

HOW CAN I GET MEDICAL COVERAGE OR HELP WITH MEDICAL BILLS?

Who qualifies for DSHS Medical Coverage?

The Department of Social and Health Services provides generally the fullest medical coverage, but only for certain categories of people who are in financial need. Those categories are:

- Children (for kids with countable incomes under 250% of the Federal Poverty Level)
- pregnant women
- disabled adults
- aged adults (65 and over)
- families eligible for (whether receiving or not) or recently eligible to receive Temporary Assistance to Needy Families (formerly AFDC) grants
- hospitalized persons

Under most of these categories you may get medical coverage for a period of time up to three months before you applied for assistance.

Some of the programs only cover some of your medical bills. Detailed rules about DSHS medical programs are in the Washington Administrative Code (WAC), in title 388. The WAC is available at the public library, the county law library, and other libraries in Washington State or you can read the DSHS WAC rules online at <http://www.leg.wa.gov/wac/>.

If you are denied medical assistance, you may appeal by asking for a fair hearing. Fill out a Fair Hearing Request at your local DSHS office or write to Office of Administrative Hearing, P.O. Box 42488, Olympia, WA 98504. You must ask for the hearing no later than 90 days from the date of the denial. You will get a notice of the time and date of the hearing in the mail.

Read our publication on [Representing Yourself at a Fair Hearing](#) to find out how to get information about your case, prepare for and go to a fair hearing. You may also get information about hearing from the Office of Administrative Hearings' web site at <http://www.oah.wa.gov>. For free legal advice about your case, you can call CLEAR at 1-888-201-1014.

What is the Basic Health Plan?

The Washington State Basic Health Plan (BHP) is a health insurance program covering basic medical needs (including limited mental health and chemical dependency treatment) where your monthly premium payment is based on your income. You must select a health plan (Group Health, Providence Health Plan, etc.).

The minimum insurance premium is \$10 per month for individuals, \$20 per month for couples. Most children under age 19 qualify for "BHP Plus," which is Medicaid coverage offered through BHP and no premium is charged for kids whose income is under 250% of the federal poverty level. Premiums for adults depend on income, age(s), and the managed care plan selected. Co-payments are required for many services. There is a limited number of subsidized slots, and

sometimes there is be a wait for adults to get in. (There are no waiting lists, premiums or co-payments for BHP Plus qualified children.)

For more information about BHP and an application, call 1-800-826-2444 or visit their web site at <http://www.basicealth.hca.wa.gov/>. The customer service number is 1-800-660-9840.

Hospital Charity Care

You may apply for charity care anytime before or after you receive hospital services. By state law, hospitals may not charge you for their services if your income is below 100% of the poverty level (see table below). They should reduce your charges according to their Charity Care Policy if your income is over the 100% poverty level but below 200% of the poverty level. Contact the hospital billing department to apply for charity care. The hospital may not try to collect the bill while you wait for a decision. If the hospital denies charity care, they must write to you and explain why you are denied and your right to appeal the denial. For detailed information about this program, please see our publication “Charity Care”: Medical Coverage For Hospital-Based Medical Services.

If you have complaints about the way the hospital handled your request or wish to appeal, contact Larry Hedrick at the State Department of Health, phone number (360) 236-4210.

FAMILY INCOME TABLE

Find your family size in the first column. Compare your monthly gross income to the numbers in that row to see how your income compares to the poverty level percents.

Official 2005 Federal Poverty Level (FPL) (All income amounts rounded up)¹

Family Size	Annual 100% FPL	Monthly 100% FPL	Monthly 200% FPL	Monthly 250% FPL
1	\$9,570	\$798	\$1,595	\$1,994
2	\$12,830	\$1,069	\$2,138	\$2,673
3	\$16,090	\$1,341	\$2,682	\$3,352
4	\$19,350	\$1,613	\$3,225	\$4,031
5	\$22,610	\$1,884	\$3,768	\$4,711
6	\$25,870	\$2,156	\$4,312	\$5,390
7	\$29,130	\$2,428	\$4,855	\$6,069
8	\$32,390	\$2,699	\$5,398	\$6,748
9	\$35,650	\$2,971	\$5,941	\$7,472
10	\$38,910	\$3,243	\$6,484	\$8,106

¹ "Income" means total cash receipts before taxes received from wages and salaries, welfare payments, Social Security payments, unemployment or disability benefits, strike benefits, child support, maintenance (alimony), and net earnings from business and investments. Changes in the income levels are made each April.

Community and Public Health Clinics

Check your local phone book for locations of public health clinics and community clinics. They provide free and low-cost health services.

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This publication provides general information concerning your rights and responsibilities. It is not intended as a substitute for specific legal advice.

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