



Healthy Families

Healthy Families is a state program that provides low-cost health insurance for many low-income children. With Healthy Families, a family pays a small amount each month.

Who is eligible?

- Children age 0 thru age 18, who are not eligible for “no cost” Medi-Cal.
- Children born to women with Access for Infants and Mothers (AIM).
- Once it is decided a child is eligible, the child stays eligible for a continuous 12 months, regardless of changes in the family’s income.
- Children cannot have had any insurance coverage from an employer excluding COBRA benefits during the three months before she or he applies to the Healthy Families Program, with some exceptions.
- 18 year-olds and emancipated minors may apply on their own behalf.
- Teens covered by Healthy Families who get pregnant should consider applying for the Medi-Cal Minor Consent Program as well (they can have both concurrently) because their babies will be considered “deemed eligible” for Medi-Cal.

What does the program cost?

- There are two costs associated with this program. One is a monthly premium, or family contribution, per child of from \$4-\$24, depending on the family’s income and the health plan they choose. The maximum premium is \$72, regardless of the number of children in the family.
- The other cost is a co-payment charge for outpatient services, like doctor’s office visits, except for preventive services, like immunizations and dental check-ups. There is no co-payment for preventive services. For families with income less than 150% FPL the co-payment is \$5. For families with income between 151% and 250% FPL the co-payments are \$10 for office visits and \$15 for emergency room visits that do not result in hospitalization.
- There is a limit of \$250 on the total amount of co-payments the family has to pay per year.
- If a family pays three months of premiums in advance, the child will receive a fourth month free.
NOTE: If the family does not pay monthly premiums for two consecutive months, the child will be disenrolled and not allowed to re-enroll until payments are up to date.

What is the income limit?

- Children age one to age six are eligible if family income (after certain deductions) is between 134% and 250% poverty. (Children in this age group with income at or below 133% of poverty are eligible for Medi-Cal at no cost).
- Children ages six through age 18 are eligible if income is between 101% and 250% of poverty. (Children in this age group with income at or below 100% of poverty are eligible for Medi-Cal at no cost).
- Infants from birth up to age one with income between 201% and 250%. (Infants with family income at or below 200% of poverty are eligible for Medi-Cal at no cost).
- Children born to women with AIM are eligible without regard to the family’s income until age one, and with family income up to 300% FPL between ages one and two, unless they get enrolled in Medi-Cal or have employer-sponsored coverage. (For more information see MCHA’s AIM Fact Sheet).
 - FAMILIES ARE ALLOWED THE SAME DEDUCTIONS AS IN THE MEDI-CAL PROGRAM. DEDUCTIONS ALLOWED FROM THE TOTAL GROSS INCOME INCLUDE: \$90 A MONTH FOR EACH WORKING PARENT, AND ALLOWABLE BUSINESS EXPENSES IF SELF EMPLOYED; UP TO \$175 A MONTH FOR CHILD CARE FOR EACH CHILD OVER TWO YEARS OLD; UP TO \$200 A MONTH FOR CHILD CARE FOR EACH CHILD UNDER TWO YEARS OLD; AND \$175 FOR A DISABLED DEPENDENT OF ANY AGE IS ALLOWED. ALSO, \$50 FOR COURT-ORDERED CHILD SUPPORT AND ALIMONY RECEIVED CAN BE DEDUCTED, AND THE

(Use until 4/1/12)

FAMILY SIZE	Gross Monthly Countable Income Limits for Children Under Age 1		Gross Monthly Countable Income Limits for Children Age 1 thru Age 5		Gross Monthly Countable Income Limits for Children Age 6 thru Age 18	
	201%-250% FPL		134%-250% FPL		101%-250% FPL	
	AtLeast	Not Over	AtLeast	Not Over	AtLeast	Not Over
1	\$ 1,816	\$ 2,269	\$ 1,208	\$ 2,269	\$ 909	\$ 2,269
2	\$ 2,453	\$ 3,065	\$ 1,632	\$ 3,065	\$ 1,227	\$ 3,065
3	\$ 3,090	\$ 3,861	\$ 2,055	\$ 3,861	\$ 1,546	\$ 3,861
4	\$ 3,726	\$ 4,657	\$ 2,479	\$ 4,657	\$ 1,864	\$ 4,657
5	\$ 4,363	\$ 5,453	\$ 2,902	\$ 5,453	\$ 2,182	\$ 5,453
6	\$ 4,500	\$ 6,248	\$ 3,325	\$ 6,248	\$ 2,501	\$ 6,248
Each addl.	\$ 638	\$ 796	\$ 425	\$ 796	\$ 320	\$ 796

What about resource limits?

- Resources are the things the family owns, like cars, houses jewelry, checking and savings accounts.
- There are no resource limits for this program.

Does immigration status matter?

- Yes. There are no benefits, not even emergency services, for undocumented children under Healthy Families. But immigrant children with Legal Permanent Residency are eligible for this program now, even if they entered the country after August 22, 1996.

What benefits are covered?

- The program provides health, dental, and vision services that are similar to those given to children of government employees.
- The amount and kind of services provided under the Healthy Families program are different from those under Medi-Cal, especially for mental health, substance abuse treatment, and some vision and dental services. Children may have both Medi-Cal with a "Share Of Cost" (SOC) and Healthy Families at the same time. Medi-Cal with a SOC could cover services not provided by Healthy Families or could provide additional services if a child uses the maximum benefits allowed under Healthy Families. The Medi-Cal SOC provides coverage for one month, but the family only pays if the child uses Medi-Cal services in a given month. Premiums paid to Healthy Families count towards the Medi-Cal SOC.

How do children get services?

- Services are provided through private health plans. Parents choose a health plan when they apply.

How to apply or get more information on the program?

- Call the Healthy Families Program: 800-880-5305 (free).

What if the family has other health insurance?

- A child is eligible for Healthy Families even if she/he receives CCS services and Medi-Cal with a SOC, but not insurance through a job, unless an exception applies.

What should be done if there is a problem getting services in the Healthy Families program?

- If the family is unhappy with something a health, dental, or vision insurance plan did (or did not do), they must resolve any problems with the specific health plan according to its policies and procedures. Children will not be dropped from the plan or suffer a penalty if families do this. The family can also complain to the Managed Risk Medical Insurance Board, which runs the Healthy Families program.
- Families may also call the **Health Consumer Center of Los Angeles** at **1-800-896-3203**.