

INCOME TABLES

Income Guidelines for
Parents, Caregivers and Kids

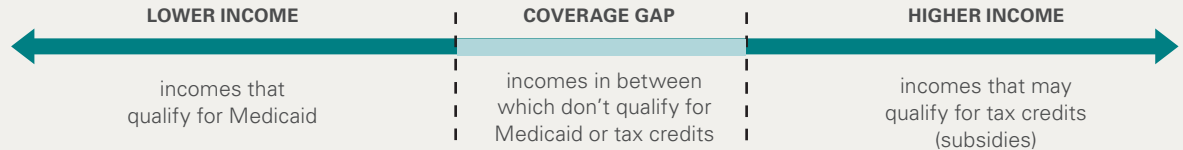


INCOME LIMITS FOR MEDICAID AND PEACHCARE FOR KIDS, 2016

How big is your family?	How old is your child?			
	Medicaid		PeachCare for Kids	
	CHILD AGE 0 TO 1 210% FPL	CHILD AGE 1 TO 5 154% FPL	CHILD AGE 6 TO 19 138% FPL	CHILD AGE 0 TO 19 252% FPL
1 person	\$2,080 monthly income limit \$24,960 annual income limit	\$1,526 monthly income limit \$18,312 annual income limit	\$1,367 monthly income limit \$16,404 annual income limit	\$2,496 monthly income limit \$29,952 annual income limit
2 people	\$2,804 monthly income limit \$33,648 annual income limit	\$2,057 monthly income limit \$24,684 annual income limit	\$1,843 monthly income limit \$22,116 annual income limit	\$3,365 monthly income limit \$40,380 annual income limit
3 people	\$3,528 monthly income limit \$42,336 annual income limit	\$2,588 monthly income limit \$31,056 annual income limit	\$2,319 monthly income limit \$27,828 annual income limit	\$4,234 monthly income limit \$50,808 annual income limit
4 people	\$4,254 monthly income limit \$51,048 annual income limit	\$3,120 monthly income limit \$37,440 annual income limit	\$2,796 monthly income limit \$33,552 annual income limit	\$5,104 monthly income limit \$61,248 annual income limit
5 people	\$4,978 monthly income limit \$59,736 annual income limit	\$3,651 monthly income limit \$43,812 annual income limit	\$3,272 monthly income limit \$39,264 annual income limit	\$5,973 monthly income limit \$71,676 annual income limit
more EACH ADDITIONAL FAMILY MEMBER	\$730 monthly income limit \$8,760 annual income limit	\$536 monthly income limit \$6,432 annual income limit	\$480 monthly income limit \$5,760 annual income limit	\$876 monthly income limit \$10,512 annual income limit
How to apply	Visit compass.ga.gov . If you need help with your application, there are community partners who can help you for free. Visit compass.ga.gov or call 1-877-423-4746 for a list of partners in your area.			Call 877-GA-PEACH (877-427-3224) or go online to www.peachcare.org .

* All ranges are based on 2016 FPL guidelines.

INCOME GUIDELINES FOR HEALTH INSURANCE PROGRAMS, 2016



How big is your family?	PARENT/CAREGIVER MEDICAID	COVERAGE GAP	HEALTH INSURANCE MARKETPLACE Financial assistance is available to you if your income falls in this range. Plans are available at all income levels.
1 person	\$360 monthly income limit ----- \$4,320 annual income limit	<p>The coverage gap means that a person does not qualify for Medicaid and does not earn enough income to receive financial assistance on the health insurance marketplace.</p> <p>People who fall in the coverage gap include working parents, low-wage workers, and some veterans.</p> <p style="text-align: center;">Who can fix the coverage gap?</p> <p>Our elected officials have the power to solve this problem. Governor Deal and the state legislature have so far rejected the money that is set aside to provide health coverage for Georgians in the gap. But they can still bring Georgia's tax dollars back to our state and close the coverage gap, so that people like you can have coverage.</p> <p><i>If you are a person who falls in the coverage gap:</i></p> <ul style="list-style-type: none"> • Share your story with Georgians for a Healthy Future. Contact Whitney at 404-567-5016, ext. 5 or wgriggs@healthyfuturega.org. • Go to www.coverga.org to sign a petition to tell your elected officials that you want them to close Georgia's coverage gap. 	\$990 – \$3,960 monthly income range ----- \$11,880 – \$47,520 annual income range
2 people	\$524 monthly income limit ----- \$6,288 annual income limit		\$1,335 – \$5,340 monthly income range ----- \$16,020 – \$64,080 annual income range
3 people	\$635 monthly income limit ----- \$7,620 annual income limit		\$1,680 – \$6,720 monthly income range ----- \$20,160 – \$80,640 annual income range
4 people	\$755 monthly income limit ----- \$9,060 annual income limit		\$2,025 – \$8,100 monthly income range ----- \$24,300 – \$97,200 annual income range
5 people	\$871 monthly income limit ----- \$10,452 annual income limit		\$2,370 – \$9,480 monthly income range ----- \$28,440 – \$113,760 annual income range
6 people	\$962 monthly income limit ----- \$ 11,544 annual income limit		\$2,715 – \$10,860 monthly income range ----- \$32,580 – \$130,320 annual income range
How to apply	Visit compass.ga.gov . If you need help with your application, there are community partners who can help you for free. Visit compass.ga.gov or call 1-877-423-4746 for a list of partners in your area.		To find out if you qualify for financial assistance or to apply for coverage: <ul style="list-style-type: none"> • Visit healthcare.gov • Call 1-800-318-2596 • Find local, in-person help at localhelp.healthcare.gov

* All ranges are based on 2016 FPL guidelines.