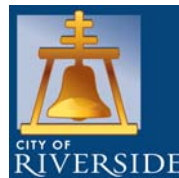


# YOUR CHILD MAY BE ELIGIBLE FOR NO OR LOW COST HEALTH INSURANCE!



## **Medi-Cal:**

Families of four with an annual income of up to \$22,056 may qualify. Age covered is birth to 21 years.

## **Healthy Families:**

Families of four with an Annual income of up to \$55,128 may qualify. Age covered is birth to 19 years.

## **Healthy Kids:**

Families with incomes up to 300% of the Federal Poverty Level and ineligible for public programs may qualify. Age covered is 0 to 18 years.

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## **WANT MORE INFORMATION OR TO MAKE AN APPOINTMENT TO ENROLL YOUR CHILD?**

Complete and return this form in the mail. Please fold the form and staple or tape together.

No stamp is necessary.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Best time to call: \_\_\_\_\_ a.m. and/or \_\_\_\_\_ p.m.

- Yes or  No: Does your child have private health insurance, Healthy Families, Medi-Cal, or Healthy Kids?
- Yes or  No: If no, would you like someone to call you with more information about insurance options and how to enroll your eligible children?

**STAPLE HERE**

**STAPLE HERE**