



Medical Coverage for Children

GENERAL REQUIREMENTS

This program is available to children. To be eligible, the child must be a Kansas resident. He or she must also be a U.S. citizen or an eligible non-citizen. If the child is not an eligible noncitizen he or she may be eligible for a program called SOBRA. SOBRA may provide coverage of emergency services.

AGE

The child must be under the age of 19.

FAMILY SIZE

Your family size is usually determined by your income tax unit. The application should list each person who is living in the home. The agency will decide who must be counted in the household. For most people the household is the same as your income tax unit.

ASSETS

We don't count resources or assets for this program.

INCOME

The income of all individuals in the family size is counted. This includes wages from a job, self-employment, unemployment benefits, and Social Security (except SSI).

INCOME STANDARDS

The monthly countable income is compared to the appropriate standards listed in the chart below.

The income standards vary depending on the age of the child. There are two levels of coverage:

- KanCare under the Medicaid plan, which has lower income levels
- KanCare under the CHIP plan; if a child doesn't qualify for Medicaid, they are then screened for CHIP.

Monthly Income Standards

Number of Persons Included in household	KanCare under the Medicaid plan Pregnant Women and Children Under 19			KanCare under the CHIP plan Children Under 19
	113% of federal poverty level (ages 6 thru 18)	149% of federal poverty level (ages 1 thru 5)	171% of federal poverty level (pregnant women & ages under 1)	230% of federal poverty level (ages 0 thru 19 & income exceeds Medicaid)
1	\$1,213	\$1,600	\$1,836	\$2,469
2	\$1,641	\$2,163	\$2,483	\$3,339
3	\$2,068	\$2,727	\$3,130	\$4,209
4	\$2,496	\$3,291	\$3,777	\$5,080
5	\$2,923	\$3,855	\$4,424	\$5,950
6	\$3,351	\$4,418	\$5,071	\$6,820

Specific KanCare CHIP Requirements

If the family's income is at the KanCare CHIP level, additional rules apply.

- Children must not already be covered by other health insurance.
- A premium between \$20 and \$50 is required for families with income above 166% of the federal poverty level and these premiums must be paid to keep coverage.

HOW TO APPLY

To apply for medical coverage, use any of the following choices:

- Apply Online - [Apply online for KanCare](#)
- Call the KanCare Clearinghouse at 1-800-792-4884 to request an application. Interpreter services are available.
- Paper Applications can be downloaded from the [Apply for KanCare](#)