reviewed your completed documents. Completed forms can take up to 30 business days to process.

For assistance completing these documents, please visit our website at <http://info.kp.org/childhealthprogram> to locate an Enrollment Assister near you.

If you have Questions

We're here to help. Please call our Member Service Contact Center at **1-800-464-4000**. TTY users call **1-800-777-1370** or **711**, (for the deaf, hard of hearing, or speech impaired) 24 hours a day, 7 days a week except holidays. On the day after Thanksgiving, Christmas Eve, and New Year's Eve the office closes at 5 p.m. PT and after 5 p.m. on Christmas Eve, and New Year's Eve. You may also visit kp.org/childhealthprogram for more information.

We look forward to helping your children get an early start on good health.