2026 Income Levels for Medicaid, Child Health Plus and Essential Plan

Annual Amounts

	100%	120%	133%	138%	150%	154%	155%	160%	200%	222%	223%	230%	240%	250%	300%	350%	400%
FAMILY SIZE	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**
1	15,960	19,152	21,227	22,025	23,940	24,579	24,738	25,536	31,920	35,432	35,591	36,708	38,304	39,900	47,880	55,860	63,840
2	21,640	25,968	28,782	29,864	32,460	33,326	33,542	34,624	43,280	48,041	48,258	49,772	51,936	54,100	64,920	75,740	86,560
3	27,320	32,784	36,336	37,702	40,980	42,073	42,346	43,712	54,640	60,651	60,924	62,836	65,568	68,300	81,960	95,620	109,280
4	33,000	39,600	43,890	45,540	49,500	50,820	51,150	52,800	66,000	73,260	73,590	75,900	79,200	82,500	99,000	115,500	132,000
5	38,680	46,416	51,445	53,379	58,020	59,568	59,954	61,888	77,360	85,870	86,257	88,964	92,832	96,700	116,040	135,380	154,720
6	44,360	53,232	58,999	61,217	66,540	68,315	68,758	70,976	88,720	98,480	98,923	102,028	106,464	110,900	133,080	155,260	177,440
7	50,040	60,048	66,554	69,056	75,060	77,062	77,562	80,064	100,080	111,089	111,590	115,092	120,096	125,100	150,120	175,140	200,160
8	55,720	66,864	74,108	76,894	83,580	85,809	86,366	89,152	111,440	123,699	124,256	128,156	133,728	139,300	167,160	195,020	222,880
Extra Person	5,680	6,816	7,555	7,839	8,520	8,748	8,804	9,088	11,360	12,610	12,667	13,064	13,632	14,200	17,040	19,880	22,720

Essential Plan

EP 200-250: >200% ≤ 250% FPL
EP 1: >150% ≤ 200% FPL
EP 2: >138% ≤ 150% FPL
EP 3: ≥100% ≤ 138% FPL (Ineligible for Medicaid)
EP 4:<100% FPL (Ineligible for Medicaid)

Monthly Amounts

	100%	120%	133%	138%	150%	154%	155%	160%	200%	222%	223%	230%	240%	250%	300%	350%	400%
FAMILY SIZE	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**	**POVERTY GUIDELINE**
1	1,330	1,596	1,769	1,836	1,995	2,049	2,062	2,128	2,660	2,953	2,966	3,059	3,192	3,325	3,990	4,655	5,320
2	1,804	2,164	2,399	2,489	2,705	2,778	2,796	2,886	3,607	4,004	4,022	4,148	4,328	4,509	5,410	6,312	7,214
3	2,277	2,732	3,028	3,142	3,415	3,507	3,529	3,643	4,554	5,055	5,077	5,237	5,464	5,692	6,830	7,969	9,107
4	2,750	3,300	3,658	3,795	4,125	4,235	4,263	4,400	5,500	6,105	6,133	6,325	6,600	6,875	8,250	9,625	11,000
5	3,224	3,868	4,288	4,449	4,835	4,964	4,997	5,158	6,447	7,156	7,189	7,414	7,736	8,059	9,670	11,282	12,894
6	3,697	4,436	4,917	5,102	5,545	5,693	5,730	5,915	7,394	8,207	8,244	8,503	8,872	9,242	11,090	12,939	14,787
7	4,170	5,004	5,547	5,755	6,255	6,422	6,464	6,672	8,340	9,258	9,300	9,591	10,008	10,425	12,510	14,595	16,680
8	4,644	5,572	6,176	6,408	6,965	7,151	7,198	7,430	9,287	10,309	10,355	10,680	11,144	11,609	13,930	16,252	18,574
Extra Person	474	568	630	654	710	729	734	758	947	1,051	1,056	1,089	1,136	1,184	1,420	1,657	1,894

Income Requirements:

Medicaid

Adults: Up to 138% FPL
Children Aged 1 through 18 - Up to 154% FPL
19 - 20-Year-Old Living with Parent - Up to 155%
FPL Pregnant Women and Children under Age 1 - Up to 223% FPL

Child Health Plus (CHPlus)

Free CHPlus: ≤ 222% FPL
$15 Premium: >222% to 250% FPL
$30 Premium: >250% to 300% FPL
$45 Premium: >300% to 350% FPL
$60 Premium: >350% to 400% FPL