



**COLORADO**  
 Department of Health Care  
 Policy & Financing

## CHILD HEALTH PLAN *PLUS* Monthly Maximum Income Guidelines Effective April 1, 2026

Poverty Level	143-156% F-	157-159% F+	160-170% G-	171-185% G+	186-200% J	201-213% K	214-225% L	226-235% M	236-260% O
Family Size 1	1890 - 2075	2076 - 2115	2116 - 2261	2262 - 2461	2462 - 2660	2661 - 2833	2834 - 2993	2994 - 3126	3127 - 3458
2	2562 - 2814	2815 - 2868	2869 - 3066	3067 - 3337	3338 - 3607	3608 - 3842	3843 - 4058	4059 - 4238	4239 - 4689
3	3234 - 3552	3553 - 3620	3621 - 3871	3872 - 4212	4213 - 4554	4555 - 4850	4851 - 5123	5124 - 5351	5352 - 5920
4	3906 - 4290	4291 - 4373	4374 - 4675	4676 - 5088	5089 - 5500	5501 - 5858	5859 - 6188	6189 - 6463	6464 - 7150
5	4579 - 5029	5030 - 5126	5127 - 5480	5481 - 5964	5965 - 6447	6448 - 6866	6867 - 7253	7254 - 7575	7576 - 8381
6	5251 - 5767	5768 - 5878	5879 - 6285	6286 - 6839	6840 - 7394	7395 - 7874	7875 - 8318	8319 - 8688	8689 - 9612
7	5923 - 6506	6507 - 6631	6632 - 7089	7090 - 7715	7716 - 8340	8341 - 8883	8884 - 9383	9384 - 9800	9801 - 10842
8	6595 - 7244	7245 - 7383	7384 - 7894	7895 - 8591	8592 - 9287	9288 - 9891	9892 - 10448	10449 - 10912	10913 - 12073
9	7267 - 7982	7983 - 8136	8137 - 8699	8700 - 9466	9467 - 10234	10235 - 10899	10900 - 11513	11514 - 12025	12026 - 13304
10	7939 - 8721	8722 - 8889	8890 - 9503	9504 - 10342	10343 - 11180	11181 - 11907	11908 - 12578	12579 - 13137	13138 - 14534

- Letters correspond to the rating codes in CBMS
- Co-payments may apply
- No co-pays for American Indians, Alaska Natives, or for a pregnant woman and her household.
- Effective 1/01/2026 to 12/31/2026 Tax Filing Thresholds for a Tax Dependent or Child: Earned Income \$16,100 and Unearned Income \$1,350

Our mission is improving health care equity, access and outcomes for the people we serve  
 while saving Coloradans money on health care and driving value for Colorado.  
[hcpf.colorado.gov](http://hcpf.colorado.gov)

