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## Enrolling Children In Nevada Check-up

### The State Managed Medicaid for Children (CHIP)

The Affordable Care Act (ACA) mandates all health insurance issuers offering qualified health plans through the Federally Facilitated Marketplace (FFM) must offer a child-only plan at the same level of coverage. The plan is for individuals who have not turned 21 years old by the beginning of any new plan year.

All qualified Health Plans offered will cover pediatric dental and vision services.

If the household income is at or below 400% of the Federal Poverty Level (FPL) the child may qualify for federal subsidies or state financial assistance programs. Once a parent chooses the right plan for the child, the child is covered through the plan year and may start using the benefits based on the time of the enrollment.

The ACA allows all children up to the age of 26 the ability to remain on their parent's health insurance plan to help pay their medical costs. If the child has severe mental or medical issues, that child may be allowed to stay on the parent's plan beyond age 26. Upon application the system will check the information provided against the criteria which will help determine if the child qualifies for Child Health Insurance Program (CHIP), Medicaid, Advanced Premium Tax Credit (APTC) and/or Cost Sharing Reductions (CSR). All of these programs and subsidies may help parents pay for their children's medical care.



If your family size increases or your income decreases, you may requalify to the level of assistance you are eligible to receive based on the new information.

If you have a life event, you should contact me as soon as possible to see if you have adjustments to any APTC subsidy benefit.