**Do you have health insurance?**

- **Yes**
  - **Yay! Private or Medi-Cal?**
    - Copy of health insurance card

- **No**
  - **Are you a DACA student?**
    - **Yes**
      - **Medi-Cal: Need PRUCOL Form**
    - **No**
      - **Are you claimed as a dependent on a parent or guardian’s taxes?**
        - **Yes**
          - **Medi-Cal can enroll all year round into County based system**
        - **No**
          - **Unsure**
            - Talk to parent or guardian

  - **Unsure**
    - Check in with parent/guardian

  - **I don’t know**
    - Talk to parent or guardian

**Significant Life Events** include:
- lose insurance
- getting married
- having a baby
- moving to CA

**Medi-Cal**:
- $16,105 family of 1 OR
- Covered CA: >$16,105 family of 1

**Medi-Cal can enroll all year round into County based system**

**Covered CA can only enroll during Nov-Feb or because of significant life event**

**What is the income and how many people are in your family?**

- **Yes**
  - **What is the income of the entire family and number of people on taxes?**
    - **Medi-Cal: <$16,105 family of 1 OR Covered CA: >$16,105 family of 1**

- **No**
  - **Medi-Cal can enroll all year round into County based system**