

**1. What is CoverKids?**

CoverKids is a comprehensive health insurance program for children whose families cannot afford private health insurance or do not have access to coverage. For qualifying families, there is no monthly premium – only co-pays for medical services.

CoverKids receives funding as part of the federally-sponsored Children's Health Insurance Program (CHIP), which provides health insurance to uninsured children in all 50 states.

**2. What are the requirements for eligibility?**

- Tennessee resident
- U.S. citizen or qualified legal alien (babies born in the U.S. will be considered citizens)
- Age 18 or younger
- Uninsured for at least three months (exceptions for TennCare disenrollees, newborns and children transferring from another state's CHIP plan)
- Household income up to 250% of federal poverty level (FPL); \$55,875 annually for a family of four
- Children who are Native American/Alaskan Native may be eligible for additional benefits and should include federally-recognized tribal paperwork with the application.
- CoverKids must be your only health plan. To get benefits, your child cannot be part of any other plan. You cannot use CoverKids as a second health plan.
- CoverKids HealthyTNBabies covers pregnant women who do not have maternity health benefits. If you have another health plan, you cannot be part of CoverKids HealthyTNBabies. You cannot use CoverKids HealthyTNBabies as a second health plan.

**3. What are the income requirements for CoverKids?**

In order to receive coverage with no monthly premium, a family's annual household income should be within the following guidelines.

<b>Number in Household</b>	<b>Maximum Income</b>
1	\$27,225
2	\$36,775
3	\$45,325
4	\$55,875
5	\$65,425
6	\$74,975
7	\$84,525
8	\$94,075

Based on 2011 federal poverty guidelines. Current as of 3/1/11.  
Income guidelines subject to change.

**4. Will CoverKids cover uninsurable children and children with special health needs?**

Yes. CoverKids is a guaranteed issue policy and there are no pre-existing condition exclusions for its members.

**5. Why must children be uninsured for the previous three months in order to qualify?**

CoverKids is designed to provide health insurance for children who have no other option for coverage. The three month requirement prevents the program from being used as an alternative to private commercial insurance. Exceptions to the three month go-bare requirement include:

- Newborns up to four months of age, who have not been previously insured
- Children who are leaving TennCare
- Children moving to Tennessee who were covered by CHIP in another state, provided they meet CoverKids eligibility criteria
- Loss of coverage due to parent or guardian's separation from employment (voluntary or involuntary)

**6. Who can apply for CoverKids coverage on behalf of a child(ren)?**

The custodial parent can submit a CoverKids application for the child(ren). The child(ren) must reside in the household with the custodial parent.

**7. Once a child is enrolled, how long will the child be covered?**

Once a child is enrolled in CoverKids, coverage is for 12 months. After the first year, eligibility for the program will be verified annually.

**8. When will my CoverKids coverage begin?**

Your CoverKids coverage will begin the 1st of the month or subsequent month depending upon receipt of your completed and signed CoverKids application.

A pregnant woman applying for CoverKids HealthyTNBabies will need to provide a complete application and a provider statement before she can be covered on the program.

**9. If a family's income changes during the year, can a child lose coverage?**

Once a child is enrolled in CoverKids, he or she will receive 12 months of coverage. CoverKids will not re-examine an enrollee's eligibility during this time.

However, if parents report a reduction in family income that would make the child eligible for TennCare, by federal regulations, the family would be encouraged to apply for TennCare.

**10. Does CoverKids include a maternity benefit?**

Pregnant women of any age who meet CoverKids eligibility criteria may be eligible for maternity benefits through the program, with no monthly premium.

Once a pregnant woman is approved for maternity coverage through CoverKids HealthyTNBabies, she will be covered from her effective date through 60 days after delivery. Any doctor visits related to the pregnancy, including treatment

within 60 days after delivery, will be covered by the plan. At birth, the child may be eligible for coverage through CoverKids or TennCare.

A pregnant woman with maternity coverage is not eligible for CoverKids HealthyTNBabies.

**11. If a woman who is pregnant and has employer-sponsored health insurance, but does not have maternity coverage, is she eligible for maternity coverage under CoverKids?**

Yes, if an applicant otherwise meets CoverKids eligibility requirements she will be eligible for coverage.

**12. If I am pregnant, how do I apply for maternity and/or newborn benefits?**

If you are pregnant and applying for maternity benefits please complete the CoverKids application, making sure to check the box in Section 1 for maternity benefits and completing Section 3 of the application (Information About Pregnancy and/or Newborn Benefits). You will also need to have your doctor fill out the provider statement which the form can be downloaded at [http://www.covertn.gov/web/coverkids\\_app\\_english\\_provider.pdf](http://www.covertn.gov/web/coverkids_app_english_provider.pdf)

If you are applying for newborn benefits please complete the CoverKids application, making sure to check the box in Section 1 for newborn benefits and complete Section 3.

If you are applying for both maternity and newborn benefits, please complete the CoverKids application, making sure to check the box labeled both in Section 1 and complete Section 3 of the application. You will also need to have your doctor fill out the provider statement which the form can be downloaded at [http://www.covertn.gov/web/coverkids\\_app\\_english\\_provider.pdf](http://www.covertn.gov/web/coverkids_app_english_provider.pdf). Once you have delivered, you will need to notify CoverKids at 1-866-620-8864 with information regarding your newborn so coverage can begin for your child.

**13. If a child has access to a parent's employer-sponsored insurance, but the family declined the coverage because it was too expensive, is the child eligible for CoverKids?**

Yes. Access to coverage is not a factor in CoverKids eligibility. If all other eligibility criteria are met, it is simply a matter of whether the child is insured or uninsured.

One exception is access to state employee insurance. Federal guidelines do not allow children with access to state employee health insurance to participate in CoverKids.

**14. If a child has a trauma and goes to the hospital can they enroll at the hospital?**

A family can apply for CoverKids at any time, but the coverage will not begin for approximately one month after application, which is the standard for commercial insurance policies. However, newborns up to four months of age will receive fast track eligibility based on the date of application.

Families are encouraged to apply for the CoverKids program before children become injured or ill.

**15. What services are covered?**

CoverKids provides comprehensive health insurance with an emphasis on preventive health services and includes the following:

- Vaccinations and well-child visits
- Physician services
- Hospitalization
- Mental health services
- Physical, speech and occupational therapy
- Vision
- Dental

**16. What types of preventive health services are covered?**

CoverKids has an emphasis on services children need most, such as well-baby and well-child visits, as well as age-appropriate immunizations according to the schedule and endorsement of the American Academy of Pediatrics.

**17. What mental health benefits are included?**

CoverKids covers inpatient and outpatient mental health care and substance abuse treatment for low co-pays without limits. Prior authorization is required for these services.

**18. Are orthodontic services covered?**

Beginning July 1, 2010 CoverKids members are eligible for orthodontic services after one year of continuous enrollment. This means the first date a child can receive orthodontic services is July 1, 2011.

**19. What is the cost associated with CoverKids?**

Families who meet the income guidelines will not pay monthly premiums for CoverKids, but will be required to make co-payments for certain services. Co-payments will vary based on income. By federal guidelines, a family's total annual out-of-pocket expenditures cannot exceed five percent of the annual household income.

For families who earn more than the income maximum, a buy-in option is available. Effective January 1, 2011, the monthly premium for this category is approximately \$244 per child.

**20. If an applicant would rather be on CoverKids than on TennCare, can the applicant request this or switch from TennCare?**

No. Any child who is eligible for TennCare will be covered accordingly. In fact, every application for CoverKids will first be screened for TennCare eligibility before enrolling the child in CoverKids.

**21. Will a child insured under CoverKids have to follow the Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program?**

No. EPSDT is a program under Medicaid/TennCare and does not apply to

- CoverKids. Families have access to the same preventive health services but do not have to follow EPSDT compliant procedures. CoverKids will follow the well-baby, well-child schedule laid out by the American Academy of Pediatrics, which includes age appropriate immunizations.
- 22. Are children on CoverKids assigned a physician?**  
No. Families will have a listing of participating physicians in their area and can select the health care provider they are most comfortable seeing. Families are encouraged to select a physician to be their medical care coordinator so their children can have continuity and quality of care.
- 23. What health care providers participate in the network?**  
CoverKids is part of BlueCross BlueShield of Tennessee's Network S, a large commercial network with providers across the state. This network provides access to at least one physician, hospital and pharmacy within 30 miles of any member, which is consistent with the standard guidelines for access to care.
- 24. How do I apply?**  
You may apply online at [www.CoverKids.com](http://www.CoverKids.com) or download a standard application to mail. Applications may also be requested by calling 1-866-620-8864.
- 25. Is special assistance available for help completing the CoverKids application?**  
Yes. Those who need special assistance completing the CoverKids application may call 1-866-620-8864 and request help completing their application.
- 26. What Language Assistance is available?**  
A Spanish language version of the application is available. Contact us at 1-866-620-8864 for further language assistance.
- 27. What happens when a child is too old to qualify for CoverKids?**  
CoverKids is specifically intended for children, not adults. As a result, a child is no longer eligible for CoverKids after age 19.  
  
Once ineligible due to age, a member should explore other coverage options such as private or employer-sponsored insurance or AccessTN.
- 28. What is the best way to learn more about CoverKids?**  
Information is available at [www.CoverKids.com](http://www.CoverKids.com) or by calling 1-866-620-8864.