**Insurance Enrollment for Clinics**

**Summary**
Utah has one of the highest uninsured rates for children in the country. There are approximately 72,000 children (7.4%) in our state that do not have health insurance. In Salt Lake County, the rate is even higher at 9.4%, approximately 30,486 children. Due to covid-19, unemployment rates have been much higher in April and May. Many families secure health insurance through their job, making high job loss concerning for insurance coverage.

Kids without insurance are at a higher risk for poor physical and mental health outcomes; they are more likely to have unmet health needs and lack a usual source of care. Research shows that uninsured children tend to have more frequent school absences and lower graduation rates. Their families have more stressors and are at a greater risk for medical debt or bankruptcy. Being uninsured diminishes children’s chances to grow into healthy and productive adults.

Utah expanded Medicaid in January 2020, making more people eligible, though some may not realize this. Medicaid is available for people earning up to 138% FPL. CHIP is available for children in families earning up to 200% FPL.

**Income Eligibility**

<table>
<thead>
<tr>
<th>Household Size</th>
<th>100%</th>
<th>138%</th>
<th>150%</th>
<th>200%</th>
<th>250%</th>
<th>300%</th>
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<tbody>
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<td>$17,608</td>
<td>$19,140</td>
<td>$25,526</td>
<td>$31,900</td>
<td>$38,280</td>
<td>$51,040</td>
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<td>17,240</td>
<td>23,791</td>
<td>25,860</td>
<td>34,480</td>
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<td>51,720</td>
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<td>78,500</td>
<td>104,860</td>
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<tr>
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<td>30,680</td>
<td>42,338</td>
<td>46,020</td>
<td>61,360</td>
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<td>66,180</td>
<td>88,240</td>
<td>110,300</td>
<td>132,360</td>
<td>176,480</td>
</tr>
</tbody>
</table>

*Household size is determined by who is included in your taxes.*

- Eligible for Premium Assistance and Cost-Sharing Reduction in the ACA Marketplace
- Maximum eligibility for Medicaid expansion
- Maximum eligibility for children 0-18 (CHIP)
- Maximum eligibility for Cost Sharing Reduction in the Marketplace
- Maximum eligibility for Premium Assistance Subsidies

**How Clinics Can Help**
Primary care clinics are good place to identify individuals without insurance and to connect them with resources that can assist in enrollment. The best place to start is to determine if your clinic already has a process in place to identify patients who are uninsured. Many front desks ask about insurance coverage...
at check-in but may not have a secondary step to connect those without insurance to resources. Depending on clinic interest and resources, below are a few options for how they can assist in outreach and enrollment efforts.

- **Option 1**: This is the most integrated model where clinics have a dedicated staff person to help families walk through the application process for Medicaid/CHIP/Exchange products. This could be a clinic FTE or a partner agency with an on-site presence. After a patient is identified as being uninsured, a warm hand-off would occur between the front desk and the enrollment assister. The assister would walk the individual through the eligibility requirements, help gather needed paperwork, and ensure the application and documents get submitted. The assister would also follow-up with the person to ensure coverage occurs or to help with any barriers that may arise through the process.

- **Option 2**: This is a mid-tier option without on-site presence. Instead, a warm handoff from the clinic to partner agencies would direct individuals to assist with enrollment. Ideally, this would include consents to share PHI across agencies so the receiving enrollment agency can contact the family. This works best when the clinic can directly schedule an appointment with the community agency for enrollment assistance. This ensures an appointment is set and doesn’t rely on the family making a connection.

- **Option 3**: This is the lowest touch option. The clinic provides information and resources about community agencies to families about enrollment assistance. This requires the family to take the next step of contacting the agency and requesting assistance with enrollment.

**Frequently Asked Questions**

**Q**: What do Medicaid and CHIP cover?

**A**: All states provide comprehensive coverage for children, including:

- Routine check-ups
- Immunizations
- Doctor visits
- Prescriptions
- Dental and vision care
- Inpatient and outpatient hospital care
- Laboratory and X-ray services
- Emergency services
- Mental health services

**Q**: When can I apply for Medicaid and CHIP? Is there a certain time of year I should apply?

**A**: You can enroll in Medicaid or CHIP any time. There's no special open enrollment period for Medicaid or CHIP. You can apply at [HealthCare.gov](http://HealthCare.gov) or directly with your state’s Medicaid or CHIP agency. Call 2-1-1 or visit takecareutah.org to get Free, confidential help applying.

**Q**: What information will I need to provide?

**A**: The information/documents you need can vary. But in general, you will need:

- Identification
- Proof of citizenship and residency
- Or Proof of Legal Permanent Residency status and 5 year waiting period for adults
- Verification of all earned income, like pay stubs or tax information

**Q**: What do families pay for coverage under Medicaid and CHIP?

**A**: Depending on their income, most families will get completely FREE health coverage for their children and teens. In some cases, if you qualify for CHIP, families may be required to pay quarterly premiums,
and copayments for specific services - but these are minimal. For the duration of the pandemic, you do not have to pay any premiums.

Q: Is my child eligible for Medicaid or the Children's Health Insurance Program (CHIP)?
A: Children up to age 19 with family income up to $50,000 per year (for a family of four) may qualify for Medicaid or the CHIP. Young people up to 21 may be eligible for Medicaid. Youth who have "aged out" of foster care can be covered under Medicaid until they reach 26; there is no income limit for these youth. There is no ‘asset’ test for most families, meaning a house or cars will not be used against you when you apply. Only monthly household income is considered.

Q: Are teenagers eligible for coverage?
A: Yes, in every state, children from birth until their 19th birthday may be eligible for coverage.

Q: I have a job. Can my children and teens still qualify?
A: Yes, many children who are eligible for Medicaid and CHIP are in families where one or both parents are working. Working parents may not have health coverage through their jobs or the health plans they're offered may not cover their children. Many working families can't afford health insurance on their own.

Q: Who can apply for Medicaid and CHIP for a child?
A: A parent, grandparent, guardian or other authorized representative can apply on behalf of a child. If you're a teenager living on your own, your state may allow you to apply for Medicaid on your own behalf or any adult may apply for you.

Q: Are parents eligible too?
A: The rules have changed and now more parents are also eligible for Medicaid if they meet income and citizenship requirements.

Public Charge is a test that is administered to some immigrants who are becoming Legal Permanent Residents (green card holders) or are waiting for a Visa to determine whether they may use certain public benefits. While most people will not be subject to Public Charge, there are many misconceptions causing a “chilling effect” that creates fear, frustration, and uncertainty to access certain programs like Medicaid, CHIP, and SNAP. In Utah, only immigrants with eligible immigration statuses qualify for public programs and once they qualify as Legal Permanent Residents or citizens, they are no longer subject to public charge.

My children are eligible for Medicaid/CHIP but I am worried that having them use these benefits may affect my immigration eligibility in the future.

Q: Does my children’s Medicaid or CHIP count against me for Public Charge?
A: No, when children get coverage and care through Medicaid or CHIP it doesn’t affect a parent or guardian’s immigration process.

Q: If I am a Legal Permanent Resident (green card holder), would applying or obtaining Medicaid count against me for Public Charge?
A: No. You are not subject to Public Charge after you obtain eligibility for Medicaid as a Legal Permanent Resident (5-year waiting period). Additionally, Legal Permanent Resident children are not subject to the 5-year waiting period.