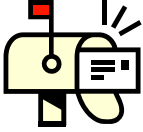


Louisiana Children's Health Insurance Program (LaCHIP) is no-cost health insurance for children under age 19.

Ways To Apply

- 1 **Online** – Apply at www.LaCHIP.org
- 2 **Mail** – Mail the application and documents of proof to



LaCHIP
P.O. Box 91278
Baton Rouge, LA
70821-9278
- 3 **Fax** – Fax the application form and documents of proof to **1-877-523-2987 (toll-free)**
- 4 **Drop Off** – Drop off the application and documents of proof at your local Medicaid/LaCHIP Office. Call **1-877-252-2447** for your local office address.

Income Limits

We count parent's gross income (before deductions). Income limits are based on family size. *We do not count grandparents or other caregivers in the family size, so their income is not included.*

If your income is above these limits, you may still qualify because we give deductions based on types of income and expenses (such as child support and daycare).

Number in family	Income Limits through March 31, 2009	
	Weekly Income	Monthly Income
1	\$434	\$1,734
2	\$584	\$2,334
3	\$734	\$2,934
4	\$884	\$3,534
5	\$1,034	\$4,134
6	\$1,184	\$4,734
7	\$1,334	\$5,334
8	\$1,484	\$5,934

For each extra person, add \$600.

If your income is over these amounts, see the information about LaCHIP Affordable Plan on the back of this flyer.

LaCHIP Covers These Things

- ★ Doctor visits
- ★ Hospital visits
- ★ Dental care
- ★ Vision care
- ★ Hearing care
- ★ Lab work & tests
- ★ Immunizations (shots)
- ★ Prescription medicines
- ★ Medical equipment & supplies
- ★ Medically necessary transportation
- ★ Speech & language therapy
- ★ Physical therapy
- ★ Occupational therapy
- ★ Mental health clinic services
- ★ Psychological tests & therapy
- ★ Help with scheduling appointments

You Choose Your Doctor

You may get care from any doctor or clinic who accepts Medicaid/LaCHIP. Most people must choose one doctor to be their Primary Care Physician.

Other Insurance

If you have or can get insurance through your job, Medicaid may help pay the premiums. Call 1-866-362-5253 or go online www.LAHIPP.DHH.Louisiana.gov.

Help with Buying Food

Help with buying food (The Louisiana Purchase Card) is decided by another office. Call 1-888-524-3578 or go online www.DSS.LA.gov.

Questions

If you have questions or need help filling out the application, call **1-877-252-2447**. If you are deaf or hard of hearing and use a TTY text telephone, call **1-800-220-5404**. These calls are free.

LaCHIP Affordable Plan

If your child does not qualify for the no-cost LaCHIP program because of your family's income, he/she may qualify for the *LaCHIP Affordable Plan*, a low cost program.

The *LaCHIP Affordable Plan* has co-payments and a \$50 monthly premium to cover all children in the home.

The *LaCHIP Affordable Plan* provides different benefits than the LaCHIP services listed on this flyer. If you qualify, you will receive an enrollment package that will list all covered services and costs. Visit www.LaCHIP.org for more information about covered services for the *LaCHIP Affordable Plan*.

Your Rights

If you think the decision we make is unfair, incorrect, or made too late, you may ask for a fair hearing:

- 1 Call the LaCHIP office at 1-877-252-2447 OR
- 2 Write to
LA DHH Bureau of Appeals
P. O. Box 4183
Baton Rouge, LA 70821-4183 OR
- 3 Call or write to your local Medicaid/LaCHIP office

LaCHIP is an Equal Opportunity Program

Medicaid/LaCHIP cannot treat you differently because of your race, color, sex, age, disability, religion, nationality or political beliefs. If you think we have, you may:

- 1 Call the U.S. DHHS Regional Office for Civil Rights in Dallas, TX at 1-800-368-1019 OR
- 2 Write to:
LA Dept. of Health & Hospitals
P. O. Box 4818
Baton Rouge, LA 70821-4818 OR
- 3 Call or write to your local Medicaid/LaCHIP office

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BHSF Form 1-CH Cover
Rev. 04/08
Prior Issue Obsolete



Application For



Low-Cost Health Insurance For Children

Apply online at
www.LaCHIP.org

1+877+2LaCHIP (252-2447)

¿Necesita traductor de español?
Llame al 1-877-252-2447.

Quý vị có cần thông dịch viên người Việt không? Nếu cần xin gọi số 1-877-252-2447.

Application For



No-Cost Health Care For Children

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