

APPLY TODAY!

Completing the application:

When sending in the application, be sure to include proof of income received within the last 30 days (current pay stubs, award letters, etc.)

Also, send proof of expenses for child support paid and child care paid while working.

Applications are available at:

- All Social Services offices
- Hospitals
- Schools
- Other community locations
- Or call: 1-800-305-3064

Visit us on the WEB at:

www.dss.sd.gov



A program provided by the South Dakota Department of Social Services,
printed October 2007.



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CHIP Information: 1-800-305-3064

Apply **TODAY** for a healthier **TOMORROW!**

The CHIP program is provided at no cost to reduce the number of uninsured children in South Dakota and to improve the quality of medical care for a **healthier tomorrow.**

Children can qualify for this program if they are within the income limits and **under the age of 19.**

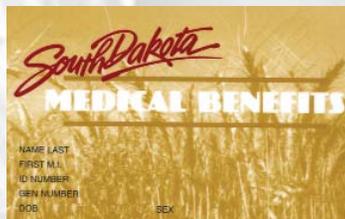
Services Available Include:

- Physician Services
- Hospital Services
- Vision Care
- Dental Care
- Prescription Drugs
- Medical, Dental and Vision Screening
- Chiropractic
- Mental Health
- Durable Medical Equipment
- Other Medical Services

Medical, dental and vision screenings help prevent problems from occurring (or keep health problems from becoming worse) and are important for children.

As a CHIP participant, you must choose a **Primary Care Provider (PCP)**, which is the doctor or clinic chosen by you or assigned to you to oversee your medical needs. Your caseworker will provide this list for you; you can choose one in your area or have one assigned to you. Along with this list, you will find a selection form for you to complete and return to your caseworker.

If you are eligible for CHIP services, you will receive an identification card. **You must show your ID Card before receiving any medical services.**



You should carry your card with you at all times. Failure to present your identification card is cause for payment denial. Payment for denied services may then be your responsibility.

When you receive a service covered by a provider (doctor, hospital, etc.), the provider submits a bill to the state for payment. The provider is paid directly. When the program makes payment for a covered service, that particular service is considered paid in full.

The provider **cannot** bill any remaining balance of a covered service to you, your family, your friends or the county.

If the service is not covered by the program, you may be responsible for payment in full. Your provider can tell you whether a service is covered.