

Navigating the Insurance Maze, Part II

Covering your Newborn

My husband and I are each covered under our respective parents' health insurance plans. We had assumed that our baby would automatically be covered under the same policy, but now we found out that our parents' plans only cover us, and not our children. What should we do?

I'm expecting my first child in three weeks, and I wanted to apply for public insurance for the baby. I am not eligible for Medicaid. When I spoke to Child Health Plus (CHP), they said that I can only apply after the baby is born, and they won't cover any bills retroactively. They also said that it will take up to six weeks for the application to be processed and approved. How can I cover my baby from birth if I can't even apply until after s/he is born?

Many young parents find themselves in a bind with the birth of their first child. As per federal law, as of January 2012 young adults may remain on their parents' health insurance plans until the age of 26. This coverage does NOT include the young adults' own dependents, forcing expectant couples to look for other options. In this second part of Achiezer's insurance series, Sruly Miller answers some of the most common questions pertaining to public health insurance for newborns.

Q: What public health insurance options are available to my newborn?

A: There are two public insurance options available for children: Medicaid, and Child Health Plus. As stated in the previous segment of this series, Medicaid requires lower income levels, and offers full coverage without premiums, co-pays or deductibles. Child Health Plus (CHP), which offers similar coverage, can be attained at significantly higher income levels with monthly premiums ranging from \$0-\$180 based on family income.

Q: Are the benefits good? And, just as importantly, will my pediatrician accept this insurance?

A: The benefits are excellent, and cover basically everything necessary for a normally developing child, including hospitalizations, prescriptions, and doctor's visits. Virtually every pediatrician in our area accepts HMOs affiliated with Medicaid and CHP, as do a wide variety of specialists.

Q: Are there any differences in coverage between Medicaid and CHP?

A: Medicaid offers better coverage for babies requiring long term care, but for normal, healthy newborns, the differences are negligible.

Q: I've heard that there can be problems with getting CHP coverage for a newborn. What's the story with that?

A: The biggest difference between Medicaid and CHP is that Medicaid can be applied for in advance, and also covers most bills retroactively. CHP can only be applied for after the baby is already born, and coverage doesn't begin until 3-6 weeks after that.

Q: Three to six weeks after birth?! What happens with all of the hospital bills, doctors' visits, etc., from birth until six weeks?

A: Unfortunately, there's not much you can do. If you are not eligible for Medicaid, your choices are either to pay out of pocket expenses for the first few

weeks of the newborn's life, or to take out an insurance policy that covers your baby through you or your husband.

Q: I would never take the chance of leaving the baby without coverage. What if I get stuck with a \$20,000 bill from a stay in the NICU? I would prefer to find some sort of coverage that will last until I can get the baby onto CHP, even if it costs me more for the first couple of weeks. What are my options?

A: First of all, if you are being covered through your parents' insurance policy, there may be a clause that your baby is covered for the first 48 hours, so ask your insurance agent. Other than that, you can take out a policy for yourself or your husband through your school or employer. You also may be eligible for a policy through Healthy NY, a public insurance plan designed for higher income individuals who do not have access to group insurance policies.

Q: What if I can't get back onto my old insurance plan right away? Won't I get stuck paying for the new insurance plan for longer than it takes for the CHP application to be approved?

A: You might. That's the price you pay.

Q: Sounds like Medicaid is a much better bet. What's the likelihood that I'll be eligible for it?

A: Happily, Medicaid income guidelines for newborns are significantly higher than for kids over age 1. Young couples who are expecting their first child are very often still in yeshiva or college, and frequently qualify for Medicaid based on that higher income allowance. Even if you think that your income is too high based on your online research, it is worth your while to give us a call, since you may actually be eligible based on the guidelines.

Q: When should I contact your office to apply for Medicaid or CHP?

A: Sooner is better! Ideally, you should contact our office by your fourth or fifth month of pregnancy. This way, we have the leisure to figure out your best options, give you time to collect your documents, and send everything out with plenty of time to spare. If you are eligible for Medicaid, an advance application ensures that you get full coverage from birth (retroactive coverage may not cover doctor's visits), don't need to wait until the baby's birth certificate is issued, and continue coverage until the baby's first birthday without a stitch of paperwork. CHP applications cannot be submitted until after delivery, but you can at least get the preliminaries out of the way. Once the baby is born, the father can come in and take care of the rest of the CHP application, no birth certificate necessary.

Q: What if my baby is already due—or born!—and I haven't applied for insurance yet?

A: Unfortunately, you have a problem. Medicaid insurance applications take six weeks to process; CHP applications take three to six weeks. If you are not eligible for Medicaid, you can't fight your way to retroactive coverage—not for CHP, and not for private insurance. Regardless of your situation, you can contact our office at 516-791-4444 or SMiller@achiezer.org, and we'll do our utmost to help you make the best of the situation.

