



What Health Reform Means for Texas Children

Children already enrolled in CHIP/Children's Medicaid

- No change in coverage.
- CHIP has been extended until 2019. Funding has also increased for Texas to continue administer the program.
- Young people in foster care can remain in Medicaid (STAR Health Program) until their 26th birthday.

Children enrolled in private coverage

- Beginning in September 2010, both married and unmarried dependents can remain enrolled in their parents' private insurance up to their 26th birthday (unless the child can get coverage through his/her employer). This requirement will take effect at the next insurance renewal period.
- Beginning in 2014, children up to their 26th birthday can stay on their parent's employer plan even if they have an offer of coverage through their employer.
- Beginning in September 2010, recommended prevention and vaccination services will be covered without any deductibles or copayments.

Children with preexisting medical conditions

- Beginning in September 2010, new and existing employer plans cannot deny children because of preexisting conditions.
- Beginning in September 2010, insurance companies will not be allowed to place lifetime limits on what they will pay for your child's medical care.
- Beginning in September 2010, insurance companies will not be allowed to cancel the policies of sick children (except in the case of fraud).
- Beginning in September 2010, the annual benefit limits insurance companies can apply to plans will be restricted.
- After 2014 no annual limits will be allowed.

Children who do not qualify for CHIP/Children's Medicaid

- In 2014, families will be able to find affordable coverage through a health insurance exchange that will provide subsidies for the purchase of private plans.
- Undocumented children are not eligible for CHIP/Children's Medicaid nor will they be able to participate in the health insurance exchange.
- After 2014, all children who are U.S. Citizens or Legal Permanent Residents will be required to have health insurance. There will be exemptions for those in the lowest income levels, however most of these children should be eligible for Medicaid.
- Undocumented children will continue to have access to care through community health centers.
- Funding for the maintenance and expansion of community health centers nearly doubled.