

**CHIP Income Guidelines Chart**

**How to use this chart:**

Step 1: Locate the number of people in your household.

Step 2: Find the box that matches your household's annual gross income and age of your children.

Step 3: Look down the row to the COST BOX to see your appropriate, average monthly cost per child and the co-payments per child, per visit.

Example: A four-person household with an annual income of \$69,840 will have an average monthly premium of \$74 per child, plus any co-pays for services.

**INCOME\* (Effective March 1, 2019)**

HOUSEHOLD SIZE	Free		Low Cost				Full Cost ages 0-18
	ages 1-5	ages 6-18	ages 0-1	ages 1-18	ages 0-18	ages 0-18	
1	\$ 19,610 - \$ 25,980	\$ 16,612 - \$ 25,980	\$ 26,854 - \$ 32,724	\$ 25,980 - \$ 32,724	\$ 32,724 - \$ 35,972	\$ 35,972 - \$ 39,219	\$ 39,219 - No Limit
2	\$ 26,549 - \$ 35,173	\$ 22,491 - \$ 35,173	\$ 36,357 - \$ 44,305	\$ 35,173 - \$ 44,305	\$ 44,305 - \$ 48,701	\$ 48,701 - \$ 53,098	\$ 53,098 - No Limit
3	\$ 33,489 - \$ 44,367	\$ 28,369 - \$ 44,367	\$ 45,860 - \$ 55,885	\$ 44,367 - \$ 55,885	\$ 55,885 - \$ 61,431	\$ 61,431 - \$ 66,977	\$ 66,977 - No Limit
4	\$ 40,428 - \$ 53,560	\$ 34,248 - \$ 53,560	\$ 55,363 - \$ 67,465	\$ 53,560 - \$ 67,465	\$ 67,465 - \$ 74,160	\$ 74,160 - \$ 80,855	\$ 80,855 - No Limit
5	\$ 47,367 - \$ 62,754	\$ 40,127 - \$ 62,754	\$ 64,866 - \$ 79,046	\$ 62,754 - \$ 79,046	\$ 79,046 - \$ 86,890	\$ 86,890 - \$ 94,734	\$ 94,734 - No Limit
6	\$ 54,307 - \$ 71,948	\$ 46,005 - \$ 71,948	\$ 74,369 - \$ 90,626	\$ 71,948 - \$ 90,626	\$ 90,626 - \$ 99,620	\$ 99,620 - \$ 108,613	\$ 108,613 - No Limit
7	\$ 61,246 - \$ 81,141	\$ 51,884 - \$ 81,141	\$ 83,872 - \$ 102,207	\$ 81,141 - \$ 102,207	\$ 102,207 - \$ 112,349	\$ 112,349 - \$ 122,492	\$ 122,492 - No Limit
8	\$ 68,186 - \$ 90,335	\$ 57,762 - \$ 90,335	\$ 93,375 - \$ 113,787	\$ 90,335 - \$ 113,787	\$ 113,787 - \$ 125,079	\$ 125,079 - \$ 136,371	\$ 136,371 - No Limit
9	\$ 75,125 - \$ 99,528	\$ 63,641 - \$ 99,528	\$ 102,878 - \$ 125,367	\$ 99,528 - \$ 125,367	\$ 125,367 - \$ 137,808	\$ 137,808 - \$ 150,249	\$ 150,249 - No Limit
10	\$ 82,064 - \$ 108,722	\$ 69,520 - \$ 108,722	\$ 112,381 - \$ 136,948	\$ 108,722 - \$ 136,948	\$ 136,948 - \$ 150,538	\$ 150,538 - \$ 164,128	\$ 164,128 - No Limit

**COST**

Average monthly premium per child (Effective December 1, 2018)	Free		Low Cost				Full Cost
	\$0	\$0	\$53	\$53	\$74	\$84	
							\$233

**CO-PAYMENTS (PER CHILD, PER VISIT)**

	Free		Low Cost				Full Cost
Doctor visit	\$ 0	\$ 0	\$ 5	\$ 5	\$ 5	\$ 5	
Brand name prescription	\$ 0	\$ 0	\$ 9	\$ 9	\$ 9	\$ 9	\$ 18
Generic prescription	\$ 0	\$ 0	\$ 6	\$ 6	\$ 6	\$ 6	\$ 10
Specialist visit	\$ 0	\$ 0	\$ 10	\$ 10	\$ 10	\$ 10	\$ 25
Emergency room visits**	\$ 0	\$ 0	\$ 25	\$ 25	\$ 25	\$ 25	\$ 50

\*If your income is below any amount listed, your family could be eligible for Medical Assistance. For more details, please call 1-800-986-KIDS.

\*\*Emergency room visit co-pay applies if the child is not admitted for a hospital stay.

(updated 2/6/2019)