

**ALBUQUERQUE PUBLIC SCHOOLS  
HEALTH AND WELLNESS DEPARTMENT**



**MEDICAID SCHOOL BASED SERVICES  
Alice and Bruce King Educational Complex  
6400 Uptown Blvd. NE, Suite 305W**

**FREE OR LOW COST HEALTH INSURANCE FOR CHILDREN**

Many families in New Mexico qualify for **FREE** health insurance for their children from birth to age 19. Even more families can qualify for low cost insurance, consisting of minimal co-pay at the time of your child's visit. In many cases, your child may qualify for an emergency card that would entitle them to obtain care while you wait for the application to be processed. To qualify for Medicaid, your child must be a U. S. citizen or legal resident and your family's gross monthly income must meet the following criteria:

Household Size	Federal Poverty Income Guidelines	
	<u>185%</u>	<u>235%*</u>
1-----	\$1,723-----	\$2,188
2-----	\$2,333-----	\$2,963
3-----	\$2,944-----	\$3,739
4-----	\$3,554-----	\$4,514
5-----	\$4,165-----	\$5,290
6-----	\$4,775-----	\$6,065
7-----	\$5,386-----	\$6,841
8-----	\$5,996-----	\$7,616
	For each additional person add:	
	\$610-----	\$775

**Guidelines effective April 1, 2012 through March 31, 2013**

*\* Do not have existing health insurance or have not voluntarily dropped insurance within the last 6 months.*

**AVAILABLE BENEFITS:**

- Doctor and Dental visits
- School and Sport Physicals
- Vision and Hearing Exams
- Medicine Prescriptions
- Eyeglasses
- Hospital Care
- Mental Health Counseling
- Well Child Check-Up
- Immunizations

**Call for an Appointment**

**ELEANOR  
HERNANDEZ  
855-9820  
(Bilingual)**

**THE FOLLOWING DOCUMENTS ARE  
REQUIRED TO APPLY FOR MEDICAID:**

- If one or both parents are working, proof of last 4 weeks income. If parents are not working, proof of how rent and utilities are paid.
- Proof of citizenship for each applicant. This may include:
  - a. Birth Certificate
  - b. US Passport
  - c. Certificate of Citizenship
  - d. Certificate of Naturalization
- Picture ID of parent/guardian and child
- Child's Social Security Number
- Proof of other medical insurance, if applicable
- Proof of childcare expense, if applicable