



Cook County Health & Hospitals System

## CountyCare

Medicaid program for uninsured adults in Cook County

- [What is CountyCare?](#)
- [Who is eligible for CountyCare?](#)
- [How can I apply?](#)
- [What documents are required to apply for CountyCare?](#)
- [What services are covered?](#)
- [When does coverage start?](#)
- [How do I find out if I am accepted?](#)
- [Are all Medicaid doctors accepting CountyCare Patients?](#)

To email us a question or concern, please use our [Contact Request](#) form.

## What is CountyCare?

---

The State of Illinois and Cook County Health & Hospitals System will be operating a new Medicaid program for uninsured adults in Cook County called **CountyCare**. This is a Medicaid program through the Affordable Care Act (Healthcare Reform).

CountyCare is a Medicaid benefits program for adults. To be eligible, an individual must live in Cook County, be 19-64 years of age, be a legal immigrant for 5 years or more or a US citizen and have income within the program limits (\$14,856 for an individual and \$20,123 for a couple). Individuals must also have a Social Security Number or have applied for one. Individuals who are already eligible for Medicaid – children, parents, pregnant women, the aged, blind and disabled – cannot enroll in CountyCare. With CountyCare enrollment individuals will receive medical care from providers in the Cook County Health & Hospital System (CCHHS) and select community providers.

## Who is eligible for CountyCare?

---

To qualify for a **CountyCare Medical Card**, individuals must:

- Live in Cook County
- Be 19-64 years old
- Have income at or below 133% of the Federal Poverty Level (\$14,856 individual, \$20,123 couple – annually)
- Not be eligible for “state Plan” Medicaid (parent, pregnant, blind or receiving disability income)
- Not be eligible for Medicare
- Be a legal immigrant for five years or more or a US citizen
- Have a Social Security number or have applied for one

## How can I apply?

---

CountyCare is pre-enrolling potential members at this time. Beginning Monday, November 5, individuals can call 312-864-8200 or toll free (855 671-8883) to apply by phone between the hours of 8:00am to 8:00pm, Monday through Saturday. Individuals who apply by phone will provide all application information by phone to application assistance staff who will mail the applicant a signature page and a checklist indicating which verification documents should be returned to application assistants with a signed signature page. CountyCare will submit applications to the state to process.

In the future, individuals will be able to apply in person with application assistance staff located throughout the county health system.

## What documents are required to apply for CountyCare?

---

Individuals must supply certain documents to verify their identity, address, citizenship or immigration status and all sources of income they receive. Applicants should call 312-864-8200 to understand which documents are required for their situation.

## What services are covered?

CountyCare Services	
Advanced Practice Nurse services	Laboratory and x-ray services
Targeted Case Management	Medical supplies, equipment, prostheses and orthoses, and respiratory equipment and supplies
Emergency Services (includes poststabilization services)	Mental Health Services (including rehabilitation and clinic option)
EPSDT (for 19-21 year olds)	Nursing Facility Services (30 days) (covers post-hospitalization nursing home stays)
Family planning services and supplies	Podiatric Services (for diabetics)
FQHCs, RHCs and other Encounter rate clinic visits	Prescription Drugs
Home health agency visits	Physical, Occupational, Hearing and Speech Therapy Services
Hospice (and palliative)	Physician services
Hospital emergency room visits	Sub-acute alcoholism and substance use disorder services
Hospital inpatient services	Transportation – to secure Covered Services
Hospital ambulatory services	

## When does coverage start?

CountyCare expects to have its first members in January 2013.

## How do I find out if I am accepted?

---

Applicants will receive a notice by mail as to whether their application was approved or denied. Approved applicants will receive a medical card in the mail that they should carry with them at all times. They will also receive a packet of information explaining how the CountyCare program works.

## Are all Medicaid doctors accepting CountyCare patients?

---

No, only doctors that are part of the CountyCare network may accept CountyCare patients. When an individual enrolls in CountyCare, they will be asked to select a patient centered medical home site from a list of participating providers. Choices will include Cook County Health & Hospital System sites as well as some other community providers, such as community health centers.

### CountyCare (State of IL 1115 Waiver)

The State of Illinois and Cook County Health & Hospitals System will be operating a new Medicaid program for uninsured adults in Cook County called **CountyCare**. This is a Medicaid program through the Affordable Care Act (Healthcare Reform).

CountyCare will provide coverage for tens of thousands of currently uninsured patients, as CCHHS transforms into a patient-centered continuum of care. This transformation is changing the way that patients enter CCHHS, as they will be assigned intelligently (based on risk, complexity and need) to patient-centered medical homes instead of relying on the emergency department for basic services while waiting for new appointment availability.