

LPCSC 100% Campaign: School Health Insurance Enrollment



HEALTH INSURANCE

For Children & Parents

Enroll at your school!

LaPorte Community School Corporation has partnered with **Covering Kids & Families of LaPorte County** to assist children and parents in applying for **FREE & LOW-COST HEALTH INSURANCE**.

If your household income falls at or below the income limits on this chart, your family may qualify:

Household size	Yearly	Monthly	Weekly
1	\$28,725	\$2,394	\$552
2	\$38,775	\$3,231	\$745
3	\$48,825	\$4,069	\$938
4	\$58,875	\$4,906	\$1,132
5	\$68,925	\$5,744	\$1,325
6	\$78,975	\$6,581	\$1,518
7	\$89,025	\$7,419	\$1,712
8	\$99,075	\$8,256	\$1905
Families larger than 8 members add the listed amount for each additional person:	add \$10,050 for each additional person	add \$838 for each additional person	Add \$193 for each additional person

Above the income limit? No worries, you can still apply for other affordable options. Contact us today!

By completing this form I _____ (initials here) acknowledge that Covering Kids and Families of LaPorte County has permission to use the below information to contact me regarding health insurance enrollment.

RETURN TO: School Nurse OR FAX TO: 219-809-9042

Parent/Guardian Name: _____ Insured by: Medicaid Other None

Mailing Address: _____

Phone: _____ Alternate Phone: _____ Date: _____

Do your children receive free or reduced lunch? Yes / No

Call 219-877-4292

Email nakia@healthycommunities|pc.org

Fax 219-809-9042

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