HEALTH CARE AUTHORITY

Women, Children, & Family Medicaid Categories

Federal Poverty Level (FPL)

Effective 4/1/26 – 3/31/27

Category 029 - Family Planning

- Family Planning Services only
- Income must be under 250% FPL
- No Managed Care Organization (MCO)
- No pregnancy at new application

Category 031 – Newborn Medicaid

- 13 months of full Medicaid beginning the first day of the birth month if:
- The newborn is born to a mother receiving New Mexico Medicaid at the time of birth (including retro-active Medicaid and EMSNC)
- A Notification of Birth (NOB) MAD 313 form may act as an application, if submitted to the Health Care Authority (HCA) by a Medicaid provider
- The infant continues to reside in New Mexico

Category 100 - Other Adults

- Alternative Benefit Package
- Income must be under 133% FPL
- No Medicare or Medicare entitlement
- No Pregnancy at new application

Category 200 - Parent Caretaker

- Full Medicaid
- Income must be under the Fixed Standard
- Household must have a relative child in the home under the age of 18 (5th degree of relation if not the parent)

Category 300 - Pregnant Women

- Full Medicaid
- Income must be under the Fixed Standard
- 12 months post-partum period

Category 301 - Pregnancy Related Services

- Full Medicaid
- Income must be under 250% FPL
- 12 months post-partum period

Categories 400, 401, 402, 403 - Children's Medicaid

- Full Medicaid for children up to age 19
- Eligible even if children have other health insurance or have voluntarily dropped insurance
- Income must be under the following FPL:
  - 400 Children 0 – 5, 0% - 200%
  - 401 Children 6 – 18, 0% - 138%
  - 402 Children 0 – 5, 200% - 240%
  - 403 Children 6 – 18, 138% - 190%

Categories 420, 421 - Children's Health Insurance Program (CHIP)

- Full Medicaid for children up to age 19
- No other health insurance
- No co-payments
- Income must be under the following FPL:
  - 420 Children 0 – 5, 240% - 300%
  - 421 Children 6 – 18, 190% - 240%

Household Size	Fixed Standard	100%	133%	138%	190%	200%	235%	240%	250%	300%	5% of 100% FPL Disregard When Applicable
1	$451	$1,330	$1,769	$1,836	$2,527	$2,660	$3,126	$3,192	$3,325	$3,990	$67
2	$608	$1,804	$2,399	$2,489	$3,427	$3,607	$4,238	$4,328	$4,509	$5,410	$90
3	$765	$2,277	$3,028	$3,142	$4,326	$4,554	$5,351	$5,464	$5,692	$6,830	$114
4	$923	$2,750	$3,658	$3,795	$5,225	$5,500	$6,463	$6,600	$6,875	$8,250	$138
5	$1,080	$3,224	$4,288	$4,449	$6,125	$6,447	$7,575	$7,736	$8,059	$9,670	$161
6	$1,238	$3,697	$4,917	$5,102	$7,024	$7,394	$8,688	$8,872	$9,242	$11,090	$185
7	$1,395	$4,170	$5,547	$5,755	$7,923	$8,340	$9,800	$10,008	$10,425	$12,510	$209
8	$1,553	$4,644	$6,176	$6,408	$8,823	$9,287	$10,912	$11,144	$11,609	$13,930	$232
+1	$158	$474	$629	$653	$900	$947	$1,112	$1,136	$1,184	$1,420	$24

- *COE 400,402, & 420, offer continuous eligibility up to age six*
- *COE 402, 403, the 5% FPL disregard applies only when other health insurance exists for the applicant*
- *COE 200, the 5% FPL disregard applies only if age 65 and above **OR** Medicare eligible*
- *No resource standard for MAGI Medicaid categories*