



Indiana Health Coverage Programs 2015 - Feb. 2016

Who?	PROGRAM	Eligibility Criteria	Family Size	Max. Monthly Income	Benefits	How to Apply
Children under 19	Hoosier Healthwise/Medicaid and CHIP	Age/income/family size	1 2 3 4 5	\$2,453 \$3,319 \$4,186 \$5,053 \$5,919	Doctor visits, medications, dental, vision, mental health, surgeries, and hospitalization	Phone: 1.800.403.0864 Online: www.ifcem.com/CitizenPortal/application.do
Low-income Individuals (100% FPL*)	HIP Basic	Income/family size	1 2 3 4 5	\$981 \$1,328 \$1,675 \$2,021 \$2,368	Doctor visits, medications, dental, vision, mental health, surgeries, and hospitalization	Phone: 1.800.403.0864 Online: www.ifcem.com/CitizenPortal/application.do
Pregnant Women	Hoosier Healthwise/HIP State Plan	Count unborn as 1 in family size; pregnancy income/family size	1 2 3 4 5	n/a \$2,762 \$3,483 \$4,204 \$4,925	Pregnancy related care	Phone: 1.800.403.0864 Online: www.ifcem.com/CitizenPortal/application.do
Low-income Individuals (133% FPL*)	HIP 2.0	Indiana resident, aged 19-64, not eligible for Medicaid or Medicare categories	1 2 3 4	\$1,369.73 \$1,853.85 \$2,337.97 \$2,822.09 5% disregard added	Essential health benefits including doctor visits, medications, mental health, surgeries and hospitalization	Phone: 1.800.403.0864 Online: www.ifcem.com/CitizenPortal/application.do
Individuals with monthly income over (138% FPL*)	Health Insurance Marketplace	U.S. Citizen or legal resident, without affordable insurance through an employer		If your yearly income is between \$16,243 and \$46,680, you may qualify for lower premiums on a Marketplace insurance plan.	Essential health benefits including doctors visits, medications, mental health, surgeries and hospitalization	Phone: 1.800.318.2596 Online: www.healthcare.gov NOTE: Open enrollment for 2016 coverage begins November 1 and ends January 31 However, If you experience a life changing event that involves change in family status (for example, marriage or birth of a child) or loss of other health coverage you qualify for a special enrollment period of 60 days.
Aged, blind, and disabled; adults, children, refugees	Traditional Medicaid/Hoosier Care Connect	65 and older or applying for SSA due to determination of blindness or disability		Up to 100% FPL*	Doctor visits, medications, dental, vision, mental health, surgeries, and hospitalization	Phone: 1.800.403.0864 Online: www.ifcem.com/CitizenPortal/application.do

*The 2015 Federal Poverty Level (FPL) is \$11,770 for an individual.

To give you a head start on your enrollment, please collect the below documents, if they are available:

- Photo ID
 - Birth Certificate
 - Vehicle Registration
- Social Security Card
 - Last 3 months of pay stubs or a proof of no income statement
- Health Insurance Card (if currently insured)
 - Last 3 months of bank statements
 - Last year’s tax return

Please call the 1.800.403.0864 to work directly with the State. Alternatively, call 844.STVPLAN (788.7526) at St. Vincent to schedule an appointment or have our enrollment specialists help you through the process.

St. Vincent is here to help you get covered or stay covered.

stvincent.org/enroll or calling 844.STVPLAN

