

# OPERATIONAL MEMO

<b>Title:</b> Health First Colorado Children with Disabilities Buy-In 2025 Income Chart and Premium Guide	<b>Topic:</b> Eligibility Policy			
Audience: County Departments of Human/Social Services, Medical Assistance (MS) Sites and Eligibility Application Partner (EAP) Sites	Sub-Topic: Income & Resource Eligibility			
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## Purpose and Audience:

The purpose of this memo is to advise County Departments of Human/Social services, Medical Assistance sites and Eligibility Application Partner Sites of income changes to the Health First Colorado Buy-In Medicaid Program for Children with Disabilities (CBwD). Please share this memo with anyone who works with this program.

## Information:

The income limits for the CBwD program are based on Federal Poverty Level (FPL) guidelines that are updated annually. The 2025 guidelines were published on January 17, 2025 (Federal Register, Vol 90, No. 11, pages 5917-5918). Colorado Benefits Management System (CBMS) has been updated to reflect the new income guidelines for the Health First Colorado Buy-In Program for Children with

Disabilities according to the attached chart. The new income guidelines have an effective date of April 1, 2025.

#### Children's Buy-In Eligibility Overview:

The CBwD Program is a Child Medical Assistance program that provides Health First Colorado (Colorado's Medicaid Program) benefits for children who are under age 19, have a qualifying disability and whose adjusted family income is at or below 300% of the FPL.

Eligible families will receive Health First Colorado benefits for their child with a disability by paying a monthly premium on a sliding scale based on their adjusted income.

#### Estimation Calculation for Financial Eligibility and Premium Payment:

To qualify financially for CBwD, families must have an adjusted gross family income at or below 300% FPL. In general, the adjusted gross income is calculated by reducing the total income for the household family members by 50%. Please note that there are further income adjustments that may be made at the time of application.

# To estimate financial eligibility and monthly premium, use the following steps:

#### A. Family Size:

Determine the number of family members in your household, including the child.

#### B. Estimate of Monthly Income:

1. Add the monthly income (before taxes) for all family members in the household.

Include income from a job (earned income) and any other income, such as child support, alimony, etc. (unearned income).

2. Subtract \$20 from any unearned income. If unearned income is less than \$20, then the remaining amount of the disregard should be applied towards earned income.

3. Deduct \$65 from any earned income and then divide any remaining earned income in half.

4. Add adjusted unearned income amount and adjusted earned income amounts together. The result is the amount of income used for determining eligibility.

Example: A family reporting \$2800 in earned income and \$800 in unearned income. We would subtract the \$20 dollars from the \$800, leaving \$780 of unearned income. We would then subtract the \$65 from the earned income of \$2800, leaving \$2735. Next, we divide the result of \$2735 by half, leaving \$1367.50. Finally, we would add the adjusted unearned income and the adjusted earned income \$780 + \$1367.50 = \$2147.50. The resulting amount of \$2147.50 will be the total counted income.

Monthly Income After Income Adjustments				
Federal Poverty Level (FPL)	0% - 133%	134% - 185%	186% - 250%	251% - 300%
Monthly Premium	\$0	\$70	\$90	\$120
Family Size: 1	\$0 - \$1,735	\$1,736 - \$2,413	\$2,414 - \$3,261	\$3.262 - \$3,913
2	\$0 - \$2,345	\$2,346 - \$3,261	\$3,262 - \$4,407	\$4,408 - \$5,288
3	\$0 - \$2,954	\$2,955 - \$4,109	\$4,110 - \$5,553	\$5,554 - \$6,663
4	\$0 - \$3,564	\$3,565 - \$4,957	\$4,958 - \$6,698	\$6,699 - \$8,038
5	\$0 - \$4,173	\$4,174 - \$5,805	\$5,806 - \$7,844	\$7,845 - \$9,413
6	\$0 - \$4,783	\$4,784 - \$6,653	\$6,654 - \$8,990	\$8,991 - \$10,788
7	\$0 - \$5,393	\$5,394 - \$7,501	\$7,502 - \$10,136	\$10,137 - \$12,163
8	\$0 - \$6,002	\$6,003 - \$8,349	\$8,350 - \$11,282	\$11,282 - \$13,538

#### Using the Family Size and Estimate of Monthly Income, refer to the guide.

This chart is based on 2025 Federal Poverty Level (FPL) guidelines.

# Action To Be Taken:

Eligibility Sites should ensure these updated resource limits are being applied in calculations to make an accurate eligibility determination.

# Attachment(s):

None

# **HCPF Contact:**

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