

Families' Guide to Health Care Resources for Orange County Children

F	Covered California Legal residents of	Medi-Cal (Full Scope and Targeted Low-Income Children's Program (TLICP)) California children and adults	Kaiser Permanente Child Health Plan Children under 19 years of age.	Medi-Cal (Restricted) California children and	3	Community Clinics Children and adults	HCA Family Health Children's Clinic Children from birth to 19
L I G I B I L I T	May be eligible for discounts (Federal subsidies) or insurance coverage at no cost (through Medi-Cal) based	Documentation of eligibility required. Immigration status is no longer considered for Medi-Cal eligibility	Income limits apply. Children must live in a Kaiser Permanente service area. Do not qualify for Medi-Cal, CCS or other health insurance and no insurance available through parent's employer. Citizenship/immigration status	11.3	Must live in California. Family income limits apply	can receive services at most of the clinics. There may be family income limits.	years of age. Family income limits apply. Citizenship or legal residency is not required.
Υ		ce or like insurance and cover most ow to apply call CHIOC (714)619-405	is not required. types of health services.	These programs are insurance with limited coverage.	These programs are not like hea	Ith insurance. They only I give immunizations.	cover certain limited services
B E N E F I T S	All plans include the "Essential health benefits": doctor visits, hospital stays, emergency care, maternity care, children's care, prescriptions, medical tests and mental health care." Families can choose their plan and coverage.	Recipients may become members of CalOptima as this is the managed care in Orange County. "Essential health benefits": doctor visits, hospital stays, emergency care, maternity care, children's care, prescriptions, medical tests and mental health care. Dental and Vision if eligible."	Medical visits for treatment and preventive services, specialty care, emergency room, hospitalization, mental health, prescription drugs, applicable lab and x-rays, some dental and vision care.	Benefits depend on eligibility and type of care needed. May cover only certain types of care Under SB75 children	immunizations and referrals for conditions identified.	Preventive visits, immunizations, vision care, dental and sick care depending on clinic.	No-cost check-ups for CHDP eligibles. Immunizations for those without insurance No cost sick-child care.
C O S T	on plan(s) and coverage level chosen and income limits.		Monthly premiums and co- payments apply for each child.	family size and income	,	Low cost or no-cost depending on family income. Call clinic for details.	No cost.
)	Call (800)300-1506 www.coveredca.com	Call (855)478-5386 www.mybenefitscalwin.org	Call (800)464-4000 http://info.kaiserpermanente.org/h tml/child_health_plan/index.html	Call (855)478-5386 www.mybenefitscalwin.org	Call (800)564-8448 http://ochealthinfo.com/phs/ab out/family/chdp	Call (800)564-8448 http://www.coccc.org/ clinic_directory.htm	Call (800)914-4887 http://ochealthinfo.com/phs /about/family/fhcs/chcs