

How to apply

Fill out the **Application for Medical Assistance for Families with Children.**

Send it to:

KanCare

P.O. Box 3599

Topeka, KS 66601-9738



Apply faster online
www.applyforKanCare.ks.gov

Medical Assistance for Families with Children

including pregnant women, children under age 19, and low-income parents and caretakers caring for children

**If you have questions,
call us at 1-800-792-4884.**

Interpreters are available, if needed.
You can ask for an application in another language.

1-800-792-4292 (TTY) for persons with hearing impairments
1-800-498-1255 (Fax)



How Medical Assistance helps Kansans:

- Early diagnosis means better treatment at lower costs
- Regular health care helps Kansans lose fewer hours at school and work
- Fewer emergency room visits mean lower health insurance costs for all

Who qualifies?

People qualify if they are Kansas residents and are U.S. citizens or documented non-U.S. citizens.

They must meet current income guidelines and be in one of these groups:

- Pregnant women
- Children under age 19
- Low-income parents and caretakers caring for children

What does it cost?

- Most families qualify with no cost to them for coverage
- Some families will have monthly premiums (costs)



For those who qualify...

- Services are provided through a KanCare health plan
- Each family receives information **on benefits and how to enroll** in a health plan



Covered services include...

Medical services

- **Office visits**
- Regular checkups
- Immunizations
- Hospital services
- Inpatient and outpatient hospital
- Lab and x-ray
- Prescription drugs
- Eye exams and glasses
- Hearing services
- Home health services
- Speech, physical and occupational therapy

Dental services

- Checkups, cleanings, sealants, x-rays and **fillings for children**
- Checkups and cleanings for adults

Mental health services

- Inpatient and outpatient mental, behavioral and substance abuse services

Benefits, income guidelines, and premiums can change at any time.

▶ If you are applying for a family with children, use the **Application for Medical Assistance for Families with Children.**

▶ If you are applying for someone 65 or over or an adult or child with a disability, use the **Application for Medical Assistance**



for the Elderly and Persons with Disabilities.