# **REQUEST FOR INFORMATION**

(Complete one form per family)

Please answer the question below by checking the appropriate box. The following information is a request adopted by the General Assembly in 2010 requiring school districts to determine whether or not all children in a family have health insurance.

Does each child in your family have healthcare insurance?

YES		
□ NO		
MO HealthNet (Medicaid) is cons	idered healthcar	re insurance.
If NO is checked the school district will provide Healthcare Coverage form for the family.	ide the Does You	r Child Need
Completion of this form is not a condition of and Reduced Price Meals Family Application response to this Request for Information.	_	•
Submit this request with your Free and Redu Application or return to your school/school		l Meals Family
Printed name of parent/guardian:		
Mailing Address:		
City: Sta	te:	Zip Code:



## DOES YOUR CHILD NEED HEALTHCARE COVERAGE?

# MO HealthNet for Kids may be the answer

**MO HealthNet for Kids** provides healthcare coverage for children under age 19 whose family income falls within certain guidelines. (See back for income guidelines.)

### Who Is Eligible?

#### A child:

- who is under age 19;
- who applies for a social security number;
- who lives in Missouri and intends to remain;
- who is a United States citizen or an eligible qualified non-citizen (NOTE: receipt of MO HealthNet benefits does NOT subject qualified non-citizens to public charge consideration), and
- who is countable family income meets the income guidelines.

NOTE: The parent/caretaker must cooperate with Child Support Enforcement (CSE) in the pursuit of medical support.

#### TYPES OF COVERAGE AVAILABLE:

#### MO HealthNet for Kids Non-SCHIP

- 196% FPL for children under age 1
- 148% FPL for ages 1-18

### MO HealthNet for Kids (SCHIP) Non-Premium

- family gross income over 148% FPL up to 150% FPL;
- must be uninsured

## MO HealthNet for Kids (SCHIP) Premium

- family gross income over 150% FPL up to 300% FPL;
- they are uninsured for 6 months; effective: 7/1/14 uninsured for 3 months;
- children in families with gross income over 150% FPL without access to affordable health insurance (from \$74 to \$185 per month, based on family size and income) and the family must pay a monthly premium. Premium amounts change in July of each year. The premium is based on family size and income to insure that no family pays more than 5% of their income for coverage.

Apply on line at <a href="www.mydss.mo.gov">www.mydss.mo.gov</a> by choosing the "Apply for Health Benefits" option or request an application from 1-855-FSD-INFO.

(If applying online please email us at <a href="mailto:cole.mhnpolicy@dss.mo.gov">cole.mhnpolicy@dss.mo.gov</a> subject line "School" to let us know to watch for your application.)

# **INCOME GUIDELINES EFFECTIVE APRIL 1, 2015**

Children under age 1 at 196% of the federal poverty level:		
Family Size	Income Limit*	
1	\$1923	
2	\$2602	
3	\$3282	
4	\$3961	
5	\$4641	

Children ages 1-18 at 148% of the federal poverty level:		
Family	Income Limit*	
Size		
1	\$1452	
2	\$1965	
3	\$2478	
4	\$2991	
5	\$3504	

150% of the federal poverty level:	
Family Size	Income Limit*
1	\$1472
2	\$1992
3	\$2512
4	\$3032
5	\$3552

300% of the federal poverty level:	
Family Size	Income Limit*
1	\$2943
2	\$3983
3	\$5023
4	\$6063
5	\$7103

<sup>\*</sup>If appropriate the Federal Poverty level changes in April.