Does Your Teen Need Health Coverage?

Children and Youth with Special Health Care Needs (CYSHCN)

The health care needs of adolescents are diverse. Some conditions are severe, while others are mild to moderate. It is important for all children to have timely health visits, including screenings. Early identification of special health care needs, which might require more frequent services and additional support are generally covered by most insurance plans. For more information visit: [http://cahpp.org/project/the-catalyst-center/](http://cahpp.org/project/the-catalyst-center/).

Yearly visits are important because medical, dental, or behavioral health problems can be discovered before your teen feels sick or develops a life threatening complication.

For more information:

Resources for Families -Bright Futures ([https://brightfutures.aap.org/families/Pages/Resources-for-Families.aspx](https://brightfutures.aap.org/families/Pages/Resources-for-Families.aspx))

Bright Futures Handouts for 15—17 Years and Early Adolescents ([https://brightfutures.aap.org/Bright%20Futures%20Documents/D.Adol.PH.15-17yr.pdf](https://brightfutures.aap.org/Bright%20Futures%20Documents/D.Adol.PH.15-17yr.pdf))

([https://brightfutures.aap.org/Bright%20Futures%20Documents/D.Adol.PH.EA.pdf](https://brightfutures.aap.org/Bright%20Futures%20Documents/D.Adol.PH.EA.pdf))

For Families: The Office of Adolescent Health ([https://www.hhs.gov/ash/oah/tag/for-families.html](https://www.hhs.gov/ash/oah/tag/for-families.html))


 Teens Need Yearly Checkups (a covered health insurance benefit)

- Physical exams
- Nutrition checks
- Dental care
- Vision Screens
- Immunizations
- Mental/behavioral health and other wellness screenings
- Information on how to stay healthy

This publication was supported by the Nevada Division of Public and Behavioral Health through Grant Number BO4MC29352 from the Health Resources and Services Administration (HRSA). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of HRSA.
Who can I see to receive health care?

- You will need to find a provider who accepts your insurance.
- Call the number on your insurance card to find a provider who takes your insurance.
- Always bring your insurance card and shot record to each appointment.
- Remember to renew your plan every year.

The Nevada Office of Consumer Health Assistance, also referred to as GovCHA, assists Nevadans in resolving their health care related issues, including health plan issues. Call: 1-888-333-1597

Nevada Insurance Types

**Medicaid** – Your family may be eligible if your household income qualifies, but eligibility varies by family size. For example, you can make up to $2,795 per month for a household of four. Enrollees are not required to pay any charges for covered services.

**Nevada Check-Up** – If your family income is too high for Medicaid, you may qualify for Nevada Check-Up. The only cost to enrollees is a quarterly premium, determined by family size and income, ranging from $25-$80 per family, not per child. Enrollees are not required to pay any charges for covered services.

**Individual/family** – If your family income makes you ineligible for Medicaid or Nevada Check-Up, you may qualify for other insurance coverage. Most plans have monthly premiums, copayments, and other charges for covered services.

---

**Check types of coverage for which you can apply:**

For health insurance information visit a Division of Welfare and Supportive Services office near you: [https://dwss.nv.gov](https://dwss.nv.gov)

[https://www.nevadahealthlink.com/](https://www.nevadahealthlink.com/) Call: 1-855-768-5465


TTY Line for those who are deaf, hard of hearing, or speech disabled: Call: 1-855-889-4325