



**PARENTS: DOES YOUR CHILD HAVE HEALTH INSURANCE?  
IF THE ANSWER IS "NO", THERE ARE LOW/NO COST  
HEALTH COVERAGE PROGRAMS AVAILABLE.**

**Enroll.** Families with Medi-Cal must report changes within 10 days of the change.  
Families with Covered California must report changes within 30 days.

**Get Care.**

**Renew.**

Health Coverage Options								Enroll.			
<p><b>Medi-Cal:</b></p> <ul style="list-style-type: none"> <li>* Children, foster youth, pregnant women, adults, US citizens, and immigrants (including those with DACA status) may be eligible for no- or low-cost Medi-Cal.</li> <li>* Medi-Cal covers immunizations, checkups, specialists, vision and dental services, and more for children and youth at no- or low-cost.</li> <li>* Medi-Cal enrollment is available year round.</li> </ul>				<p><b>Covered California:</b></p> <ul style="list-style-type: none"> <li>* Covered California is where legal residents of California can compare quality health plans and choose the one that works best for them.</li> <li>* Based on income and family size, many Californians may qualify for financial assistance.</li> <li>* Enroll during Open Enrollment or any time you experience a life-changing event, like losing your job or having a baby. You have 60 days from the event to complete enrollment.</li> </ul>				<p>Contact your health office staff at your students school site. Or On the Health Information Exchange Consent form check the box that says 'My children do not have health insurance and I need more information.' A SDUSD CERTIFIED ENROLLMENT CLERK WILL CALL TO ASSIST YOU.</p>			
<p>* Undocumented families visit: <a href="http://www.allinforhealth.org/undocumented">www.allinforhealth.org/undocumented</a> Immigration status information is kept private, protected, and secure. It will not be used by any immigration agency to enforce immigration laws, but only to determine eligibility for health programs.</p>								Get Care.			
Federal Poverty Guidelines (coverage year 2022)											
in Household	100% FPL	138% FPL	150% FPL	200% FPL	250% FPL	266% FPL	400% FPL	<ul style="list-style-type: none"> <li>* Find a primary care doctor in your network.</li> <li>* Schedule an annual check-up for you and your family.</li> <li>* Make sure to take your child to the dentist.</li> <li>* Pay your monthly premium if your plan requires it.</li> </ul>			
1	\$ 12,880	\$ 18,755	\$ 19,320	\$ 25,760	\$ 32,200	\$ 36,150	\$ 51,520				
2	\$ 17,420	\$ 25,268	\$ 26,130	\$ 34,840	\$ 43,550	\$ 48,705	\$ 69,680				
3	\$ 21,960	\$ 31,782	\$ 32,940	\$ 43,920	\$ 54,900	\$ 61,260	\$ 87,840				
4	\$ 26,500	\$ 38,295	\$ 39,750	\$ 53,000	\$ 66,250	\$ 73,815	\$ 106,000				
5	\$ 31,040	\$ 44,809	\$ 46,560	\$ 62,080	\$ 77,600	\$ 86,371	\$ 124,160				
6	\$ 35,580	\$ 51,323	\$ 53,370	\$ 71,160	\$ 88,950	\$ 98,926	\$ 142,320				
7	\$ 40,120	\$ 57,836	\$ 60,180	\$ 80,240	\$ 100,300	\$ 111,481	\$ 160,480				
8	\$ 44,660	\$ 64,350	\$ 66,990	\$ 89,320	\$ 111,650	\$ 124,036	\$ 178,640				
<p style="text-align: center;"><b>Please contact your school health office staff for more information.</b></p> <p style="text-align: center;"><b>To contact the SDUSD Certified Enrollment Clerk directly, please call (619) 571-3332 or (619) 665-0619.</b></p>								Renew.			
								<ul style="list-style-type: none"> <li>* Medi-Cal must be renewed every year.</li> <li>* Health plans through Covered California must also be renewed every year.</li> </ul>			