

Find out how much you could pay for your child's health insurance

Keystone Health Plan East (KHPE) Children's Health Insurance Program (CHIP) coverage includes in-network coverage for:*

	Free CHIP: \$0	Low-cost CHIP 1: \$45 per child [†] Low-cost CHIP 2: \$88.42 per child [†] Low-cost CHIP 3: \$101.05 per child [†]	Full-cost CHIP: \$340.76 per child [†]
Deductible	No deductible	No deductible	No deductible
Primary Care Physician (PCP) Office Visits and Retail Health Clinic Visits No copay for well-child visits	\$0 copay per office visit	\$5 copay per office visit	\$15 copay per office visit
Specialist Office Visits Referrals required for Specialist Office Visits No copay for Behavioral Health and Substance Use services	\$0 copay per office visit	\$10 copay per office visit	\$25 copay per office visit
Preventive Care	\$0 copay per office visit	\$0 copay per office visit	\$0 copay per office visit
Routine Annual Physical Exams	\$0 copay per office visit	\$0 copay per office visit	\$0 copay per office visit
Outpatient Prescription Drugs	\$0 generic/\$0 brand	Retail (31-day supply): \$6 generic/\$9 brand Mail Order (90-day supply): \$12 generic/\$18 brand	Retail (31-day supply): \$10 generic/\$18 brand Mail Order (90-day supply): \$20 generic/\$36 brand
Dental Care, including medically necessary braces	\$0 copay per office visit	\$0 copay per office visit	\$0 copay per office visit
Routine Eye Exams, Refractions, and Eyeglasses, or Contact Lenses instead of eyeglasses	\$0 copay per office visit, once per calendar year	\$0 copay per office visit, once per calendar year	\$0 copay per office visit, once per calendar year
Urgent Care Center Visits	\$0 copay per office visit	\$10 copay per office visit	\$25 copay per office visit
Emergency Care Copay waived if admitted. Covered worldwide.	\$0 copay per visit	\$25 copay per visit	\$50 copay per visit
Hospital Services	Covered 100%	Covered 100%	Covered 100%

* Copay amounts apply when using in-network providers.

† Premiums effective 7/1/2021. The premium for three or more children is three times (3x) the per-child monthly premium.

This is only a summary. Please refer to the Plan Contract for more information.

Family size, income, and child's age will determine eligibility for free, low-cost, or full-cost Keystone HMO CHIP coverage.

Keystone HMO CHIP provides medical benefits through a large network of participating physicians and hospitals. United Concordia Dental provides benefits through a large network of participating dentists. Routine vision benefits are underwritten by KHPE and administered by Davis Vision, an independent company. KHPE utilizes an independent pharmacy benefits management (PBM) company, FutureScripts®, to manage the administration of its KHPE prescription drug program.

For more information, visit ibx.com/chip or call **1-888-335-3992 (TTY/TDD: 711)**.

