



**Children's Health Insurance Program
Wyoming Department of Health**

**Eligibility
Policy and Procedure Manual**

Revised

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Wyoming
Department
of Health

Contents

General Information	4
Introduction	4
Confidentiality.....	4
Civil Rights.....	6
Official Documents Available for Review.....	6
Applicant Concerns or Complaints.....	7
Overview	7
Administrative Review	8
Administrative Hearings.....	9
Benefits and Co-Payments.....	10
Medical.....	10
Dental.....	10
Medically Necessary Orthodontic Services.....	11
Procedures Not Covered.....	11
Cost Sharing Plans.....	12
Out of Pocket Maximums	12
Insurance Cards.....	12
Non-Financial Criteria	13
Eligibility Criteria Overview.....	13
Age	13
Citizenship.....	13
Native Americans/Alaska Natives	15
Social Security Numbers	15

State Residency	15
Other Health Insurance Coverage.....	16
Institution for Mental Disease (IMD) or Public Institution	17
Verification Requirements	18
Who Can Apply for a Child?	18
Non-Custodial Parent Calling for Eligibility Information.....	19
Household Composition for Kid Care CHIP	19
Financial Criteria	20
Income Overview.....	20
Income Guidelines	20
Eligibility Miscellaneous.....	21
Kid Care CHIP Start Date	21
Timely Processing of Applications and Renewals	21
Kid Care CHIP Renewals	21
12 Months Continuous Coverage	22

General Information

Introduction

The Balanced Budget Act of 1997 (Public Law 105-33) established the Children's Health Insurance Program (CHIP) under Title XXI of the Social Security Act. The purpose of CHIP is to enable states to initiate and expand child health assistance to uninsured, low-income children.

Wyoming's Children's Health Insurance Program, Kid Care CHIP, is a low-cost plan that provides health insurance to children up to the month of their 19th birthday and meet the eligibility criteria. Most families financially participate in the program through co-payments for non-preventive services.

The Enrollee Handbook describes who may be covered under Kid Care CHIP. It explains the rights and responsibilities of a person requesting or receiving Kid Care CHIP and outlines available benefits.

Because each state must administer CHIP within broad federal guidelines, eligibility criteria may vary considerably among states. Thus, a child eligible for insurance under Kid Care CHIP may not be eligible for coverage in another state. Moreover, services provided in Wyoming may differ in amount, duration, or scope from services provided in other states.

Confidentiality

The Wyoming Department of Health (WDH) may share applicant information for purposes directly connected with the administration of CHIP with other state or federal programs, the program Benefit and Claims Administration contractor and the Wyoming Eligibility System (WES) contractor.

Information can be released in the following instances:

1. Authorization has been granted; or
2. An applicant or enrollee submits a written request to release.

Verbal Release:

An applicant or enrollee can provide a verbal release of information by identifying him or herself to the Customer Service Center. Customer Service Center personnel will request identifying information unique to the applicant or enrollee, such as date of birth or social security number.

Written Release:

Information may be released if the Primary Individual (PI) or other person authorized by the PI provides a written authorization to release information that includes:

1. The date the authorization expires;
2. The name of the person or agency to whom the information will be released;

3. Information to be released:

- a.** Designate records or specific information (e.g., contents of full application, notices, correspondence, etc.);
- b.** Information dated within a certain time frame; or
- c.** A general release

4. A dated signature of the authorizing individual.

WDH has a legal and ethical duty to safeguard PHI, and the WDH acts in accordance with:

- Internal policy documents AS-001, 003, 004, 005, 006, 007, 008 and S-001b, 009 and S-006a, 010, 012, 020, 021, PSC-4001, PSC-4002, PSC-4003, PSC-4004, PSC-4005, PSC-4006, PSC-4007, PSC-4008, S-001, S-003b, S-003c, S-003, S-005b, S-005d, S-005, S-007, S-010, S-011, S-012, S-015, S-017, S-018, S-019, S-020, S-021 and S-024.

Issues addressed by WDH policy, include but are not limited to:

- Assistance and consultation
- Required uses and disclosures
- Prohibited uses and disclosures
- Uses and disclosures for treatment, payment, or health care operations
- Uses and disclosures pursuant to a valid authorization
- Notice of privacy practices
- Restrictions and exceptions
- Access to health information
- Amendments
- Accounting of disclosures
- Authorized disclosures
- Disclosures about victims of child or adult abuse or neglect
- Disclosures for investigative purposes
- Disclosures for public health activities
- Disclosures for health oversight activities
- Disclosures for legal proceedings
- Disclosures to avert a serious threat
- Rights of custodial versus non-custodial parents

WDH staff will consult with the WDH Compliance Officer regarding uses and disclosure of PHI.

Information that does not belong to WDH or that was obtained under a promise to keep it confidential cannot be released. In the event a breach of confidentiality occurs, despite security and confidentiality protections, WDH staff shall immediately report a suspected or known privacy violation or security incident to the Office of Privacy, Security and Contracts.

Civil Rights

WDH staff will not discriminate against any applicant or enrollee in any aspect of the program's administration, including based on a person's race, color, national origin, disability, age, sex or religion.

Kid Care CHIP applicants and enrollees have the right to:

- Equal access to services without regard to race, color, national origin, disability, age, sex or religion.
- A bilingual interpreter, when necessary.
- Auxiliary aids to accommodate physical disabilities.

If you believe you have been discriminated against you may file a complaint with the Office of Civil Rights.

1. Go online to:
<https://www.hhs.gov/civil-rights/filing-a-complaint/index.html>
2. Email a complaint to:
OCRCComplaint@hhs.gov
3. Mail a complaint to:
Centralized Case Management Operations
U.S. Department of Health and Human Services
200 Independence Ave, S.W.
Rm 509F HHH Bldg.
Washington, D.C. 20201

Official Documents Available for Review

The following documents are available for review:

1. Kid Care CHIP State Plan approved by the Centers for Medicare and Medicaid Services (CMS).
2. Kid Care CHIP Rule and Regulations.

These documents are available for review on the Kid Care CHIP website at:

<https://health.wyo.gov/healthcarefin/chip/>

Applicant Concerns or Complaints

Overview

Kid Care CHIP applicants and enrollees may call the Customer Service Center (1-855-294-2127) with questions, concerns or complaints concerning eligibility and/or enrollment.

If more information is needed, the call may be referred to Kid Care CHIP.

Written complaints may be mailed to the Customer Service Center:

Wyoming Department of Health
Customer Service Center
2232 Dell Range Blvd., Suite 300
Cheyenne, WY 82009

If a written complaint cannot be resolved by the Customer Service Center, such complaints will be diverted to the Kid Care CHIP.

If a Kid Care CHIP enrollee does not agree with a decision made by Blue Cross Blue Shield of Wyoming regarding health, pharmacy or visions services, they may contact the Customer Services Department of Blue Cross Blue Shield of Wyoming at 1-307-634-1393 or outside of Cheyenne at 1-800-209-9720 to ask questions, ask for a review of a decision or make a verbal complaint. All inquiries will be acknowledged within 10 business days. They may also file a written complaint to:

Blue Cross Blue Shield of Wyoming
4000 House Ave
Cheyenne, WY 82001

All written complaints will be acknowledged within 10 business days and a decision or written response should be received within 45 days.

If a Kid Care CHIP enrollee does not agree with a decision made by Delta Dental of Wyoming regarding dental services, they may contact the Customer Services Department of Delta Dental at 1-307-632-3313 or outside of Cheyenne at 1-800-735-3379 to ask questions, ask for a review of a decision or make a verbal complaint. All inquiries will be acknowledged within 10 business days. They may also file a written complaint to:

Delta Dental of Wyoming
PO Box 29
Cheyenne, WY 82003

All written complaints will be acknowledged within 10 business days and a decision or written response should be received within 45 days.

Within 45 days of receiving a letter about Blue Cross Blue Shield of Wyoming or Delta Dental of Wyoming's decision and if the Kid Care CHIP applicant or enrollee is not satisfied with the response, they may appeal the decision by writing the complaint and mailing it to:

Kid Care CHIP
Fair Hearings
2232 Dell Range Blvd., Suite 300
Cheyenne, WY 82009

Kid Care CHIP enrollees may also have rights under Wyoming insurance law. For more information about these rights, they may call or write:

Wyoming Department of Insurance
Consumer Affairs Section
106 E 6th Avenue
Cheyenne, WY 82002
1-800-438-5768

Or may contact them online at:

<https://sites.google.com/a/wyo.gov/doi/consumers/consumer-request-for-assistance/file-a-complaint>

Information about the insurance carrier's complaint resolution policy is available in the Kid Care CHIP Enrollee Handbook.

Any applicant or enrollee who is not satisfied with the resolution of their complaint may pursue the matter further through an administrative review and/or the fair hearing process.

Administrative Review

An administrative review is a meeting between the Kid Care CHIP and the applicant or enrollee for the purpose of resolving a dispute regarding the WDH's action. The applicant must request an administrative review within 30 days of the date on the notice of denial or closure. An administrative review will identify the issues related to an adverse action and, if possible, resolve the issues to the applicant's satisfaction.

Kid Care CHIP will schedule and conduct an administrative review within 7 days of receiving a request for a Fair Hearing. The applicant may represent himself/herself at the administrative review or designate a representative. The applicant or the designated representative may waive the administrative review.

A representative of Kid Care CHIP will research the facts of the case and decide if all policies and procedures were followed correctly. If all policies and procedures were correctly followed, during the administrative review, a representative of Kid Care CHIP will explain the policies and procedures relevant to the case and, if possible, resolve the issue.

When Kid Care CHIP policies and procedures have not been followed the administrative review resolution will be favorable to the applicant.

Kid Care CHIP will provide notification, within 10 days, to the applicant or designated representative of the results of an administrative review.

If the applicant is unsatisfied with the administrative review's outcome, Kid Care CHIP will schedule an administrative hearing.

Administrative Hearings

Kid Care CHIP follows Chapter 4: Medicaid Administrative Hearings found on the Wyoming Secretary of State's website at <https://rules.wyo.gov/>.

- **Applicants or clients have the right to an administrative hearing**
Applicants or clients may request an administrative hearing when an adverse action is taken to deny, close, suspend or reduce benefits. The request for a hearing can be submitted via email, mailed to the Department via certified mail, return receipt requested or personally delivered to the Department.
- **Applicants or clients must request a hearing within 20 days**
Applicants or clients must provide a verbal or written request for a hearing within 20 days of the date printed on the notice of adverse action.
- **Applicants or clients may be represented**
Applicants or clients may be represented by an attorney, relative, friend or other spokesperson. If the client chooses to have a representative, the Department must be notified.
- **Formal conference may be conducted**
Formal Conferences must be conducted within three days from receipt of a request for an Administrative Hearing, unless waived by the applicant, client or the client's representative.
- **Administrative hearings may be denied**
An Administrative Hearing may be denied for the following reasons:
 - Adverse action is due to a Federal or State law requiring an automatic change that affects some or all clients.
 - A determination was made that an adverse action was not taken by the WDH, Long Term Care Unit or the Customer Service Center.
 - The request for the hearing was not received within the required timeframe.
 - The adverse action was taken by the Social Security Administration.
 - The applicant, client or representative will be notified of the approval or denial of their request for hearing.

- **Client benefits may continue pending an administrative hearing**
 - The WDH may continue CHIP benefits when the client requests a hearing before the effective date of the adverse action, unless the request for hearing is denied.
- Administrative hearings must be referred to the Office of Administrative Hearings (OAH) by WDH within 20 (twenty) days of request.
- Administrative hearings must be held within 40 days of the request.

Benefits and Co-Payments

Medical Benefits

Kid Care CHIP adheres to the Code of Federal Regulations (42 CFR §457, Subpart D) directing the guidelines for the CHIP benefits. Kid Care CHIP health benefits model is Secretary Approved, and appropriate for the targeted population of low-income children. The following benefits are provided through Kid Care CHIP:

- | | |
|---|---|
| <ul style="list-style-type: none"> • Inpatient hospital services • Outpatient hospital services • Physician benefits • Surgical services • Clinic services, including health center services • Prescription drugs and diabetic supplies • Laboratory and radiological services • Prenatal care and family planning services • Inpatient mental health services • Outpatient mental health services • Dental services | <ul style="list-style-type: none"> • Inpatient and outpatient substance abuse and chemical dependency treatment services • Vision exams • Eyeglasses or contacts Audiological benefits, not including hearing aids. • Rehabilitation • Spinal Manipulation • Physical Therapy • Ground and Air transportation in the event of an emergency • Durable Medical Equipment • Hospice Care (concurrent) |
|---|---|

Refer to the Blue Cross Blue Shield Handbook or Subscription Agreement for more information on covered benefits.

Dental Benefits

Dental services must be provided by a dentist or orthodontist who has enrolled as a Kid Care CHIP dental or orthodontic provider through Delta Dental of Wyoming.

Benefits provided through Kid Care CHIP include:

- Exams
- Cleanings
- Bitewing x-rays
- Fluoride treatments
- Sealants
- Full mouth x-rays
- Space maintainers
- Fillings
- Simple extractions
- Emergency treatment for the relief of pain
- Medically necessary dental services
- Medically necessary orthodontic services

Refer to the Delta Dental of Wyoming Handbook for more information on covered dental benefits.

Medically Necessary Orthodontic Services

A child may be eligible for medically necessary orthodontic services. This benefit is available only to children who meet specific criteria and who are found eligible by the Delta Dental Orthodontic Consultant.

Contact Delta Dental of Wyoming 1-800-735-3379 for details about the specific criteria and the required referral form.

A child must be enrolled in Kid Care CHIP when the orthodontic treatment starts, but may be removed from the program for any of the programmatic reasons. In these instances, the orthodontic benefit limit will be paid by Delta Dental of Wyoming and the child is expected to continue with the treatment plan.

Procedures Not Covered

Services not covered by Kid Care CHIP, unless proven medically necessary, include, but are not limited to:

- Experimental services
- Organ and tissue transplants
- TMJ treatment
- Acupuncture
- Cosmetic surgery
- Routine foot care
- Cosmetic Orthodontia
- Radial keratotomy, myopic keratimileusis, or any surgery which involves corneal tissue.

Refer to the Enrollee Handbook or contact Blue Cross and Blue Shield of Wyoming at 1-800-209-9720 for more information on covered benefits.

Cost Sharing Plans

Children are separated into one of three cost sharing plans. The plan the child is placed in is dependent on information obtained and verified at the time of application.

Plan A children are those who are Native American or Alaskan Native as well as those children in households with income at or below 100% FPL.

Plan B children consist of approved children in households with income between 101% and 150% FPL.

Plan C children consist of approved children in households with income between 151% and 200% FPL.

The amount of cost sharing is based on which plan the child is enrolled. There is an out of pocket maximum per benefit year (January through December). A family's maximum co-payment obligation is \$200 per child per benefit year for Plan B and \$300 per child per benefit year for Plan C.

Refer to the Enrollee Handbook or contact Blue Cross Blue Shield of Wyoming (1-800-209-9720) for more information on cost sharing and out of pocket maximums.

Out of Pocket Maximums

The maximum amount that a household will pay per enrollment year is 5% of the household's gross annual income. This amount is determined at the time of application and outlined on the approval letter. Only co-payments paid for covered services by participating providers can count towards this maximum. The only exception is Emergency Department visits outside of the PPO network and services that have prior approval from Blue Cross Blue Shield of Wyoming.

Families must keep track of their own cost sharing if they chose to track it. Families should submit their receipts to Kid Care CHIP when they have reached the 5% limit. If, after review with Blue Cross Blue Shield of Wyoming, it is determined the out of pocket maximum has been met the family will not have another co-payment for the remainder of that particular year.

Insurance Cards

Each child will receive a Blue Cross Blue Shield of Wyoming and Delta Dental of Wyoming insurance card. Parents or the providers are still responsible for verifying coverage before a service is rendered.

Blue Cross Blue Shield of Wyoming sends the family a packet containing the insurance cards. The family should receive this packet no later than 10 days following the enrollment start date.

If a Kid Care CHIP family indicates they have not received their enrollment packet, including the Blue Cross Blue Shield of Wyoming card and Delta Dental of Wyoming card, the family should contact Blue Cross Blue Shield of Wyoming at 1-800-209-9720 to request the cards and packet.

In the event a CHIP family reports receiving a Blue Cross Blue Shield of Wyoming or Delta Dental of Wyoming card in error, Kid Care CHIP staff will follow procedures outlined by WDH Office of Privacy, Security, and Contracts.

Non-Financial Criteria

All applicants must first be screened for Medicaid and as a result, the Wyoming Eligibility System (WES) will automatically screen for Medicaid eligibility before screening for Kid Care CHIP eligibility.

Eligibility Criteria Overview

Insurance through Kid Care CHIP is available to a child who is:

- A United States citizen, a lawful qualified non-citizen (refugee or asylum) or a lawful, permanent alien who has lived in the United States for at least 5 consecutive years;
- A Wyoming resident;
- Less than 19 years of age (not past the month of their 19th birthday);
- Not eligible for or already enrolled in Medicaid
- Not currently covered by health insurance nor has had health insurance during the last 30 days, except as provided for under section 4.7;
- Not eligible to receive health insurance benefits under Wyoming's state employee benefit plan;
- Not residing in a public correctional institution.
- Financially eligible based on a MAGI income eligibility determination.

Age

Children less than 19 years of age may be insured through the end of the month of their 19th birthday. For example, a child turns 19 on April 4th. The child meets the age criteria through April 30th.

If a child turns 6 years old during the application month, the child will be processed as a 5 year old for Medicaid consideration because Medicaid's start date is the first day of the application month and in all circumstances this will be more beneficial to the child.

Citizenship

A child must be a United States citizen or a lawful, permanent resident who has lived in the United States consecutively for five (5) or more years to be insured through Kid Care CHIP. The five-year time period will be determined from the day the child obtains qualified alien status. This is not related to the date on which the child first entered the United States.

Citizenship Documentation

Kid Care CHIP requires proof of citizenship. If the citizenship documentation is not provided at the time of application, the Customer Service Center will inquire any available interfaces in an effort to verify citizenship.

If citizenship verification is not provided with the application or secured through an available interface, the approval letter will include language giving the family 90 days from their effective date to provide the required documentation. If the citizenship verification has not been received by the end of the initial 90 days, the family will be sent a timely closure letter and will be closed. If the family re-applies for the child, documentation will be needed before the child can be re-enrolled.

Qualified Aliens:

A qualified alien is a lawful, permanent resident with an Alien Registration Number (an “A” number), who has been in the United States for 5 consecutive years, and who plans to continue to reside within the United States. A child who does not meet these criteria may be eligible for Medicaid’s Emergency Services.

A child who is not a U.S. citizen must provide documentation of his/her qualified alien status—the Alien Registration Number as well as their date of entry. The Alien Registration Number contains 7, 8 or 9 numerical digits preceded by the letter “A.” The date of entry and the Alien Registration number may be verified through the Federal Data Hub.

The Alien Registration Number can be found on the following documents issued by US Citizenship and Immigration Services:

- Resident Alien Card
 - Form I-551
 - Last revised August 1989
- Permanent Resident Card
 - Form I-551
 - Introduced in December 1997
- Employment Authorization Card
 - Form I-688A
- Temporary Resident Card
 - Form I-688
- Arrival-Departure Record
 - Form I-94
 - Will be attached to an unexpired foreign passport
- Certificate of Naturalization
 - Issued when a non-citizen becomes a US citizen

Parents need not be U.S. citizens to have their children eligible for Kid Care CHIP.

The following qualified aliens are exempt from the (5) five-year bar:

- Refugees, asylums, certain Cuban, Haitian and Amerasian immigrants, and certain aliens whose deportation is being withheld under section 243;
- Unmarried, dependent children of veterans and active duty service members of the US Armed Forces;
- Victims of a severe form of trafficking;
- American Indians born in Canada;
- Battered aliens or children of battered aliens.

The Customer Service Center may refer applicants to U.S. Citizenship and Immigration Services (USCIS) for information about their status. USCIS may be contacted at 1-800-375-5283.

Native Americans/Alaska Natives

Native Americans/Alaska Natives do not require verification of their status but it is helpful for federal tracking purposes.

Social Security Numbers

Social Security numbers are required for a child to be eligible for Kid Care CHIP. Social Security numbers are important for the Customer Service Center in verifying eligibility factors through available data interfaces. Children who are newly born and may not have a Social Security number as of yet may meet this requirement by providing proof of application for a Social Security number.

State Residency

Only children who are Wyoming residents can be insured through Wyoming's Kid Care CHIP program. A Wyoming resident is anyone who currently resides in the state and intends to remain in the state. Except in the case of migrant and other seasonal workers, temporary residence with no intent to remain in the state does not fulfill the residency requirement.

Children who usually live with a parent or guardian in another state and are in Wyoming during a school break or summer vacation are not considered Wyoming residents. They are "temporarily absent" from their custodial parent or guardian and could be eligible in the state where the custodial parent or guardian resides.

Children who are temporarily absent from their home in Wyoming may continue to be insured under Kid Care CHIP.

Absence for School Attendance:

A child who is away from home to attend boarding school or other educational facility or Job Corp (e.g., 18 years old and away at college) may continue to be insured through Kid Care CHIP.

Other Health Insurance Coverage

Health insurance through Kid Care CHIP is available to a child who:

- Has not had creditable health insurance for at least 30 days prior to applying;
- Is not eligible to receive health insurance benefits under Wyoming's state employee benefit plan as an employee or as a dependent of a parent or step-parent who is eligible to enroll in the State of Wyoming employee health plan. This includes benefitted state employees, benefitted employees of all of Wyoming's Community Colleges and the University of Wyoming; and dependents of employees who work for Natrona County School District.
- Meets all other eligibility requirements.

Creditable Health Insurance:

A child, who has creditable health insurance coverage, is not eligible for Kid Care CHIP. The only exception to this requirement is for children who were previously eligible for Medicaid who lost their eligibility for Medicaid and became eligible for Kid Care CHIP while maintaining coverage under their policy.

A child covered under a creditable group health plan, but cannot reasonably access care under the plan is not considered to have creditable health insurance coverage. For example, a child residing in Wyoming who is insured under the non-custodial parent's health maintenance organization (HMO) in Oregon cannot access care without traveling to Oregon. Therefore, the child may be insured under Kid Care CHIP.

The following are not considered creditable health insurance coverage:

- Accident-only insurance policies;
- Indian Health Services (IHS);
- Medicaid;
- School insurance purchased so children can participate in school-related activities;
- Children's Special Health (CSH);
- Insurance for a specific illness (e.g., cancer) or specific part of the body (e.g., dental, vision).

NOTE: AFLAC insurance can be a supplemental, accidental, or a comprehensive medical plan. Please contact the applicant to determine the specifics.

30 Day Waiting Period:

Children who lose health insurance coverage must wait 30 days before they can apply for Kid Care CHIP. The waiting period is waived if the:

1. Parent or guardian providing the insurance dies;
2. Parent or guardian providing the insurance has terminated employment;
3. Parent or guardian providing the insurance can no longer work due to a disability;
4. Parent or guardian providing the insurance has a lapse in insurance coverage due to new employment;
5. Employer no longer offers a health insurance benefit;
6. Insurance is not accessible (e.g., coverage is through an HMO in Oregon);
7. Coverage is for a specific illness or body part (e.g., cancer policy, vision, dental);
8. Coverage is specific to school-related activities; (student accidental plan)
9. Coverage was provided by Indian Health Services, Tribal Health, or Medicaid;
10. Coverage was provided under COBRA; or
11. Coverage met the affordability exemption.

Waiver of the 30-day waiting period must be approved by the Wyoming Department of Health.

NOTE: In order to meet the affordability exemption, a family's total premium must exceed 9.5% of the family's gross income or the child's portion of the premium must exceed 5% of the family's gross income. The affordability exemption request must be reviewed by Kid Care CHIP and supported by verification documents.

State of Wyoming employees:

The Kid Care CHIP State Plan states that a targeted low-income child may not be eligible for health benefits coverage under a State health benefits plan in the State on the basis of a family member's employment with a public agency, even if the family declines to accept the coverage.

Institution for Mental Disease (IMD) or Public Institution

Insurance through Kid Care CHIP is not available to a child who is:

1. A patient in an institution for mental disease (IMD) at the time application; or
2. An inmate of a public institution.

Institutions for Mental Disease (IMD):

A child in an IMD may not become eligible for Kid Care CHIP. An IMD is a facility with greater than 16 beds and its primary function is the treatment of mentally ill patients. IMDs in Wyoming include:

1. Wyoming State Hospital
2. Wyoming Life Resource Center

Public Institution:

Public institutions are facilities that incarcerate individuals who are involuntarily serving time for a criminal offense. Public institutions include state or federal prisons, jails, detention facilities, or other penal facilities. Public institutions in Wyoming are:

1. Wyoming State Penitentiary
2. Wyoming Honor Conservation Camp or Wyoming Boot Camp
3. Wyoming Honor Farm
4. Wyoming Women's Center
5. Wyoming Boy's and Girl's School
6. Frontier Correctional Systems
7. Pioneer Home
8. City/County Jail Facilities—a facility is a public institution when it is under the responsibility of a governmental unit or when a governmental unit exercises administrative control.

Verification Requirements

Kid Care CHIP requires verification of all financial and non-financial eligibility factors. In order to prevent any undue hardship on clients, the Customer Service Center will utilize all available interfaces to verify any eligibility factors before requesting verification from the client.

Who Can Apply for a Child?

The following people can apply on behalf of a child that lives with them at least 50% of the time:

- A parent
- A caretaker
- A relative
- A legal guardian
- A representative may apply on the behalf of a parent, caretaker, or legal guardian who is incapacitated.

When parents share joint physical custody (e.g. child stays at each parent's home 50% of the time), either parent can apply and eligibility is based on the income and circumstances of the applying parent. If true 50/50 custody exists, the parent who claims the child as a tax dependent should apply for the child.

If a non custodial parent and/or new caretaker files a new application and the child is already receiving benefits on another parent/caretaker's case, the non custodial parent and/or new caretaker must provide verification (such as a court order) from the custodial parent/caretaker before the existing case can be closed and the new case can be opened. The Customer Service Center should ensure that new coverage is not duplicated over for any existing months while transitioning the child between cases.

Non-Custodial Parent Calling for Eligibility Information

Based on the authority outlined in Wyoming Statute §20-2-201(e), Kid Care CHIP can release the following information to non custodial parents:

- The child's eligibility dates
- The child's medical or dental ID card numbers

Non custodial parents may also request copies of their child's medical and dental cards. The Customer Service Center should coordinate all non custodial parent requests for copies of medical and dental cards with Kid Care CHIP.

Household Composition for Kid Care CHIP

Household composition for Kid Care CHIP is based on tax household structure which may include children in a household with their parents, grandparents, and/or step-parents and step-siblings, depending on who files a joint tax return.

Financial Criteria

Income Overview

Kid Care CHIP's income eligibility is based on a family's Modified Adjusted Gross Income (MAGI). Other than a few exceptions, if a source of income is taxable, it is countable towards determining income eligibility for Kid Care CHIP.

Kid Care CHIP requires verification of all income which may include paycheck stubs, employer statements, and/or tax forms, depending on the source of income.

For more information on income verification requirements visit <https://sites.google.com/a/wyo.gov/ecom/m900/m901>.

Income Guidelines

To be income eligible for Kid Care CHIP, a family's countable monthly income cannot exceed 200% of the federal poverty level (FPL) guidelines. The FPL usually increases every April 1st. Applications and renewals received in March will be based off of the new year's FPL chart. All applications are screened for potential Medicaid eligibility first.

A child is income eligible for Kid Care CHIP if the family unit's income is between 134% and 200% FPL and the child is age six through 18 years old.

A child is income eligible for Kid Care CHIP if the family unit's income is between 155% and 200% FPL and the child is age birth through 5 years old.

As part of the Modified Adjusted Gross Income (MAGI) determination, the Wyoming Eligibility System (WES) will also deduct a 5% disregard from a family's countable income before comparing the family's countable income to the 200% federal poverty level. WES calculates the 5% disregard by calculating 5% of the 100% FPL amount for the family size and then subtracts this amount from the family's countable income before comparing it to the 200% federal poverty level.

Eligibility Miscellaneous

Kid Care CHIP Start Date

1. If the application is date stamped by the Customer Service Center, submitted on the WES Client Web Portal, or called in to the Customer Service Center from the 1st through the 25th of the month, the child's Kid Care CHIP start date will be the 1st day of the next month.
2. If the application is date stamped by the Customer Service Center, submitted on the WES Client Web Portal, or called in to the Customer Service Center from the 26th through the last day of the month, the child's Kid Care CHIP start date will be the 1st day of the month after next.

Timely Processing of Applications and Renewals

All applications for Kid Care CHIP are required to be processed by the Customer Service Center within 45 days of the date that the application was received. It is the procedure of the Kid Care CHIP program to request all required verifications within 48 hours of the receipt of applications.

Kid Care CHIP Renewals

Children are eligible to receive 12 continuous months of coverage once they are approved and enrolled in Kid Care CHIP. However, a renewal is required to be completed every 12 months to determine continued eligibility for the program. Approximately 60 days before Kid Care CHIP coverage is scheduled to end, the Wyoming Eligibility System (WES) will generate and mail the family a renewal letter and renewal application. Families are required to return the completed renewal application or call in to the Customer Service Center to renew over the phone by the 15th day of the month in which coverage is set to end. If the renewal application is not returned by the 15th of the month that coverage is scheduled to end, a closure notice is generated.

When all required verifications have been secured, it is important for the Customer Service Center to process and finalize all renewals timely to prevent lapses in coverage for the client.

Renewal applications that are received after the child's coverage has ended shall continue to be processed and eligibility determined back to the date the child ended for a period of 90 days after the closure date. Every situation with the child being approved at renewal during the 90-day "look back" period will require a CHIP Add-on form to be completed and submitted to the WDH.

12 Months Continuous Coverage

12 Months of Continuous Coverage

Children are eligible to receive 12 continuous months of coverage once they are approved and enrolled in Kid Care CHIP. Exceptions to this rule occur when the child:

- Moves out of state;
- Turns 19 years of age;
- Becomes institutionalized;
- Enters foster care;
- Becomes eligible for SSI;
- Becomes eligible for pregnant women's program;
- Becomes eligible for the Child MAGI program;
- Fails a quality control audit;
- Requests closure;
- Obtains creditable health insurance; or
- Is eligible to receive health insurance benefits under Wyoming's state employee benefit plan (Wyoming Statute §35-25-103).