



Gearing Up For Your Transitions

Frequently Asked Questions

Health

We hope the Frequently Asked Questions (FAQ's) below answer questions you may have regarding this topic. **Click on the question to be taken to the answer.**

Do I need guardianship for my son or daughter? What are my options?

How do I find an adult doctor?

How do I get copies of my medical records?

How do I schedule my doctor's appointment and what should I bring with me?

What should I know about my medications?

How do I refill my medication?

Can I stay on my parent's insurance?

How do I know where to go for medical services?

How do I apply for Medicaid?

How do I apply for SSI?

Where do I go to find out information on birth control, family planning and the prevention of sexually transmitted diseases?

Delaware Healthy Children Program

What is the Delaware Healthy Children Program?

How do I know if my children are eligible?

How do I apply?

What if my child already has some health coverage?

What if I have insurance for my child, but it is too expensive?

What is a qualified non-citizen?

Are children of State employees eligible?

Why aren't children of State employees eligible?

What about pre-existing conditions or medical eligibility?

How is the Delaware Healthy Children Program different from other Delaware Medicaid programs?

How often does the Delaware Healthy Children Program review eligibility? What is the process?

How much do I have to pay?

Who provides the insurance?

Are parents covered too?

When will my coverage start?

Insure Kids Now

Why is health insurance for children and teens important?

How can insurance help my children and teens stay healthy?

How can health insurance help my child's and teen's ability to learn?

Eligibility

Who is eligible for Medicaid or CHIP?

I have teenagers. Are they eligible, too?

I have a job. Can my children and teens still qualify?

Who can apply for health insurance for my child or teen?

Is there a limit on the amount of time my child or teen can remain enrolled in Medicaid or CHIP?

What if my children and teens are covered by Medicaid or CHIP already?

Covered Services

What services does Medicaid and CHIP cover?

Is the flu vaccine covered?

Cost for Services

Who pays for the health insurance coverage under Medicaid and CHIP?

Application Process and Additional Services

How can I get more information on my state's program?

How do I apply?

I'm not applying for this program, but I'd like to get involved. How can I help?

Do I need guardianship for my son or daughter? What are my options?

There are many options other than guardianship which allow you to continue to provide your child with assistance after his/her 18th birthday. Make sure you have looked at all of them before you make the decision. You can learn more about adult guardianship and its alternatives here:

([http://www.deldhub.com/pdf/Guardianship and Alternatives Brochure March 2014.pdf](http://www.deldhub.com/pdf/Guardianship%20and%20Alternatives%20Brochure%20March%202014.pdf))

How do I find an adult doctor?

Ask your specialists or pediatrician for a recommendation. You can also talk to your friends, parents, caseworker (if you have one), or therapist. To check that a specific doctor is covered by your insurance or Medicaid, call the number on your insurance/Medicaid card; you can also call this number to get a list of doctors that are covered by your plan.

How do I get copies of my medical records?

Call the hospital or doctor's office to get copies of your records. Usually you will have to make a written request for your records. You may have to pay for them. It's a good practice to keep all of your records in a file. Always ask for copies of test results, etc.

How do I schedule my doctor's appointment and what should I bring with me?

Call the office and give them your name and the reason for your visit. Have your calendar and insurance/medical assistance information ready. When you get to the appointment, make sure you have a list of your medications or put them all in a brown bag and bring them with you. Make sure you have your insurance card and ID, and a way to pay for your co-pay (if you have co-pays for doctor's visits). You should always carry your ID, insurance card and list of medications in your wallet. If you do not have a driver's license it is very important that you go to the Division of Motor Vehicles "DMV" and get an official state ID card.

What should I know about my medications?

Why you take them, what the dosage is, what are the side effects, and make sure you refill them before you get to the last pill. Some pharmacies will automatically refill your prescription for you before you get too close to the end of your pills, and may even call you to remind you to pick them up. You should ask your pharmacy if they can set this up for you.

How do I refill my medication?

There are several ways to refill medication. You may call the pharmacy number listed on the bottle. Some pharmacies have apps for your smartphone, you may refill in person or on the internet, or some pharmacies have an automatic refill service (you have to tell them you want this). Talk to your pharmacist about the options in your pharmacy.

Can I stay on my parent's insurance?

You may stay on your parent's insurance up until you are 26. Some people may be able to stay on their parent's insurance indefinitely depending on your disability. Have your parents contact their insurance company for further information.

How do I know where to go for medical services?

With some insurances policies and Medicaid you are restricted as to where you may go and which doctors you may see. Call the insurance company and/or Medicaid if you are unsure as to who your preferred providers are (check your insurance or Medicaid card for the number) or whether they are covered by your insurance.

How do I apply for Medicaid?

Call the Medicaid office closest to you listed on this website. They will guide you as to what your need to do. You can also apply online at <https://assist.dhss.delaware.gov/>

How do I apply for SSI?

If you do not already have SSI you should apply in the month of your 18th birthday. You may apply by going to the social security office nearest to you or filling out the application over the internet.

Where do I go to find out information on birth control, family planning and the prevention of sexually transmitted diseases?

Talk to your doctor or go to the health center at your school. If you are comfortable, you can also talk to your parents or another trusted family member about these issues.

Delaware Healthy Children Program

These FAQ's came directly from the State of Delaware Department of Health and Social Services Division of Social Services

What is the Delaware Healthy Children Program?

The Delaware Healthy Children Program (DHCP) provides low cost health insurance for children who are currently uninsured. It gives your children all the benefits that most private plans provide.

How do I know if my children are eligible?

Uninsured children from birth to the age of 19 who live in families with incomes at or below the 200% Federal Poverty Level are eligible for DHCP coverage.

How do I apply?

You can obtain an application in English or Spanish by calling DHCP at 800-996-9969, or by printing the desired form from the DHCP - How to Apply page. You can also fill out an application on the internet using ASSIST - the State of Delaware's Application for Social Service Programs. For more information, you can read the DHCP flyer (PDF file), which can also be viewed as a web page .

What if my child already has some health coverage?

A child who has comprehensive health insurance is not eligible for the Delaware Healthy Children Program. Comprehensive Health Insurance means a plan that provides coverage for hospitalization, doctor visits, x-rays and lab work. A child with more limited coverage may still be eligible for the Delaware Healthy Children Program.

*Exception: Children with coverage in a comprehensive health plan may be eligible for Delaware Medicaid if they meet income requirements.

What if I have insurance for my child, but it is too expensive?

A child who already has health insurance, even if it is very expensive, is not eligible for the Delaware Healthy Children Program. If a child is voluntarily dropped from health insurance due to the cost of coverage, they are not eligible for the Delaware Healthy Children Program for six months from the drop date. Only if there is good cause for the loss of health insurance (such as termination of coverage due to employer, expiration of COBRA coverage, death or disability of a parent) will the six month waiting period be waived.

What is a qualified non-citizen?

In general, children eligible for the Delaware Healthy Children Program must be U.S. citizens. However, the federal government classifies some non-citizen children as "qualified aliens." These children are eligible. Also remember some children born outside of the U.S. may be citizens.

Examples of non-citizen children who may be eligible:

- Lawful permanent residents who entered the U.S. before August 22, 1996
- Parolees of more than one year and conditional entrants
- Refugees, asylees, and those whose deportation has been withheld
- Cuban and Haitian entrants
- Amerasians
- Dependents of veterans and active-duty military personnel

Many other groups of non-citizen children may be eligible. Call the Delaware Healthy Children Program at 800-996-9969 to ask.

Are children of State employees eligible?

Children of permanent State of Delaware employees are not eligible for the Delaware Healthy Children Program. However, children of seasonal, casual or temporary state employees can get DHCP coverage if they meet the income guidelines. Children of permanent State of Delaware employees may be eligible to receive Delaware Medicaid in some cases.

Why aren't children of State employees eligible?

The Delaware Healthy Children Program uses federal funds from Title XXI of the Social Security Act – the State Children’s Health Insurance Program (SCHIP). By federal law, these funds cannot be used for dependents of state employees.

What about pre-existing conditions or medical eligibility?

The Delaware Healthy Children Program does not exclude children because of pre-existing health conditions.

Delaware does provide Medicaid coverage for disabled children who meet certain eligibility criteria. Children with developmental or neurological disabilities such as autism or mental retardation may be eligible for Medicaid coverage under a special Home and Community Based Services waiver program.

Delaware also provides Medicaid coverage through the Children’s Community Alternative Disability Program (CCADP) for children with severe mental or physical disabilities who would otherwise qualify to be cared for in an institutional setting.

How is the Delaware Healthy Children Program different from other Delaware Medicaid programs?

Medicaid eligibility depends on the child’s age along with the household income and household size. The Delaware Healthy Children Program checks all applications for Medicaid eligibility. If a child qualifies, by federal law he or she enrolls in Delaware Medicaid, not the DHCP paid premium program. No interview is needed. No visit to a State Service Center is required when a Delaware Medicaid annual redetermination review is due.

How often does the Delaware Healthy Children Program review eligibility? What is the process?

All children in the Delaware Healthy Children Program have at least 12 months of continuous coverage if monthly premiums are paid. Prior to the end of their eligibility coverage, families will receive an application in the mail and will be required to submit a copy of one month of income verification along with a completed application.

How much do I have to pay?

Premium payments are \$10, \$15 or \$25 per household per month, depending on your income.

There is an added bonus: for every 3 months you pay in advance, you’ll get the 4th month free! And, with the exception of non-emergency visits to hospital emergency rooms, there are no co-payments. Prescriptions are covered at 100%.

Who provides the insurance?

Delaware provides a choice of different managed care plans so that you can select the plan that is best suited to your child’s needs. As of July 1, 2007, Delaware contracts with three Managed Care plans – Delaware Physicians Care, Inc., Unison Health Plan, and Diamond State Partners.

Are parents covered too?

Sorry. The plan is currently limited to children under the age of 19. But a single monthly fee does cover every child in the household who is eligible for the plan.

When will my coverage start?

After you are approved for the program, you must choose a managed care plan and pay the first month’s premium. You will receive a notice telling you when your coverage begins.

Delaware Healthy Children Program - Related Links:

- [DHCP Overview](#)
- [Benefit Package](#)
- [Who Qualifies?](#)

- How to Apply

Insure Kids Now

The following FAQ's came from Insure Kids Now.

Why is health insurance for children and teens important?

Children who have health insurance generally have better health throughout their childhood and into their teens. They are less likely to get sick and more likely to:

- get preventative care to keep them well;
- get the treatment they need when they are sick or injured;
- receive needed shots that prevent disease;
- get treatment for recurring illnesses such as ear infections and asthma; and
- get dental care;

Compared to children with insurance, uninsured children are:

- over five times more likely to have an unmet need for medical care;
- over three times more likely not to get a needed prescription drug;
- much less likely to receive preventive services including immunizations, dental and vision care and medical care for conditions such as sore throats, ear infections and asthma; and
- 30% less likely to receive medical treatment if they are injured.

How can insurance help my children and teens stay healthy?

You'll be able to pick a doctor for your children so they can get the health care they need when they need it. With health insurance, your child will be able to get immunizations and well-child visits required to attend school and often required to play sports. If your child gets sick, you can get prescription medicines to help him or her get better fast.

How can health insurance help my child's and teen's ability to learn?

Children with health insurance are less likely to miss school because they are sick. Students who are feeling healthy have an easier time focusing on their school work.

Eligibility Information

Who is eligible for Medicaid or CHIP?

States have different income eligibility rules, but in most States, children under age 19 with family income up to \$47,700 per year (for a family of four) may qualify for either Medicaid or CHIP. In many States, family income can be even higher and children can still qualify.

I have teenagers. Are they eligible, too?

Yes, in every State, children from birth until their 19th birthday whose family income is up to \$47,700 per year (for a family of four) may be eligible. In many States, family income can be even higher and children can still qualify. To find State-specific information about Medicaid and CHIP programs, go to About Your State Programs.

I have a job. Can my children and teens still qualify?

Yes, most children who are eligible for Medicaid and CHIP but are not enrolled are in working families. Working parents may not have health coverage through their jobs or the health coverage they get does not cover their children. Many working families cannot afford health insurance on their own. To find out if your children may be

eligible, call 877 KIDS NOW (1-877-543-7669) or go to About Your State Programs to find your State's program.

Who can apply for health insurance for my child or teen?

Parents, grandparents, and legal guardians can apply for Medicaid and CHIP on behalf of a child. Call 1-877 KIDS NOW (877-543-7669) or go to Programs in Your State to find out the rules for your State. Your call will be free and confidential.

Is there a limit on the amount of time my child or teen can remain enrolled in Medicaid or CHIP?

Children and teens can stay covered as long as they qualify. Although there is no limit on the amount of time your children can remain in the program, you will need to renew their coverage periodically, typically once a year in most States. The program will contact you to let you know that it is time to renew your child's coverage.

What if my children and teens are covered by Medicaid or CHIP already?

Congratulations, they already have comprehensive health insurance. If you are having trouble seeing a doctor or getting a needed service, call the toll free number 1-877 KIDS NOW (1-877-543-7669). Remember to renew your child's coverage when it's time, usually one year after your child gets enrolled.

Covered Services

What services does Medicaid and CHIP cover?

Medicaid and CHIP pay for doctor visits, immunizations, dental care, prescription medicines, hospital care, and much more. Click on Programs in Your State to visit your State's web site and find out more.

Is the flu vaccine covered?

Yes. Flu vaccines are covered for people with Medicaid/CHIP. For more information about the flu and the flu shot, visit <http://www.cms.gov/immunizations/>

Costs for Families

Who pays for the health insurance coverage under Medicaid and CHIP?

Depending on their income, many families will get health coverage for their children and teens at no cost. Other families may be required to pay modest enrollment fees, premiums, and copayments. The rest of the coverage is paid for by the Federal government and your State.

Application Process and Additional Information

How can I get more information on my state's program?

To find state-specific information about Medicaid and CHIP go to Programs in Your State or call 1-877 KIDS NOW (1-877-543-7669) to be connected directly to your State's program. The call is free and confidential.

How do I apply?

The first step is to call 1-877 KIDS NOW (1-877-543-7669) to be connected directly to your State's program or go to www.insurekidsnow.gov and click on Programs in Your State. Depending on the State, families can apply in person, by mail, over the phone and even on-line. Community organizations in many States are standing ready to help.

I'm not applying for this program, but I'd like to get involved. How can I help?

To help other families learn more about available health insurance for their children, go to the Programs in Your State for more information. If your organization wants to help connect kids to coverage by stepping up to the challenge of enrolling five million uninsured kids in Medicaid or CHIP, visit Connecting Kids to Coverage Challenge to learn more.

Governor's Advisory Council for Exceptional Citizen's (GACEC) Project