Categories of Eligibility (COE):

Supplemental Security Income Related
001-SSI-Aged and Medicaid Extension-Aged
003-SSI-Blind and Medicaid Extension-Blind
004-SSI-Disabled and Medicaid Extension-Disabled

CYFD Children
014-Refugee Foster Care
017-Subsidy Adoption Other States Placed in NM Title IV-E
037-Subsidy Adoption Title IV-E
046-Foster Care Child Out of NM Title IV-E (prior appr)
047-Subsidy Adoption Out of NM Title IV-E (prior appr)
066-Foster Care Title IV-E
086-Foster Care Child From Another State Placed in NM

Refugees and Repatriates
018-Repatriates (cash & medical assistance)
019-Refugee (cash & medical assistance)
059-Refugee (spend down)
049-Refugee (Medical Assistance Only)

Transitional Medicaid
027-Post Closure-Eligible 4 Months
028-Transitional Medicaid
029-Family Planning

Qualified Medicare Beneficiary
041-QMB-Age 65 and Under
044-QMB-Under Age 65

Breast and Cervical Cancer
052/1-Breast and Cervical Cancer
052/3-Preventive Eligibility for Breast and Cervical Cancer

Working Disabled
074-Working Disabled

Institutional Care
081-Institutional Care-Aged
083-Institutional Care-Blind
084-Institutional Care-Disabled

Home & Community Based Waiver
090-HCBW-AIDS
091-HCBW-Handicapped & Elderly
092-HCBW-Brain Injury
093-HCBW-Handicapped & Elderly (Blind)
094-HCBW-Medically Handicapped-Disabled

Developmentally Disabled
096-HCBW-Developmentally Disabled

Other Adult Group/Expansion
100-1-Other Adults
100-3-Other Adults (Presumptive)

Parents and Caretakers (Non Expansion Adults)
200/1-Parents/Caretaker
200/3-Parents/Caretaker (Presumptive)

Pregnant Women
300-1-Full Medicaid for Pregnant Women
300-3-Full Medicaid for Pregnant Women (Presumptive)
301-1-Pregnancy-Related Only
301-3-Pregnancy-Related Only (Presumptive)
303-Medical Assistance-Pregnant Women
303/1-Pregnancy Related Services Only
303/3-Presumptive Eligibility for Pregnant Women

Medicare Premium Only (SLIMB & QI)
042-Qualifying Individuals
045-Spec Low Income Medicare Ben
050-Qualifying Ind Part A Premium

Notes:
1. Children are defined as any enrollee less than age 21.
2. These reports reflect an unduplicated number of enrollees. For those enrollees who have more than one eligibility COE open in a month, the enrollee's COE is based on the following hierarchy:
   a. Expansion (COE 100)
   b. Refugees/Repatriates (COEs 018, 019, 049, 059)
   c. Institutional Care ABD (COEs 081, 083, 084)
   d. Breast and Cervical Cancer (COE 032)
   e. WDI (COE 074)
   f. Pregnancy (COE 300s)
   g. Other Kid categories (COEs 031, 032, 071, 036)*
   h. Children (COE 400s)
   i. JUL (COE 072)
   j. Parents/Caretakers (COE 200)
   k. COE 030, 035, 041, 044,027, 028, 029
   l. COE 042, 045, 050

Children, including CHIP and not in any other category
400/1-Children's Medicaid (0% up to 200% FPL/Age 0-5)
400/3-Children's Medicaid (0% up to 200% FPL/Age 0-5 (Presumptive)
401/1-Children's Medicaid (05 up to 138% FPL)/Age 6-19
401/3-Children's Medicaid (05 up to 138% FPL)/Age 6-19 (Presumptive)
402/1-Children's Medicaid (200% up to 240% FPL/Age 0-5
402/3-Children's Medicaid (200% up to 240% FPL/Age 0-5 (Presumptive)
403/1-Children's Medicaid (138% up to 190% FPL)/Age 6-19
403/3-Children's Medicaid (138% up to 190% FPL)/Age 6-19 (Presumptive)
420/1-CHIP Medicaid (240% to 300% FPL/CHIP kids)/Age 0-5
420/3-CHIP Medicaid (240% to 300% FPL/CHIP kids)/Age 0-5 (Presumptive)
421/1-CHIP Medicaid (190% to 240% FPL/CHIP kids)/Age 6-19
421/3-CHIP Medicaid (190% to 240% FPL/CHIP kids)/Age 6-19 (Presumptive)
031-Newborns
032-133% of Poverty Kids
032Q-133% of Poverty Kids [Children 0-5]
071/1-Y-Children's Health Insurance Program (CHIP)
071/3-Pregnancy Related Services Only
072-Newborns
072-Non-TANF age <21

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   h. Children (COE 400s)
   i. JUL (COE 072)
   j. Parents/Caretakers (COE 200)
   k. COE 030, 035, 041, 044,027, 028, 029
   l. COE 042, 045, 050

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