

DO YOU KNOW A **CHILD** WHO NEEDS FREE OR LOW-COST **HEALTH CARE?**



QUEST and **Medicaid** cover children
and youth up to age 19 and include:

- ✎ **regular check-ups**
- ✎ **emergency care**
- ✎ **immunizations**
- ✎ **prescription medicines**
- ✎ **doctor visits**
- ✎ **eyeglasses**
- ✎ **counseling**
- ✎ **dental care**

Please tell your friends and neighbors!

Call
211

**free phone call
from all islands**

FREE

Health Insurance for Kids

(QUEST or Medicaid)

Can you answer **YES**
to this information
about your child?

- ✎ 0 to 19 Years Old
- ✎ Hawai'i Resident
- ✎ U.S. Citizen or Legal Immigrant
- ✎ Meets Family Income Limits

Why is health insurance important?

- ✎ Children with health insurance can get regular health care.
- ✎ Regular health care helps children be healthier and less likely to miss school and other activities.
- ✎ Regular health care helps avoid unnecessary emergency room visits.

QUEST and Medicaid for Kids
Free Health Insurance
Family Income Limits

Household Size	Gross Monthly Income
1	\$ 3,117
2	\$ 4,191
3	\$ 5,265
4	\$ 6,342
5	\$ 7,416
6	\$ 8,490
7	\$ 9,567
8	\$ 10,641
9	\$ 11,715
10	\$ 12,792
Each Additional Person	\$ 1,074

(Revised 27 February 2009)

Call for an application or more information!

211 *free call* from all islands

information
provided by

Hawai'i Covering Kids
Advocating Health Insurance for All Keiki and 'Ōpio



www.coveringkids.com



Hawai'i Covering Kids

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Information below compares the QUEST and Medicaid programs with the current HMSA Children's Plan.

QUEST and Medicaid for Children

- ✿ Household gross income limit is up to 300% FPL (\$6,342 monthly family of four). It is free.
- ✿ For more information and an application, please visit www.coveringkids.com or call 211.

HMSA Children's Plan

- ✿ There is no household income limit.
- ✿ Child is not eligible for QUEST or Medicaid.
- ✿ Premium is \$55 per month per child.
- ✿ For more information and an application, please call 948-5555 (O'ahu) or 1-800-620-4672 (Neighbor Islands).

Eligibility	QUEST and Medicaid	HMSA Children's Plan
Child Currently Insured	Some programs require a child be uninsured the month of application.	Child must be uninsured.
Age Groups	0 to 19 years old	31 days to 19 years old
Citizenship Requirement	Generally must be U. S. Citizen, Lawful Permanent Resident, or from Freely Associated States. Other eligibility groups are listed in "Rights and Responsibilities" section of application.	None
Residency Requirement	Live in Hawai'i with the intent to remain indefinitely.	Hawai'i resident at least 6 months.
Parent or Legal Guardian	No requirement	Parent or court-appointed guardian must complete, sign, and submit application.

Benefit	QUEST and Medicaid	HMSA Children's Plan
Physician Office Visits	No cost per visit; no maximum	Cost \$7 per visit; maximum 12 per year
Well-Child Care	No cost per visit	No cost
Routine Physical Examinations (school, employment, travel, etc.)	Covered	Not covered
Diagnostic, Laboratory, Pathology, and X-ray	No cost	No cost when provided during covered physician visit
Mental Health Services: Outpatient	No cost per visit; no maximum	Cost \$7 for each session; maximum 12 sessions per year
Surgery: Outpatient	No limit	Maximum 3 per year
Immunizations	Routine, mass, and new immunizations covered	Standard childhood immunizations covered
Prescription Drugs	Prescribed medication including over-the-counter prescribed drugs and supplies; no cost	Only generic antibiotics and oral contraceptives; cost \$5 per maximum 30-day supply
Contraceptives	Voluntary family planning including sterilization	Oral contraceptives only
Emergency Room Services	No cost per visit; no geographic limit	Cost \$25 per visit; Hawai'i only
Hospital: Inpatient	No cost per stay; no maximum	Cost \$100 per day; maximum 5 days per year for room and care
Surgery: Inpatient	No limit	Inpatient surgery covered if member hasn't had maximum 5 hospital days during the year
Mental Health Services: Inpatient	No cost per stay; no maximum	Cost \$100 per day; count towards 5 per year maximum hospital days
Maternity Services	No waiting period; comprehensive coverage	12-month waiting period; limited coverage
Vision Examinations	Every 12 months	Not covered
Eyeglasses	Every 24 months	Not covered
Dental Care	Diagnostic and preventive services; non-emergency and emergency treatment	Diagnostic and preventive services only; treatment not covered