

What if I have new Medicaid or CHIP coverage?

If you are now enrolled in your state [Medicaid](#) program or the [Children's Health Insurance Program \(CHIP\)](#), here are some things you need to know.

Questions about using your new Medicaid or CHIP coverage

Use the resources below for help with questions about Medicaid coverage, coverage in the Children's Health Insurance Program (CHIP), enrollment materials, benefits, and providers:

- For most questions, you should contact your state Medicaid or CHIP agency. Find contact information for your state [Medicaid](#) or [CHIP](#) agency. When you visit these pages, pick your state from the menu at the bottom.
- If you are enrolled in a health plan through Medicaid or CHIP, contact the member services phone number on your eligibility letter or on the back of your enrollment card. This information should also be available on your health plan's website or your state Medicaid or CHIP agency website.
- Talk to your doctor or pharmacist. They may also be able to answer questions about what services are covered.

Using emergency services: In an emergency, you should get care from the closest hospital that can help you. The law requires providers offering these services to examine you to determine if your medical condition is life threatening and provide you with medical care until your life is no longer in danger.

When to contact your state Medicaid or CHIP agency

Here are some examples of issues to take to your state Medicaid or CHIP agency:

- You didn't get an enrollment card and are not sure if you are covered

- You can't find a doctor in your area who will accept Medicaid or CHIP, or can't get an appointment
- You have questions about whether a service or product is covered
- You have a change in circumstance that may change whether you are eligible for Medicaid or CHIP (for example you get a job that will increase your income, one of your dependents reaches an age where they no longer qualify, or you get married or divorced)

Filling prescriptions on January 1: *If you need to fill a prescription and have not received your enrollment card yet, check to see if your pharmacy accepts Medicaid, CHIP, or your health plan. If they do, take your eligibility letter and prescription (or refill) to the pharmacy. They will try to fill it using the information in the letter or contact the health plan that day. If they don't have enough information, most pharmacies can give you enough medicine for **three days**. On January 2 you should call your Medicaid or CHIP agency or health plan's member services for help getting the rest of your medicine. If your pharmacy doesn't accept Medicaid, CHIP, or your health plan, call the number in your eligibility letter to find a pharmacy that you can use. You can usually find this information on the state Medicaid or CHIP agency website as well.*

I haven't received my enrollment card yet and I am not sure if I am covered. What should I do if I need care?

If you received a letter telling you that you have been enrolled in Medicaid or CHIP, but you haven't received an enrollment card from your state agency or from one of its health plans, you should still be able to get health care services. If you need care, show your provider a copy of your eligibility letter. Your provider can verify your enrollment when you go for care.

How do I find a doctor or pharmacist in my area that accepts Medicaid or CHIP?

There are several things you can do to find a health care provider:

- Ask your current doctor or pharmacist if they accept Medicaid, CHIP, or the health plan you selected. If you have been getting care from a provider that doesn't accept Medicaid, CHIP, or any of its health plans, you may be able to keep seeing that provider for a short time until you can find another provider, but you need to ask your state's Medicaid or CHIP program, or the health plan you selected.

- Most Medicaid and CHIP programs and health plans have websites that tell you what providers are available. Check your state [Medicaid](#) or [CHIP](#) agency's website. When you visit these pages, pick your state from the menu at the bottom.
- Call your state Medicaid or CHIP agency or your health plan's member services department for help. The phone number should be on your eligibility letter or on the back of your enrollment card. This information should also be available on your health plan's website or your state Medicaid or CHIP agency website.

Be sure to let your provider know that you are enrolled in Medicaid or CHIP, or give them the name of your health plan when you make an appointment for care. If you are having trouble getting an appointment to see a doctor, call your state Medicaid or CHIP agency or your health plan's member services department for help.

What if I am billed for a product or service that isn't covered by Medicaid or CHIP?

Whether you receive services through fee-for-service providers who participate in your state's Medicaid or CHIP program or you receive services through a private health insurance plan, you can ask them to reconsider paying the bill. This is called an appeal. Your state Medicaid or CHIP agency's website will have information on how to file an appeal or you can call your state agency or your health plan's member services number. They will help you with the appeals process.