

2014 FEDERAL POVERTY GUIDELINES

How do I determine if I meet the Medicaid Category and the Federal Poverty Guideline?

The 2014 Medical Assistance Chart below is displayed by Category and the percentage of FPL Guidelines to help you determine if you qualify for Medicaid.

Medical Assistance For Men, Women and Children								
Federal Poverty Guidelines (FPL)								
Effective 4/1/14 - 3/31/15								
HH Size	Cat. 100 133%	Cat. 301 250%	Cat. 420 5% Disregard	Cat. 200 Parent Caretaker and Full Coverage for Pregnant Women	Cat. 400 Children 0 -5 0%-240%	Cat. 400 Children 6 -18 0%-190%	Cat. 420 Children 0-5 240%-300%	Cat.420 Children 6-18 190% - 300%
1	\$1,294	Pregnancy Only	\$48.65	\$451	\$2,334	\$1,848	\$2,334	\$2,918
2	\$1,744	\$3,278	\$65.55	\$608	\$3,146	\$2,491	\$3,146	\$3,933
3	\$2,194	\$4,123	\$82.50	\$765	\$3,959	\$3,134	\$3,959	\$4,948
4	\$2,644	\$4,969	\$99.40	\$923	\$4,770	\$3,777	\$4,770	\$5,963
5	\$3,094	\$5,815	\$116.30	\$1,080	\$5,582	\$4,420	\$5,582	\$6,978
6	\$3,544	\$6,661	\$133.25	\$1,238	\$6,395	\$5,062	\$6,395	\$7,993
7	\$3,994	\$7,206	\$150.15	\$1,395	\$7,206	\$5,705	\$7,206	\$9,008
8	\$4,444	\$8,353	\$167.05	\$1,553	\$8,018	\$6,348	\$8,018	\$10,023
+1	\$450	\$846	\$16.90	\$158	\$812	\$643	\$812	\$1,015

If you meet the Category and the FPL Guidelines, call (505) 867-2291 Ext. 1725 and schedule an appointment with a Medicaid Determiner/ECO.