

Žmci 'cf'nci f'VX]XFYb'UFY'Y][JV'Y'Zcf'A YX]WU]X'cf'7< Ð'UbX'mci ŃŃY'Y][JV'Y'Zcf'\YU'h'Wčj YfU[Y'Zca Southern Methodist University, your state may have a premium assistance program that can help pay for coverage, using funds from their A YX]WU]X'cf'7< Ð'dfc[fUa g"Žmci 'cf'nci f'VX]XFYb'UFYb'ŃŃY'Y][JV'Y'Zcf'A YX]WU]X'cf'7< ÐŽmci 'k cbŃŃVY'Y][JV'Y'Zcf'h\YgY' premium assistance programs, but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit _____.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a State listed on the following page, contact your State Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office, dial _____, or visit _____ to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your Ya d'cnYf'd'Ubžmci f'Ya d'cnYf'a i ghiU'ck 'nci 'tc Ybfc'']b'nci f'Ya d'cnYf'd'Ub']Zmci 'UFYb'ŃŃU'fYUXmYbfc''YX''H\]g]g'W'YX'U' ĪgdYV]U'Ybfc''a Ybh' 'cddcfhi b]mžUbX'

_____ . If you have questions about enrolling in your employer plan, contact the Department of Labor at _____ or call _____.

