



MONTHLY MAXIMUM INCOME GUIDELINES¹
for MAGI Medicaid, CHP+ and Medicaid Buy-in Programs

Federal Poverty Level (FPL)	Medicaid (MAGI)				Child Health Plan <i>Plus</i> (CHP+) ²									Medicaid Buy-In for Children with Disabilities ³				Medicaid Buy-In for Working Adults with Disabilities ³				
	Parents & Caretaker Relatives 68% Poverty Level	Adults (Ages 19-65) 133% Poverty Level	Children (Ages 0-18) 142% Poverty Level	Pregnant Women 195% Poverty Level	143-156% FPL	157-170% FPL	160-170% FPL	171-185% FPL	186-200% FPL	201-213% FPL	214-225% FPL	226-235% FPL	236-260% FPL	0-133% FPL	134-185% FPL	186-250% FPL	251-300% FPL	0-40% FPL	41-133% FPL	134-200% FPL	201-300% FPL	301-450% FPL
Family Size	Income																					
1	674	1,317	1,406	1,931	1,407 – 1,545	1,546 – 1,575	1,576 – 1,683	1,684 – 1,832	1,833 – 1,980	1,981 – 2,109	2,110 – 2,228	2,229 – 2,327	2,328 – 2,574	0 – 1,317	1,318 – 1,832	1,833 – 2,475	2,476 – 2,970	0-396	397-1,317	1,318-1,980	1,981-2,970	2,971-4,455
2	908	1,776	1,896	2,604	1,897 – 2,083	2,084 – 2,123	2,124 – 2,270	2,271 – 2,470	2,471 – 2,670	2,671 – 2,844	2,845 – 3,004	3,005 – 3,138	3,139 – 3,471	0 – 1,776	1,777 – 2,470	2,471 – 3,338	3,339 – 4,005					
3	1,143	2,235	2,386	3,277	2,387 – 2,621	2,622 – 2,672	2,673 – 2,856	2,857 – 3,108	3,109 – 3,360	3,361 – 3,579	3,580 – 3,780	3,781 – 3,948	3,949 – 4,368	0 – 2,235	2,236 – 3,108	3,109 – 4,200	4,201 – 5,040					
4	1,377	2,694	2,876	3,949	2,877 – 3,160	3,161 – 3,220	3,221 – 3,443	3,444 – 3,747	3,748 – 4,050	4,051 – 4,314	4,315 – 4,557	4,558 – 4,759	4,760 – 5,265	0 – 2,694	2,695 – 3,747	3,748 – 5,063	5,064 – 6,075					
5	1,612	3,153	3,366	4,622	3,367 – 3,698	3,699 – 3,769	3,770 – 4,029	4,030 – 4,385	4,386 – 4,740	4,741 – 5,049	5,050 – 5,333	5,334 – 5,570	5,571 – 6,162	0 – 3,153	3,154 – 4,385	4,386 – 5,925	5,926 – 7,110					
6	1,847	3,611	3,856	5,295	3,857 – 4,236	4,237 – 4,317	4,318 – 4,616	4,617 – 5,023	5,024 – 5,430	5,431 – 5,783	5,784 – 6,109	6,110 – 6,381	6,380 – 7,059	0 – 3,611	3,612 – 5,023	5,024 – 6,788	6,789 – 8,145					
7	2,082	4,071	4,347	5,969	4,348 – 4,775	4,776 – 4,867	4,868 – 5,204	5,205 – 5,663	5,664 – 6,122	6,123 – 6,520	6,521 – 6,887	6,888 – 7,193	7,194 – 7,959	0 – 4,071	4,072 – 5,663	5,664 – 7,653	7,654 – 9,183					
8	2,318	4,532	4,839	6,645	4,840 – 5,316	5,317 – 5,418	5,419 – 5,793	5,794 – 6,304	6,305 – 6,815	6,816 – 7,258	7,259 – 7,667	7,668 – 8,008	8,009 – 8,860	0 – 4,532	4,533 – 6,304	6,305 – 8,519	8,520 – 10,223					
Annual Enrollment Fee	\$0				\$0	1 child: \$25 2 or more: \$35					1 child: \$75 2 or more: \$105			\$0								
Monthly Premium	\$0				\$0									\$0	\$70	\$90	\$120	\$0	\$25	\$90	\$130	\$200

¹ Some making more may still qualify.

² No enrollment fee or co-pays for American Indians, Alaska Natives or a pregnant woman and her household.

³ Reflects monthly income after income adjustments. For more information go to Colorado.gov/HCPF/2016-agency-letters.