



# Family Health Plus FACT SHEET

**Family Health Plus is a health insurance program for low-income New Yorkers ages 19 to 64 whose incomes are too high for Medicaid and who don't have other insurance. Family Health Plus has no premiums but there are co-pays for some services.**

## Family Health Plus Benefits

Family Health Plus provides health coverage for a wide range of medical services including doctor visits, hospital care, emergency care, prescription drugs and smoking cessation products, lab tests and x-rays, mental health services, eye glasses, dental services (if offered by the health plan), and more. There are co-payments for many of these services. Family Health Plus is like other commercial insurance plans and has some limits on services.

## How Health Care is Provided

People enrolled in Family Health Plus will receive health care through a managed care plan. Adults must select a health plan as part of the application. They then visit the health plan's network of doctors, health centers, and hospitals. Through this health plan, they will have a regular doctor who they can go to for check-ups and when they are sick. This doctor also can help refer the participant to a specialist, if needed. People will get an insurance card from the health plan they join. All Family Health Plus services can only be obtained through the selected health plan.

## Eligibility Requirements for Family Health Plus

Many immigrants and working adults are eligible for Family Health Plus. Family Health Plus eligibility requirements include:

- Age:** Must be 19 to 64 years old.
- Residency:** Must be a New York State resident (no minimum length of time).
- Citizenship/Immigration Status:** Can be a U.S. citizen or an immigrant.
- Health Coverage:** Cannot have other health insurance (there are some limited exceptions).
- Exclusions:** Cannot be a government employee (federal, state, county, municipal) with access to health coverage through their employer.
- Income:** Family income must fall at or below the following levels:

### Monthly Income Levels for Family Health Plus

This chart is only a guide. Adults with incomes above these levels may still be eligible and should be referred to an enrollment counselor.

Family Size/ Household	Adults Without Children	Parent (living with a child who is under 21) and 19-20 year olds (living with their parents)
1	\$867	\$1,300
2	\$1,167	\$1,750
3		\$2,200
4		\$2,650
5		\$3,100
Each Add'l Person		+\$450

*Children and teenagers under 19 years old may be eligible for Child Health Plus.*

**Resources:**

Families may not have resources/assets that exceed the following

No. of Persons in Household	1	2	3	4	5	6
Resource Allowance	\$12,050	19,200	\$19,800	\$19,950	\$20,100	\$20,400

**Co-Payments:**

Brand name Prescription drugs:	\$6 for each prescription	Lab tests:	\$.50 per test
Generic prescription drugs:	\$3 for each prescription	Radiology services:	\$1 per x-ray
Physician visits:	\$5	covered over-the counter drugs:	\$.50 per drug (smoking cessation products, insulin)
Clinic visits:	\$5	Covered medical supplies:	\$1 per supply (diabetic supplies such as syringes, lancets, test strips and enteral formula)
Hospital care:	\$25 per stay		
Non-urgent ER visits:	\$3 per visit		
Dental services:	\$5 per visit up to \$25 per year		

Pregnant women and individuals under age 21 are exempt from co-pays. No one can be refused care or services if they can not pay for co-pays.

**Medicaid Spenddown Program**

Some adults with ongoing or special health care needs and who have incomes that are too high for Medicaid should consider enrolling in the Medicaid Spenddown Program instead of Family Health Plus. Family Health Plus has fewer benefits than Medicaid. People should choose the program that best meets their needs. For more information about this program, call a local Medicaid office.

**How To Sign Up for Family Health Plus**

People can sign up for Family Health Plus through a program called Facilitated Enrollment which uses community-based organizations, some health plans, and others to help with the enrollment process. Through this program, community enrollers are available to screen for eligibility, help fill out the application, gather the required documents, and ensure that an individual or family becomes enrolled. The enrollment counselor can explain how managed care works, help people choose a health plan, and even help select a doctor. People also can sign up at their local Medicaid office or Department of Social Services. *To find an enroller in your area call 1-877-934-7587.*

**Documentation required to apply:**

People applying will need to prove identity, age, residence, citizenship/immigration status, and family income. Enrollment counselors can help gather documents. Here are some examples of documents that can be used:

**Proof of Identity and Age:** Birth certificate, baptismal certificate, official photo I.D., driver's license, or official school records.

**Proof of Residency:** Official I.D. with address, utility bill, bank statement, lease, letter from landlord, official school records, or a postmarked envelop.

**Proof of Family Income:** Paycheck stubs (last four consecutive weeks), letter from employer, signed income tax return, benefit checks, or award letters.

**Proof of Citizenship/Immigration Status:** Birth Certificate, Legal Permanent Residency card ("green card"), Naturalization Certificate, Passport, Employment Authorization Card, or other INS forms.

**Renewal/Re-certification for Family Health Plus**

Family Health Plus coverage needs to be renewed every year. Before the year is over, participants will receive a pre-printed form and instructions in the mail explaining how to renew. Coverage can be renewed through the mail, at a facilitated enrollment program, or at a local Medicaid office. It is important for consumers to follow all the directions in their renewal package and to return it by the date listed on their form. If people do not renew on time, they may lose their health insurance coverage.

**For more information about Family Health Plus call toll free hotline:  
1-877-934-7587 or (1-877-898-5849 TTY line for hearing impaired)**

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Revised February 2008