

PUBLIC HEALTH INSURANCE OPTIONS AND REPRODUCTIVE HEALTH FOR TEENS IN NEW YORK

Several government-sponsored health care programs are available to New York teens who are pregnant, parenting, or in need of family planning options

Child Health Plus (CHPlus A and CHPlus B)

Comprehensive health insurance for New York children and adolescents under the age of 19

ELIGIBILITY

CHPlus A: Medicaid for NY children and adolescents under age 19 who have both:
 – **PROOF OF CITIZENSHIP OR NATURALIZATION** (see **New Documentation Requirements**); and
 – **Qualifying Household Income Limits:**
 – 100% of the Federal Poverty Level (FPL) for children and teens age 6 - 18¹
 – 133% of FPL for children age 1-5
 – 200% of FPL for children under 1 (see **PCAP** information on newborns)

One year guaranteed coverage, even if income goes above guidelines²

ELIGIBILITY

CHPlus B: Available to NY children and adolescents under age 19 who are not eligible for CHPlus A
 – **Qualifying Household Income Limits:**
 Below 160% of FPL – health care is free
 Beginning 9/1/2007, from 160-400% of FPL – subsidized monthly premium applies
 Above 400% of FPL – full monthly premium charged by the health plan applies³
 ▪ Until 9/1/2007, ceiling is 250% instead of 400%
 ▪ Applicants whose incomes are 250-400% of FPL who **voluntarily** terminate a child's current active health care plan to obtain CHP B coverage are subject to a six-month waiting period
 – Must enroll in a managed care plan to get service

One year of coverage, but enrollee has duty to report any changes in income

IMMIGRATION STATUS DOES NOT MATTER

REPRODUCTIVE HEALTH COVERAGE

- ✓ Pregnancy testing
- ✓ Prenatal, labor and delivery care
- ✓ Birth control (including prescription contraception and emergency contraception (EC))
- ✓ “Medically-necessary” abortion (covers almost all abortions)⁴
- ✓ STI testing, counseling, and treatment
- ✓ HIV testing and counseling

APPLICATION AND ENROLLMENT

Parents or guardians must enroll their child or adolescent *unless* she or he is married, pregnant or parenting or is an emancipated minor. These adolescents can enroll themselves.⁵

- However, any children or adolescents living at home – except if they are pregnant – must count their parents’ and spouses’ incomes when determining eligibility (see **PCAP**)
- An emancipated minor is someone under age 18 who does not live with and does not receive financial support from his or her parents

Apply at a facilitated enroller, participating managed care plan, or local Medicaid office

Children and adolescents’ applications should be processed in 30 days

Must recertify annually

Medicaid Prenatal Care Assistance Program (PCAP)⁶

Comprehensive health insurance for pregnant New York women and teens

ELIGIBILITY

Pregnant women and teens who earn *up to* 200% of the FPL⁷

- The income of a pregnant adolescent’s parent is not counted
- No parental consent necessary

IMMIGRATION STATUS DOES NOT MATTER

APPLICATION AND ENROLLMENT

Presumptive Eligibility

- Qualified providers can determine that a pregnant woman or adolescent is “presumptively eligible,” and she can receive covered services immediately upon applying for PCAP for up to 45 days⁸
 - Presumptive eligibility does not mean approval and she can’t receive services indefinitely

Pregnant women and adolescents can apply on their own as independent households

Apply at a PCAP provider or local Medicaid office

REPRODUCTIVE HEALTH COVERAGE

- ✓ Pregnancy testing
- ✓ Prenatal, labor and delivery care
- ✓ STI testing and treatment
- ✓ HIV testing and counseling
- ✓ 60 days of post-partum care for women or adolescents
- After 60 days, apply for Medicaid/FPBP, CHPlus, or FPEP, depending on eligibility
- Newborns of PCAP enrollees receive Medicaid coverage until their first birthday (see **CHPlus A**)

Abortion is covered **only** for incomes *up to* 100% of the FPL (under regular Medicaid)

Medicaid Family Planning Extension Program (FPEP)⁹

Up to two additional years of family planning care for woman and teens who lose Medicaid eligibility after the end of their pregnancy

ELIGIBILITY

The applying woman or adolescent must have:

- Been pregnant within the past two years; and
- Had full Medicaid or PCAP when pregnancy ended (regardless of whether pregnancy ended in delivery, termination, or miscarriage); and
- Lost Medicaid after pregnancy ended and have no other health insurance

IMMIGRATION STATUS DOES NOT MATTER

APPLICATION AND ENROLLMENT

- Register with a FPEP provider
 - An enrollee can only receive services at a location where she has registered; no proof-of-coverage card is provided
- Include proof of last pregnancy and past Medicaid eligibility

After 2 years on FPEP, women and adolescents can apply for FPBP on their own as independent households

REPRODUCTIVE HEALTH COVERAGE

- ✓ Pregnancy testing and counseling
- ✓ Birth control (including prescription contraception and emergency contraception (EC))
- ✓ Colposcopy
- ✓ STI testing, counseling, and treatment
- ✓ HIV testing and counseling

Abortion and prenatal care are **not** covered

Medicaid

Comprehensive health insurance for low-income New Yorkers that pays for doctors' and hospital visits

ELIGIBILITY

- **PROOF OF CITIZENSHIP OR NATURALIZATION** (see **New Documentation Requirements**)
- **Qualifying Household Income Limits:**
 - For children and adolescents under 19, CHPlus A limits apply (see **CHPlus A**)
 - For 19 and 20 year-olds, the income limit is lower:
 - Maximum gross monthly income of \$700 (for a family of 1); \$900 (family of 2); \$1100 (family of 3); \$1109 (family of 4); \$1117 (family of 5); \$1134 (family of 6)¹⁰

APPLICATION AND ENROLLMENT

For children and adolescents under 19, CHPlus A guidelines apply (see **CHPlus A**)
Applicants 19 and over apply at a facilitated enroller, participating managed care plan, or local Medicaid office
May be applied 3 months retroactively

REPRODUCTIVE HEALTH COVERAGE

- ✓ All birth control (including prescription contraception and EC)
- ✓ Non-prescription EC for women 18 and older¹¹
- ✓ Pregnancy testing
- ✓ GYN exam, including Pap tests
- ✓ Colposcopy
- ✓ Prenatal, labor and delivery care
- ✓ “Medically-necessary” abortion
- ✓ STI and HIV testing and counseling
- ✓ HPV vaccine – All adolescents who are eligible for Medicaid or are uninsured can get the HPV vaccine¹²

Emergency Medicaid

Coverage for treatment of women, men, and teens who do not have proof of citizenship or naturalization, following the sudden onset of a medical emergency

ELIGIBILITY

- Pregnant women and adolescents who meet Medicaid income limits (see **Medicaid**)

ONLY FOR PEOPLE WITHOUT PROOF OF IMMIGRATION STATUS

REPRODUCTIVE HEALTH COVERAGE

- ✓ Treatment for labor and delivery complications or risks to a woman's fetus
 - ✓ “Medically-necessary” abortion (if the woman's life is in danger)
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- Does **not** cover routine prenatal care or elective abortions
May be applied 3 months retroactively

Medicaid Family Planning Benefit Program (FPBP)

Reproductive health care and family planning services for female and male New Yorkers age 10-64

ELIGIBILITY

- **PROOF OF CITIZENSHIP OR NATURALIZATION** (see **New Documentation Requirements**)
 - However, applicants born in NY State need only complete a Request for Certification of Birth¹³
- **Qualifying Household Income Limits:**
 - Income **up to** 200% of FPL
 - The income of an applicant's parent is *not* counted

REPRODUCTIVE HEALTH COVERAGE

- ✓ All birth control (including prescription contraception and EC)¹⁴
 - ✓ GYN exam, including Pap tests
 - ✓ Pregnancy, STI, and HIV testing and counseling
 - ✓ Male and female sterilization for individuals 21 or older
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- Abortion, colposcopies and prenatal care are **not** covered

APPLICATION AND ENROLLMENT

Adolescents can apply on their own as independent households
Apply at a family planning provider or local Medicaid office
One year of coverage; must recertify annually

NEW DOCUMENTATION REQUIREMENTS FOR MEDICAID, CHPLUS A, AND FPBP

Who has proof of U.S. citizenship or naturalization, for insurance purposes?

- 1 U.S. Citizens and Lawful Permanent Residents (green card holders)
- 2 Applicants for the green card
- 3 Persons “permanently residing under color of law” (PRUCOL)
 - These are people whom USCIS* knows permanently reside in the U.S. and does not intend to deport
 - Includes asylum applicants and people with Temporary Protected Status

All other immigrants living in the U.S. – including *without* USCIS' permission – do not have proof of immigration status for public health insurance purposes

* U.S. Citizenship and Immigration Services (USCIS) is responsible for the service and benefit functions of the former INS.

What is proof of U.S. citizenship or naturalization?

Originals or certified copies¹⁵ of either:

- A U.S. Passport, Certificate of Naturalization, or Certificate of U.S. Citizenship, **or**
- **Two** documents:
 - One that proves **citizenship** (e.g., birth certificate), and
 - One that proves **identity** (e.g., driver's license, government or school ID card)

KEY CHANGES FROM PREVIOUS NY LAW:

- Birth certificates may now be used **only** to prove citizenship; additional proof of identity now required
- **Photocopies** of documents to prove citizenship are no longer permitted
- **FPBP:** Teens must now also present proof of citizenship; all recipients must re-apply every 12 months instead of every 24 months

USEFUL RESOURCES

CHPlus A & B	800-698-4KIDS (4543) • http://www.health.state.ny.us/nysdoh/chplus/
PCAP	800-522-5006 • http://www.health.state.ny.us/nysdoh/pcap/index.htm
Medicaid	In NYC, 877-472-8411 • Outside, 800-541-2831 • (M-F 8am-4:45pm) http://www.health.state.ny.us/health_care/medicaid/
Planned Parenthood of NYC	800-230-PLAN (7526) (to refer patients) 212-274-7277 (for training on these issues)

FREQUENTLY ASKED QUESTIONS ON PUBLIC HEALTH INSURANCE OPTIONS FOR TEENS IN NEW YORK

1. If I am a teenager living in NY *without* proof of immigration status, can I get health insurance?

Yes. If you live in N.Y. and you do not have proof of U.S. citizenship or naturalization, you can still get some government-funded health insurance, if you meet the eligibility requirements above, through:

- **Child Health Plus B (CHPlus B)** – Applicants must disclose their immigration status, but parents do not need to disclose their own statuses to get CHPlus B for a teen child
- **PCAP** – Applicants do not need to disclose their immigration status to apply
- **Emergency Medicaid**
- **Family Planning Extension Program (FPEP)**

2. If I am a teenager living in NY *with* proof of my citizenship or immigration status, what kind of health insurance can I get?

If you live in NY, have proof of U.S. citizenship or naturalization, and meet the eligibility requirements above, you can also get government-funded health insurance through:

- **Medicaid**
- **CHPlus A**
- **Family Planning Benefit Program (FPBP)**

3. What if I am unable or ineligible to enroll in public health insurance?

Many clinics will work with uninsured patients who need reproductive health services to charge them based on their ability to pay.

4. Do government insurance programs report immigrants to the authorities?

No. Information should not be shared between state government or health care provider and USCIS. When a health insurance program asks for an applicant's immigration status, it is only to determine who will pay for the care.

5. Can I be denied U.S. citizenship for lawfully receiving benefits?

No. No one may be denied citizenship for lawfully receiving government benefits, including health care. Also, relying on public health insurance does not affect any pending or later applications for citizenship.

ADDITIONAL INFORMATION FOR CHILDREN AND TEENS UNDER 16 IN NEW YORK

6. If I am under 16 in NY and I have or can request my birth certificate, but I do not have a separate identity document, is there anything else can I use to prove my identity?

Yes. In New York, you may use school records or a signed affidavit by a parent or guardian stating your date and place of birth¹⁶

If you do not have or cannot obtain any other identity documents, bring at least two of the following:

- School ID card with a photograph
- Military dependent's ID card if it contains a photograph
- School record showing date and place of birth and parent(s) name
- Clinic, doctor or hospital record showing date of birth
- Daycare or nursery school record showing date and place of birth¹⁷

FOOTNOTES

¹ In 2007, 100% of the Family Poverty Level (FPL) for a family of one is a yearly income of \$10,210; a family of two is \$13,690; a family of three is \$17,170; a family of four is \$20,650; a family of five is \$24,130; a family of six is \$27,610; a family of seven is \$31,090; a family of eight is \$34,570. Annual Update of the HHS Poverty Guidelines, 72 Fed. Reg. 3147 (Jan. 24, 2007).

² 42 U.S.C. § 1396a(e)(12) (2007).

³ N.Y. Pub. Health Law § 2511(2)(a)(iii) (McKinney 2007); *see also* Press Release, N.Y. State Governor Eliot Spitzer, State Provides Access to Health Coverage for All Children (April 1, 2007) *available at* <http://www.ny.gov/governor/press/0401074.html> (announcing NY state's expansion of CHPlus eligibility to families with incomes up to 400 percent of the FPL). However, the teen's parent or family member can not be a public agency employee with access to family coverage through a state health benefits plan where the public agency pays all or part of the cost of the health benefits.

⁴ N.Y. State Dep't of Health, *State Child Health Plan 6-8* (April 1998), *available at* <http://www.health.state.ny.us/nysdoh/child/schip99a.pdf>; N.Y. Soc. Serv. Law § 365-a(2) (McKinney 2007) (defining medically necessary services, including abortions, provided under N.Y. State Medicaid Program). In determining medical necessity, a CHPlus B plan must act "reasonably and with sound medical judgment and in the best interest of the patient." N.Y. Pub. Health Law § 4914(2)(d)(A) (McKinney 2007). Virtually every medically appropriate abortion meets this standard. *See Doe v. Bolton*, 410 U.S. 179, 192 (1973) (the determination that an abortion is medically necessary is a "medical judgment [that] may be exercised in light of all factors—physical, emotional, psychological, familial, and the woman's age—relevant to the well-being of the patient").

⁵ N.Y. State Dep't of Health, *2007 Child Health Plus Training Manual*, available by phone at Child Health Plus Hotline, 800-698-4543.

⁶ N.Y. Pub. Health Law § 2521(3) (McKinney 2006).

⁷ When determining income, a pregnant woman is counted as two people. In 2007, 200% of the FPL for a family of two is \$27,380; a family of three is \$34,340; a family of four is \$41,300; a family of five is \$48,260; a family of six is \$55,220; a family of seven is \$62,180; a family of eight is \$69,140. Annual Update of the HHS Poverty Guidelines, 72 Fed. Reg. 3147 (Jan. 24, 2007).

⁸ N.Y. Pub. Health Law § 2529 (McKinney 2006).

⁹ *See* N.Y. State Dep't of Health, Comprehensive Family Planning & Reproductive Health Care Services Program, http://www.health.state.ny.us/community/pregnancy/family_planning/index.htm (last visited Aug. 9, 2007).

¹⁰ Med. Assistance Program, N.Y.C. Human Resources Admin., *2007 NYS Income and Resource Standards and Federal Poverty Levels* (rev. Mar. 3, 2007), *available at* http://nyc.gov/html/hra/downloads/pdf/income_level.pdf.

¹¹ Emergency contraception is covered by Medicaid and is available over the counter without a "fiscal order" to women 18 and over, no more than six times per 12-month period. Letter from Deborah Bachrach, Medicaid Director, N.Y. State Dep't of Health, to pharmacy providers (Jan. 23, 2007) (on file with NYCLU).

¹² *See* Office of Medicaid Mgmt., N.Y. State Dep't of Health, *Medicaid Coverage of Human Papillomavirus (HPV) Vaccine*, 22(2) NY DOH Medicaid Update (Feb. 2007) (on file with NYCLU); Ctrs. for Disease Control & Prevention, U.S. Dep't of Health & Human Servs., Vaccines for Children: Which Children are Eligible, http://www.cdc.gov/nip/vfc/Parent/eligible_children.htm (last visited Aug. 9, 2007).

¹³ N.Y.C. Human Resources Admin., N.Y.C. Dep't of Social Servs., Medical Assistance Program ALERT (Jan. 5, 2007) (including Requests for Certification of Birth), www.nyclu.org/teeninsurance.

¹⁴ N.Y. State Dep't of Health, Family Planning Benefit Program, http://www.health.state.ny.us/health_care/

[medicaid/program/longterm/familyplanbenprog.htm](http://www.health.state.ny.us/health_care/medicaid/program/longterm/familyplanbenprog.htm) (last visited Aug. 9, 2007) (noting also that FPBP covers Plan B, but it no longer covers Preven).

¹⁵ 42 U.S.C. § 1396b(x)(1)-(3) (2006); Deficit Reduction Act of 2005, Pub. L. 109-171 § 6036(a) (noting that people receiving Supplemental Security Income (SSI) or Medicare do not need to document citizenship).

¹⁶ GIS 06 MA/021 from Linda LeClair, Director, Bureau of Medicaid Eligibility, Operations & Family Health Plus, Office of Medicaid Mgmt., to Local District Commissioners and Medicaid Directors regarding citizenship documentation and identity requirements of the Deficit Reduction Act of 2005 (Aug. 2, 2006) (on file with NYCLU); *see* GIS 06 MA/015 from Brian J. Wing, Deputy Commissioner, Office of Medicaid Management, to Local District Commissioners and Medicaid Directors regarding citizenship documentation requirements of the Deficit Reduction Act of 2005 (June 29, 2006) (on file with NYCLU).

¹⁷ Ctrs. for Medicare & Medicaid Servs., U.S. Dep't of Health & Human Servs., Fact Sheet: Medicaid Citizenship Guidelines (containing complete lists of acceptable citizenship and identity documents) (July 2, 2007), http://www.cms.hhs.gov/apps/media/fact_sheets.asp (select "Items containing the following keywords"; then enter "Medicaid Citizenship Guidelines"; then follow "July 02, 2007 MEDICAID CITIZENSHIP GUIDELINES" hyperlink); Ctrs. for Medicare & Medicaid Servs., U.S. Dep't of Health & Human Servs., Documentation of Citizenship for Medicaid Recipients And Applicants That Declare That They Are U.S. Citizens: Frequently Asked Questions (on file with NYCLU).