

Eligibility and Enrollment

ELIGIBILITY

UnitedHealthcare does not decide if your child qualifies for the CHIP program. The Mississippi Division of Medicaid (DOM) makes that decision, based on factors such as whether the child:

- Lives in Mississippi.
- Does not have health coverage.
- Is younger than 19 years old.
- Is not eligible for Medicaid.
- Is a citizen of the United States or an eligible alien.
- Is not an inmate in a public institution or a patient in an institution for mental diseases.
- Has a family income of up to 200% of the federal poverty level.

Children eligible for Mississippi CHIP are assigned a 12-month certification period and remain eligible during this 12-month period or until the child:

- Becomes eligible for Medicaid.
- Moves out of the state.
- Dies.
- Turns 19 years old.
- Becomes covered under other creditable health insurance coverage.

If you have any questions about eligibility, please call the Division of Medicaid (DOM) at 1.866.635.1347.

ENROLLMENT

As indicated, your child's enrollment in the Mississippi CHIP program is for 12 months or until your child loses eligibility, whichever comes first. DOM will tell UnitedHealthCare the date your child is enrolled and his/her eligibility continues until DOM tells UnitedHealthCare the date your child will be disenrolled.

It is important that you tell DOM if your family moves. If you don't, DOM and UnitedHealthCare will not have your correct address. This will prevent you from receiving important information about your child's coverage and eligibility.

RECERTIFICATION

DOM will send you a letter when your child is due for an eligibility review. This letter will tell you what you need to do to renew your child's coverage for another year. If you have questions about the recertification process, contact DOM at 1.866.635.1347.

END OF COVERAGE

If your child is disenrolled from the CHIP program, his/her coverage will end on the last day of the month that his/her eligibility ends.

NON-DISCRIMINATION

UnitedHealthcare will not discriminate based on race, ethnicity, gender, sexual or affectional preference or orientation, age, religion, creed, color, national origin, ancestry, disability, health status or need for health services as of the effective date of coverage.

