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## **IMPORTANT INFORMATION ABOUT HOOSIER HEALTHWISE**

### **I. The Benefits of Hoosier Healthwise and How your Eligibility will be Determined**

There are 4 Benefit Packages as explained below. We will determine your eligibility for the most benefits possible based on your situation and family income. If you are applying for Hoosier Healthwise for your children, we will ask you to agree to pay the premiums and co-payment amounts that are required for Package C. If you do not agree to do this, we will still check eligibility for the premium-free plans.

◆ **Package A – Standard Plan**

Provides comprehensive health care coverage to eligible adults and children. There are no premiums.

◆ **Package B – Pregnancy Coverage**

Provides coverage for pre-natal care, treatment of conditions that may complicate the pregnancy, delivery, and 60 days of after-pregnancy care. There are no premiums.

◆ **Package C – Children’s Health Plan**

Provides comprehensive health care coverage for children under age 19. There is a premium based on family income and the number of children covered. If one child is covered, the premium will be at least \$11.00, but not more than \$16.50 per month. If two or more children are covered, the premium will be at least \$16.50 but not more than \$24.75 per month. Premiums can be paid quarterly at a 5% savings or annually at a 10% savings. When children are approved for the Children’s Health Plan, we send a notice that tells the amount of the premium. When you receive your first bill, you decide how often you want to pay the premium.

◆ **Package E – Emergency Services Only**

Provides coverage for treatment of serious medical emergencies. This plan is for certain immigrants, such as those who are in the United States without lawful papers from the Immigration and Naturalization Service.

### **11. Your Rights and Responsibilities as a Hoosier Healthwise Applicant and Member**

1. Eligibility for benefits is considered without any regard to race, color, creed, sex, age, disability, national origin, or political belief. We ask about your racial-ethnic heritage to comply with the Federal Civil Rights Law, however you are not required to provide this information.
2. Certain information given on your application, such as your income, must be verified. If you cannot get the necessary papers, you will need to sign a release form so that we can get them for you.
3. You must provide accurate information. A person who gives false information or misrepresents the truth is committing a crime and can be prosecuted under federal law or state law, or both. The value of

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benefits received by a person who was not entitled to receive them must be repaid to the Hoosier Healthwise program.

4. Information you give is kept confidential under state and federal law.
5. If you move, please tell us your new address so that important mail about your application and membership will reach you without delay. Also, tell us if you become covered under other health insurance. Your interviewer will tell you more about reporting changes to the information you give on your application.
6. A Social Security Number must be given for each applicant. An applicant who does not have a number must apply for one. Exception: This requirement does not apply to children who qualify for health coverage under Benefit Package C.

The number(s) you provide will be used to check information kept by the Social Security Administration, the Internal Revenue Service, Workforce Development, and other state and federal agencies. This is required by Section 1137 of the Social Security Act. We ask for the Social Security Numbers of family members, however, it is not required that you provide them.

7. We will send you a notice telling you the decision on your application. You may request a fair hearing if you disagree with any decision about your eligibility, or if your application is not processed within 45 days.
8. The immigration status of non-citizens who are applying for health coverage is subject to verification by the Immigration and Naturalization Service (INS). However, the Hoosier Healthwise Program does not report undocumented immigrants to the INS.
9. PLEASE CAREFULLY READ THE FOLLOWING ABOUT ASSIGNMENT OF MEDICAL RIGHTS AND ESTABLISHMENT OF PATERNITY. *Ask your interviewer if you have any questions.*

An important service that is available to members under Package A and B is that you will be able to have paternity established (if applicable) for eligible children at no cost to you. This service is not available for children who are found eligible for Package C. We will ask for information about the non-custodial parent and then forward it to the Child Support Office of your County Prosecutor. They will contact you about the steps that will take place in order to have paternity established. If you believe that cooperating in having paternity established will cause physical or emotional harm to the children, you may ask to be excused from this requirement.

If you receive a medical insurance payment or personal injury settlement, you must repay the Hoosier Healthwise program for any expenses it paid.

***Your children's eligibility for Hoosier Healthwise will not be affected if you do not cooperate in establishing paternity or do not sign the medical assignment on the application.***

10. FOR MEMBERS ENTITLED UNDER PACKAGE C - THE CHILDREN'S HEALTH PLAN, there is cap on the amount of cost-sharing that you will have to pay. This amount is 5% of your annual income before taxes. It is your responsibility to keep track of the amount of premiums and co-payments you pay. If you reach the cap, you will need to contact the Office of Family and Children and provide your receipts so that you will no longer have to make payments.