



## CALIFORNIA CHILDREN'S PROGRAMS 101

### Introduction

Individuals who do not qualify for Medi-Cal because they do not meet the financial or other eligibility criteria may still be able to qualify for one of the following non-Medi-Cal programs. While some of the following programs offer limited benefits, others offer full scope based on the individuals medical condition or health care needs.

**Access for Infants and Mothers Program (AIM):** The Aim Program is administered by the state of California to provide low cost health coverage for pregnant women. To qualify, the family income has to be between 200 and 300 percent of the Federal Poverty Level who don't have health insurance and whose income is too high to qualify for no-cost MediCal. Services include all medically necessary services, prenatal visits, hospital delivery, and post partum care – for 60 days. Their newborns are covered by the Healthy Families Program unless the infant is enrolled in employer-sponsored insurance or no-cost full scope MediCal. AIM is administered by the Managed Risk Medical Insurance Board (MRMIB).

**California Children's Services Program (CCS):** provides medical care funding for children whose families either have low income or high medical expenses due to serious medical problems including:

- Acute injury or illness;
- Genetic Disease;
- Chronic conditions;
- Physical disabilities;
- Congenital defects; and
- Major injuries due to violence or accidents.

The California Children's Program covers services related to the eligible condition including physician services, laboratory work (i.e. blood tests), hospital care, x-rays, rehabilitation services, equipment, pharmaceuticals, and case management. In addition, this program provides case management for children under the age of 21 enrolled in either Medi-Cal or Healthy Families for eligible conditions. Every county has a CCS office and can be reached by contacting the county health department.

**Child Health and Disability Program (CHPD):** provides families with incomes of less than 200% of the Federal Poverty Level with preventive health screening examinations. The state is required to provide these services to Medi-Cal beneficiaries under the age of 21 under a federal program called the Early and Period Screening, Diagnostic, and Treatment Program (EPSDT). Services such as physical examinations, immunizations, and laboratory tests are also provided to income-qualifying children without satisfactory immigration status.

**CHDP Gateway Enrollment:** In July of 2003, the CHPD became a gateway to Medi-Cal and the Healthy Families Program. This means that children can be immediately pre-enrolled in Medi-Cal or the Healthy Families Program through their CHPD provider after filing an automatic application. This program provides families with up to two months of eligibility while they complete an application for continued coverage under one of the programs.

**County Medical Services Program (CMSP):** this county medical assistance program serves individuals who are unable to pay for their health care but are not eligible for Medi-Cal. To satisfy the obligation of providing health care to the indigent, 34 small, rural counties participate in the County Medical Services Program. As part of the state requirement, counties contract with CMSP to serve the same population as the county Medically Indigent Adult Program. The CMSP is funded by state and county funds and is administered by the Office of County Health Services in conjunction with county officials.

**Genetically Handicapped Persons Program (GHPP):** this program offers health coverage for both children and adults who are not eligible for the California Children's Services Program (CCS) and have a specific genetic disease including:

- Cystic fibrosis;
- Hemophilia;
- Sickle cell disease;
- Certain neurological diseases; and
- Certain metabolic diseases.

This program is administered statewide through the GHPP office located in Sacramento, California and families with incomes up to 250% of the Federal Poverty Level pay fees based on a sliding scale.

**Healthy Families Program (HFP):** This program is California's State Children's Health Insurance Program, also known as "SCHIP". It offers coverage to children and teens up to age 19 whose family's income is up to 250% of the Federal Poverty Level, do not qualify for no-cost MediCal, must meet citizenship or immigration rules and do not have employer sponsored health insurance in the last 3 months. HFP provides low cost health, dental and vision coverage. Covered services are provided by managed care plans and participation in this program requires a monthly premium payment. HFP is administered by the Managed Risk Medical Insurance Board (MRMIB).

**Major Risk Medical Insurance Program (MRMIP):** This California state program provides health insurance for those unable to obtain coverage in the individual health insurance market because of a pre-existing condition. Californians qualifying for the program participate in the cost of their coverage by paying premiums. The State supplements those premiums to cover cost of care in MRMIP. To qualify, must be California resident, not eligible for Part A & B of Medicare (unless eligible solely because of end-stage renal disease), and not eligible for continuation of benefits under Cobra or CalCobra. The program provides comprehensive benefit package with \$500 annual deductible and \$75,000 per calendar year benefit cap. MRMIP is administered by the Managed Risk Medical Insurance Board (MRMIB).

**Indian Health Program:** this program provides no-cost comprehensive health insurance for Native American children residing in California. For eligibility, children must have documentation of Native American tribal membership. Benefits include:

- Comprehensive health care;
- Dental care;
- Vision care; and
- Other services, depending on the local Indian Health Program

**Kaiser Permanente Cares for Kids:** provides low cost health insurance coverage to children under the age of 19 who are not eligible for Medi-Cal, Healthy Families, or any other health insurance. For eligibility, at least one child in the household must be enrolled in public school and primary income must be at or below the 300% Federal Poverty Level. Benefits include:

- Medical office visits,
- Vision care;
- Dental services;
- Prescription drugs;
- Mental health services;
- Substance abuse services;
- Health education;
- Hospital services; and
- Needed lab tests.

Premiums of \$8 - \$15 per child are paid every month for up to three children depending on the family size and income. Additional children are covered at no extra premium. Co-Payments are \$5 - \$10 for some services. Please note that the program has limited availability.

**California Kids:** provides low-cost out-patient primary health care coverage for uninsured children (including undocumented and emancipated youth) ages 2 -18. Children age 2-18 whose family's income is up to 250% of the Federal Poverty Level or foster children age 18-19 whose family income is at the 300% Federal Poverty Level are eligible for the California Kids Program if they do not qualify for full-scope, no-cost Medi-Cal or any other state assistance programs such as Healthy Kids and who cannot afford private health insurance.