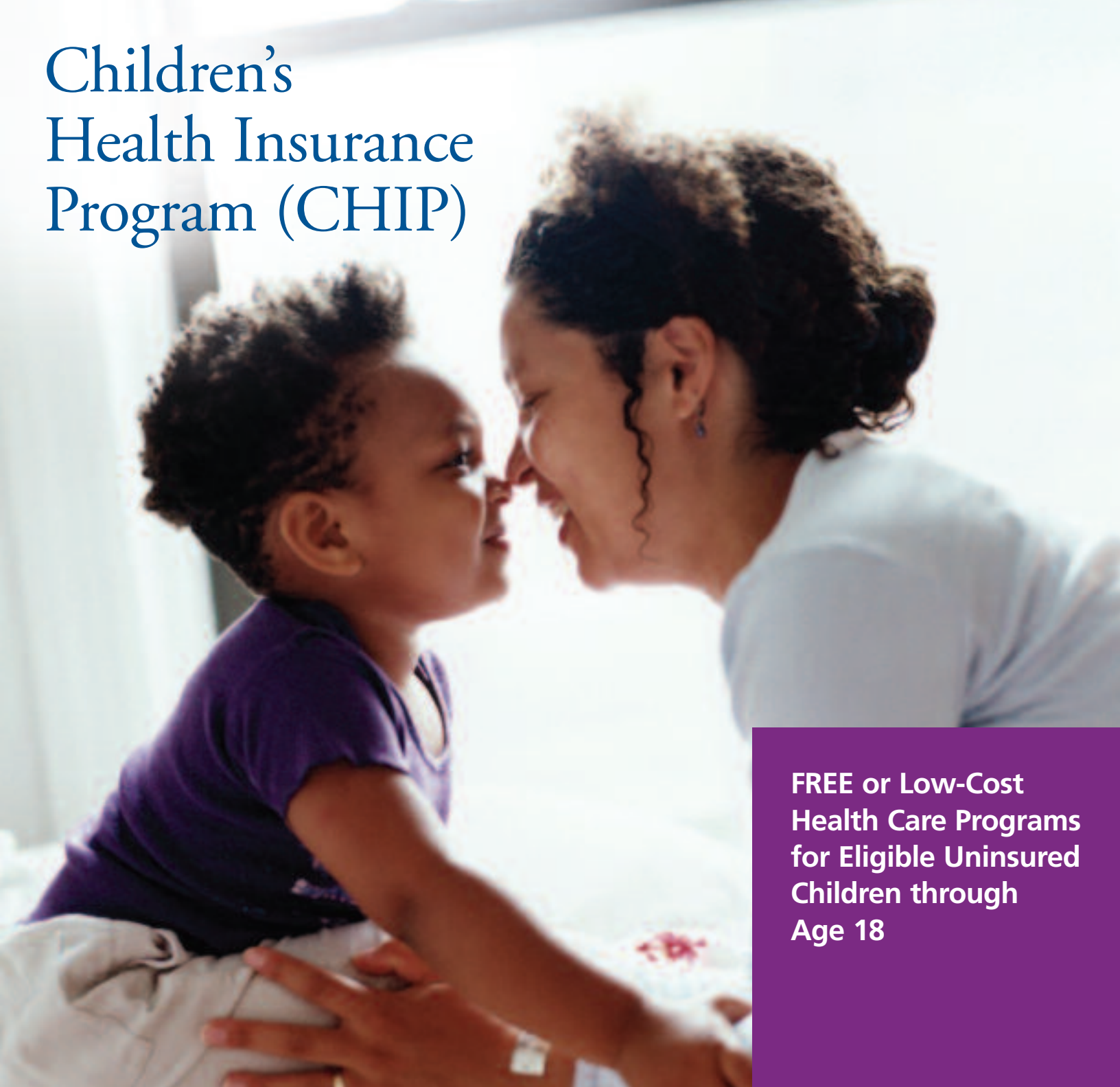


# Children's Health Insurance Program (CHIP)



**FREE or Low-Cost  
Health Care Programs  
for Eligible Uninsured  
Children through  
Age 18**



Pennsylvania's Children's  
Health Insurance Program  
**We Cover All Kids.**

Commonwealth of Pennsylvania  
Edward G. Rendell, Governor  
[www.chipcoverspakids.com](http://www.chipcoverspakids.com)

Thông tin quan trọng về quyền hưởng Trợ cấp Y Tế.  
Hãy nhờ một người nào đó đọc tin tức này cho bạn.

ព័ត៌មានសំខាន់ៗអំពីជម្រើសប្រយោជន៍នៃការថែទាំសុខភាព។  
សូមរកអ្នកណាម្នាក់អោយជួយអានអោយលោកអ្នកស្តាប់។

ВАЖНЫЕ СВЕДЕНИЯ О ПРЕДОСТАВЛЕНИИ ЛЬГОТ ПО  
МЕДИЦИНСКОМУ ОБСЛУЖИВАНИЮ.  
ПОПРОСИТЕ КОГО-НИБУДЬ ПРОЧЕСТЬ ЭТО ВАМ.

**1-800-822-CHIP**  
<http://chip.aetna.com>

We want you to know<sup>®</sup>



# face it: kids can be clumsy.

And, if your kids don't have health insurance, even the most minor injury can be costly. The CHIP plan, brought to you by Aetna\*, is here to help, and qualifying may be easier than you think.

## Get Health Insurance for Your Kids Today!

**Call us today and enroll in our CHIP plan, so that next time your child falls off a bike or is up all night with an ear infection, all you'll need to focus on is helping your child recover, not how you're going to afford the proper care.**

The Children's Health Insurance Program (CHIP) of Pennsylvania is a state- and federally funded health insurance program for children through age 18. Benefits are provided by Aetna Health Inc., under contract with the Commonwealth of Pennsylvania. Once enrolled, CHIP members have Aetna HMO coverage and have access to our HMO programs and benefits.

### The CHIP Program Includes

- Emergency coverage
- Immunizations and well-baby care
- Maternity care
- Vision and hearing exams and hearing aids
- Eyeglasses and contact lenses
- Prescription coverage with no copayment
- Preventive and restorative dental care
- Extraction of bony impacted wisdom teeth
- Hospital coverage up to 90 days per year
- Mental health/substance abuse benefits
- Home health care
- Rehabilitation therapy
- Durable medical equipment
- Orthotics

### How You'll Access Care

When you apply, you will select a primary care physician (PCP) — typically a pediatrician, internist or family doctor — and dentist from our directory of independent health care professionals. With a wide selection of participating doctors and health care professionals to choose from, the Aetna network may already include your family doctor!

Except in an emergency, all your child's care must be obtained from the PCP and dentist you have chosen or the specialists and hospitals to which your PCP or dentist refers your child.

- The PCP will coordinate all of your child's medical care.
- The dentist will coordinate all of your child's dental care.
- You may request to change your child's PCP or dentist at any time by calling 1-800-822-2447.

You can fill outpatient prescriptions for your child for covered prescription drugs from any of over 52,000<sup>1</sup> Aetna network pharmacies nationwide.

Call **1-800-822-CHIP**  
or log on to  
<http://chip.aetna.com>  
for more information



<sup>1</sup>Aetna Region Network Profile, March 2004

\*Aetna is the brand name used for products and services provided by one or more of the Aetna group of subsidiary companies. This plan is provided by Aetna Health Inc.



## Emergency Care

Emergency care is covered 24 hours a day, 7 days a week, anywhere in the world. Whether you are in or out of an Aetna service area, call 911 or the local emergency hotline or go to the nearest emergency facility. If a delay would not be harmful to your child's health, call your child's PCP.

## Vision Care Benefits and Discounts

Our CHIP vision care benefit fully covers eye exams from participating (in the Aetna network) optometrists and ophthalmologists. We also provide coverage for prescription contact lenses or glasses as follows:

**Frames:** One pair up to \$55/year

**Lenses:** Two pairs up to \$65 per pair/year

### Discounts on Eyeglasses, Contact Lenses and More!

In addition to the above vision care benefits covered by this plan, your child can receive discounts on eyeglasses, contact lenses and nonprescription items such as sunglasses and contact lens solutions through the Vision One program. Just show your child's Aetna member ID card at a participating Vision One location and you'll receive your discount on the spot — with no claim forms to file.

Call 1-800-793-8616 for information and the location nearest you.

## To Qualify For Enrollment

Qualifying for CHIP depends on more than just your income, so don't assume your child won't be eligible without first getting all the information you need. For starters, your child must:

- Be under the age of 19
- Be a U.S. citizen or lawfully admitted alien with permanent status
- Be a resident of Pennsylvania for 30 days, except for a newborn (does not apply for free program)
- Be currently uninsured and not eligible for or covered by Medical Assistance
- Meet the income eligibility requirements

To see if you meet the family size and income guidelines, please call 1-800-822-CHIP (1-800-822-2447) or go to <http://chip.aetna.com>.

## Annual Renewal of Coverage

Once a year, on the anniversary of your child's enrollment, we must review your child's eligibility for continued health care coverage. Each year, 90 days before your child's enrollment anniversary, we will send you a letter requesting verification of income and other family information. You will then have to complete and return the renewal form with all required information within 30 days. **Failure to comply will result in termination of your child's health care coverage.** If below the age and minimum income requirements, your child may be eligible for Medical Assistance through the Pennsylvania Department of Public Welfare.

## What's Not Covered

See your Aetna CHIP of PA Certificate of Coverage (contract) for a complete list of what's not covered. Some services and supplies generally not covered include: services not referred by your child's PCP (except in an emergency); plastic or cosmetic surgery; treatment of mental retardation; provision of blood; custodial care; orthodontics; special appliances such as TENS (transcutaneous electrical nerve stimulator) units; experimental, investigational or ineffective procedures or treatments; immunizations for travel; reduction of nails, calluses and corns; nonsurgical treatments of TMJ (temporomandibular joint) syndrome; orthoptic therapy (vision exercises); weight-reduction programs; surgery for treatment of obesity (e.g., gastric stapling); long-term (over two months) rehabilitation therapy; all medical and hospital services not specifically covered in the Aetna CHIP of PA contract are not covered through the CHIP of PA program, brought to you by Aetna.



# How To Apply

Complete an application, and send it along with one-month proof of all income (see "Acceptable Proof of Income") to:

**Aetna Health Inc. ■ Children's Health Insurance Program**  
**P.O. Box 937, U32N ■ Blue Bell, PA 19422-0019**

After we receive all of your information, we will review your child's eligibility and notify you. If your child is eligible for CHIP, you will receive your child's ID card and member handbook and can begin using the health care benefits. If your child is not eligible for CHIP, we will explain why your child is not eligible. If your child appears eligible for Medical Assistance, we will send your child's application to your local county assistance office for a determination of eligibility.

You may request an impartial review of the determination made by Aetna. You may request a copy of the procedures on which the eligibility decision was based. The review will be completed by the Pennsylvania Insurance Department. To request a review, you must send a letter and a copy of the notice of ineligibility and explain the reason(s) that you are requesting a review within 30 days. A request for a review should be sent to:

**Pennsylvania Insurance Department ■ CHIP Eligibility Review Unit**  
**333 Market Street, Lobby Level ■ Harrisburg, PA 17120**

If a review is requested, an interview will be conducted with you and an Aetna representative to consider the information that was used to determine why your child is not eligible for CHIP. You may submit information to the review officer that explains why you think that the decision that was made was not correct. You may choose to have someone act as your representative. Whenever possible, the review will be conducted by telephone, but you may request a face-to-face interview.

If you request a review, you will receive more detailed information from the Pennsylvania Insurance Department, including the time and date that the interview will be conducted.

**This managed care plan may not cover all of your health care expenses. Read your contract carefully to determine which health care services are covered. To contact the plan if you are a member, call the number on your ID card; all others, call 1-800-822-2447.**

This material is for informational purposes only and is neither an offer of coverage nor medical advice. It contains only a partial, general description of plan benefits or programs and does not constitute a contract. Consult the plan documents (Schedule of Benefits, Certificate of Coverage) to determine governing contractual provisions, including procedures, exclusions and limitations relating to the plan.

Aetna arranges for the provision of health care services. However, Aetna itself is not a provider of health care services and, therefore, cannot guarantee any results or outcomes. The availability of a plan or program may vary by geographic service area and by plan design. These plans contain exclusions, and some benefits are subject to limitations or visit maximums.

With the exception of Aetna Rx Home Delivery® service, all participating doctors, hospitals and other health care professionals are independent contractors and are neither agents nor employees of Aetna. Aetna Rx Home Delivery, LLC, is a subsidiary of Aetna Inc. The availability of any particular provider or health care professional cannot be guaranteed, and provider network composition is subject to change. Notice of the change shall be provided in accordance with applicable state law.

Certain primary care providers are affiliated with integrated delivery systems or other provider groups (such as independent practice associations and physician-hospital organizations), and members who select these providers will generally be referred to specialists and hospitals within those systems or groups. However, if a system or group does not include a provider qualified to meet member's medical needs, member may request to have services provided by non-system or non-group providers. Member's request will be reviewed and will require prior authorization from the system or group and/or Aetna to be a covered benefit.

Vision One is a rate-access program and may be in addition to any plan benefits. Program providers are solely responsible for the products and services provided thereunder. Aetna does not endorse any vendor, product or service associated with these programs. Discounts offered hereunder are not insurance. Vision One is a registered trademark of Cole Vision Corporation.

While this material is believed to be accurate as of the print date, it is subject to change.

## ACCEPTABLE PROOF OF INCOME

### Proof of income is:

- A copy of one pay stub from the last 60 days OR a signed note from your employer with your gross income and how often you get paid
- Unemployment check stubs and award letter
- Social Security, pension or Workers' Compensation check, award letter or bank statement
- If you are self-employed, a copy of last year's tax return OR a list of your expenses and income
- Copies of support orders or checks if you receive regular child support



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