

ALBUQUERQUE PUBLIC SCHOOLS  
Student, Family & Community Supports Division



MEDICAID SCHOOL BASED SERVICES  
Alice and Bruce King Educational Complex  
6400 Uptown Blvd. NE, Suite 380W

## FREE OR LOW COST HEALTH INSURANCE FOR FAMILIES & STUDENTS

Because of the recent Medicaid expansion in New Mexico, many families in Albuquerque now qualify for **FREE or LOW COST HEALTH INSURANCE**. If there is an urgent need, your child may qualify for an emergency card that would entitle them to obtain care while you wait for the full Medicaid application to be processed. (We can enroll anyone, including adults, in long term Medicaid at APS, but cannot give adults emergency cards.) To qualify for Medicaid, you must be a legal resident and your family's gross monthly income must meet certain criteria. *(Flip the sheet over for full details regarding income guidelines for you and/or your family.)*

### 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
- APS School Based Health Centers
- Value added services from Managed Care providers

**CALL US TODAY TO  
PRE-QUALIFY OR TO  
SCHEDULE AN  
APPOINTMENT!**



**CRISTINA ALMANZA  
(Bilingual)**

**855-9820**

**BRIAN BOLDING**

**855-5261**

**The following documents will  
make enrolling faster:**

- Proof of income (if applicable) for the head of household, for the past month.
- Proof of address (utility bill or lease with your name listed.)
- Proof of citizenship for each applicant. This may include:
  - a. Birth Certificate
  - b. US Passport
  - c. Cert of Citizenship
  - d. Cert of Naturalization
- Picture ID of parent/guardian
- Proof of other insurance (if applicable.)
- Proof of unpaid medical expenses for the past 3 months (if applicable.)
- Social Security card (for all those applying.)


Did you know? ...*We take walk-in appointments daily (Mon-Fri) from 7 am-3 pm!* We are located at APS City Center, right across from the Uptown Transit Center off Louisiana. (Please call ahead if you want to make sure we will be available.) We are in the west tower, third floor. Enter the Medicaid office. Just ring the bell in front and we'll be right with you. Oh, and don't forget to bring all your proof documents for faster processing.

*Have a quick question or want to pre-qualify? Feel free to email us!*

[brian.bolding@aps.edu](mailto:brian.bolding@aps.edu)

[cristina.almanza@aps.edu](mailto:cristina.almanza@aps.edu)

For your convenience, here is the HSD income guideline sheet for all New Mexico Medicaid applicants. Your income (as head of household) will need to fall into one of these categories below. Calculate your family household size (including yourself) and check out the guidelines below to see if you qualify:

 <b>AFFORDABLE CARE MEDICAID PROGRAMS</b> <b>Federal Poverty Guidelines (FPL)</b> <b>Effective 4/1/15 – 3/31/16</b>																																																												
<b>CATEGORY 100 – Coverage for Adults</b> <ul style="list-style-type: none"> <li>Alternative Benefit Coverage</li> <li>Income must be under 133% FPL</li> <li>No resource standard</li> <li>No Medicare</li> </ul> <table border="1"> <thead> <tr> <th>HOUSEHOLD SIZE</th> <th>MONTHLY INCOME</th> </tr> </thead> <tbody> <tr><td>1</td><td>\$ 1,305</td></tr> <tr><td>2</td><td>\$ 1,766</td></tr> <tr><td>3</td><td>\$ 2,227</td></tr> <tr><td>4</td><td>\$ 2,688</td></tr> <tr><td>5</td><td>\$ 3,149</td></tr> <tr><td>6</td><td>\$ 3,610</td></tr> <tr><td>7</td><td>\$ 4,071</td></tr> <tr><td>8</td><td>\$ 4,532</td></tr> <tr><td>+1</td><td>\$ 461</td></tr> </tbody> </table>	HOUSEHOLD SIZE	MONTHLY INCOME	1	\$ 1,305	2	\$ 1,766	3	\$ 2,227	4	\$ 2,688	5	\$ 3,149	6	\$ 3,610	7	\$ 4,071	8	\$ 4,532	+1	\$ 461	<b>CATEGORY 301 – Pregnancy Services Only</b> <ul style="list-style-type: none"> <li>Pregnancy Services</li> <li>Income must be under 250% FPL</li> <li>2 months post partum</li> <li>No resource standard</li> </ul> <table border="1"> <thead> <tr> <th>HOUSEHOLD SIZE</th> <th>MONTHLY INCOME</th> </tr> </thead> <tbody> <tr><td>2</td><td>\$ 3,319</td></tr> <tr><td>3</td><td>\$ 4,186</td></tr> <tr><td>4</td><td>\$ 5,053</td></tr> <tr><td>5</td><td>\$ 5,919</td></tr> <tr><td>6</td><td>\$ 6,786</td></tr> <tr><td>7</td><td>\$ 7,653</td></tr> <tr><td>8</td><td>\$ 8,519</td></tr> <tr><td>+1</td><td>\$ 866</td></tr> </tbody> </table>	HOUSEHOLD SIZE	MONTHLY INCOME	2	\$ 3,319	3	\$ 4,186	4	\$ 5,053	5	\$ 5,919	6	\$ 6,786	7	\$ 7,653	8	\$ 8,519	+1	\$ 866	<b>5% DISREGARD - Amount Disregarded when Applicable</b> <ul style="list-style-type: none"> <li>Category 100</li> <li>Category 200 (only if Medicare eligible)</li> <li>Category 300</li> <li>Category 301</li> <li>Category 400</li> <li>Category 420</li> </ul> <table border="1"> <thead> <tr> <th>HOUSEHOLD SIZE</th> <th>MONTHLY DISREGARD</th> </tr> </thead> <tbody> <tr><td>1</td><td>\$ 49</td></tr> <tr><td>2</td><td>\$ 66</td></tr> <tr><td>3</td><td>\$ 83</td></tr> <tr><td>4</td><td>\$ 101</td></tr> <tr><td>5</td><td>\$ 118</td></tr> <tr><td>6</td><td>\$ 135</td></tr> <tr><td>7</td><td>\$ 153</td></tr> <tr><td>8</td><td>\$ 170</td></tr> <tr><td>+1</td><td>\$ 17</td></tr> </tbody> </table>	HOUSEHOLD SIZE	MONTHLY DISREGARD	1	\$ 49	2	\$ 66	3	\$ 83	4	\$ 101	5	\$ 118	6	\$ 135	7	\$ 153	8	\$ 170	+1	\$ 17
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<b>CATEGORY 200 – Parent Caretaker</b> <ul style="list-style-type: none"> <li>Full Medicaid</li> <li>Income must be under fixed standard</li> <li>Household must have a relative child in household</li> <li>No resource standard</li> </ul>	<table border="1"> <thead> <tr> <th>HOUSEHOLD SIZE</th> <th>MONTHLY INCOME</th> </tr> </thead> <tbody> <tr><td>1</td><td>\$ 451</td></tr> <tr><td>2</td><td>\$ 608</td></tr> <tr><td>3</td><td>\$ 765</td></tr> <tr><td>4</td><td>\$ 923</td></tr> <tr><td>5</td><td>\$ 1,080</td></tr> <tr><td>6</td><td>\$ 1,238</td></tr> <tr><td>7</td><td>\$ 1,395</td></tr> <tr><td>8</td><td>\$ 1,553</td></tr> <tr><td>+1</td><td>\$ 158</td></tr> </tbody> </table>	HOUSEHOLD SIZE	MONTHLY INCOME	1	\$ 451	2	\$ 608	3	\$ 765	4	\$ 923	5	\$ 1,080	6	\$ 1,238	7	\$ 1,395	8	\$ 1,553	+1	\$ 158	<b>CATEGORY 300 – Full Coverage for Pregnant Women</b> <ul style="list-style-type: none"> <li>Full Medicaid</li> <li>Income must be under Standard of Need</li> <li>2 months post partum</li> <li>No resource standard</li> </ul>																																						
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<b>Category 400 - Medicaid for Children</b> <ul style="list-style-type: none"> <li>Full Medicaid</li> <li>Children under 19 years of age</li> <li>Income under the following FPL: <ul style="list-style-type: none"> <li>Children ages 0-5 -----0%-240%</li> <li>Children ages 6-18-----0%-190%</li> </ul> </li> <li>No resource Standard</li> <li>Eligible even if children have health insurance or have voluntarily dropped insurance</li> </ul>	<table border="1"> <thead> <tr> <th rowspan="2">Household Size</th> <th colspan="2">Monthly Gross Income</th> </tr> <tr> <th>240%</th> <th>300%</th> </tr> </thead> <tbody> <tr><td>1</td><td>\$2,354</td><td>\$2,943</td></tr> <tr><td>2</td><td>\$3,186</td><td>\$3,989</td></tr> <tr><td>3</td><td>\$4,019</td><td>\$5,023</td></tr> <tr><td>4</td><td>\$4,850</td><td>\$6,063</td></tr> <tr><td>5</td><td>\$5,682</td><td>\$7,103</td></tr> <tr><td>6</td><td>\$6,515</td><td>\$8,143</td></tr> <tr><td>7</td><td>\$7,346</td><td>\$9,183</td></tr> <tr><td>8</td><td>\$8,178</td><td>\$10,223</td></tr> <tr><td>+1</td><td>\$832</td><td>\$1,040</td></tr> </tbody> </table>	Household Size	Monthly Gross Income		240%	300%	1	\$2,354	\$2,943	2	\$3,186	\$3,989	3	\$4,019	\$5,023	4	\$4,850	\$6,063	5	\$5,682	\$7,103	6	\$6,515	\$8,143	7	\$7,346	\$9,183	8	\$8,178	\$10,223	+1	\$832	\$1,040																											
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<b>Category 420 - Children's Health Insurance Program (CHIP)</b> <ul style="list-style-type: none"> <li>Full Medicaid</li> <li>Income under the following FPL: <ul style="list-style-type: none"> <li>Children ages 0-5 -----240%-300%</li> <li>Children ages 6-18-----190%-240%</li> </ul> </li> <li>Do <b>NOT</b> have existing insurance</li> <li>Co-payments on doctor visits, prescriptions, etc.</li> <li>Native American children do not make co-payments</li> </ul>																																																												

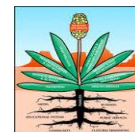
MAD 222 Revised 04/01/2015

\*A 5% disregard may also apply to the above totals. If you do not currently qualify for Medicaid based on the HSD guidelines, please feel free to contact us here at APS Medicaid to see if you qualify for other options relating to the New Mexico Health Insurance Marketplace (NMHIX).



**APS MEDICAID ENROLLMENT PROJECT.**

**HEALTHY STUDENTS, HEALTHY FAMILIES.**



**855-5261 (English) / 855-9820 (Spanish)**