









# Income Limits, 2024

## for Medicaid and PeachCare for Kids







### Medicaid

### PeachCare for Kids

FAMILY SIZE	CHILD AGE 0 TO 1 YRS OLD 210% FPL	CHILD AGE 1 TO 5 YRS OLD 154% FPL	CHILD AGE 6 TO 19 YRS OLD 138% FPL	CHILD AGE 0 TO 19 YRS OLD 252% FPL
 <b>1 person</b>	\$2,635 monthly income limit ----- \$31,626 annual income limit	\$1,933 monthly income limit ----- \$23,192 annual income limit	\$1,731 monthly income limit ----- \$20,783 annual income limit	\$3,163 monthly income limit ----- \$37,951 annual income limit
 <b>2 people</b>	\$3,577 monthly income limit ----- \$42,924 annual income limit	\$2,623 monthly income limit ----- \$31,478 annual income limit	\$2,350 monthly income limit ----- \$28,207 annual income limit	\$4,293 monthly income limit ----- \$51,509 annual income limit
 <b>3 people</b>	\$4,519 monthly income limit ----- \$54,222 annual income limit	\$3,313 monthly income limit ----- \$39,763 annual income limit	\$2,969 monthly income limit ----- \$35,631 annual income limit	\$5,423 monthly income limit ----- \$65,066 annual income limit
 <b>4 people</b>	\$5,461 monthly income limit ----- \$65,520 annual income limit	\$4,003 monthly income limit ----- \$48,048 annual income limit	\$3,588 monthly income limit ----- \$43,055 annual income limit	\$6,553 monthly income limit ----- \$78,624 annual income limit
 <b>5 people</b>	\$6,403 monthly income limit ----- \$76,818 annual income limit	\$4,693 monthly income limit ----- \$56,333 annual income limit	\$4,207 monthly income limit ----- \$50,479 annual income limit	\$7,683 monthly income limit ----- \$92,182 annual income limit
 <b>more</b> EACH ADDITIONAL FAMILY MEMBER	\$942 monthly income limit ----- \$11,298 annual income limit	\$690 monthly income limit ----- \$8,285 annual income limit	\$619 monthly income limit ----- \$7,424 annual income limit	\$1,130 monthly income limit ----- \$13,558 annual income limit
<b>How to apply</b>	Visit <a href="https://gateway.ga.gov">gateway.ga.gov</a> . You can also call directly at 1-877-423-4746			Call 877-GA-PEACH (877) 427 3224 or go online at <a href="https://gateway.ga.gov">gateway.ga.gov</a>

\* All ranges are based on 2024 FPL guidelines

# Income guidelines for health insurance programs, 2024

	← LOWER INCOME incomes that qualify for Medicaid	IN BETWEEN INCOME	MODERATE INCOME incomes that may qualify for tax credits (subsidies) →
How big is your family?	MEDICAID PARENT/CAREGIVER	<b>PATHWAYS TO COVERAGE</b> A program for parents and other adults who are working or going to school half-time or more.  <b>OR</b>  <b>COVERAGE GAP</b> Others will fall in Georgia's coverage gap because Georgia has not yet expanded Medicaid.	HEALTH INSURANCE MARKETPLACE  Financial help is available to you if your income falls in this range. Plans are available at all income levels.
 <b>1 person</b>	\$373 monthly income limit <hr/> \$4,473 annual income limit	\$1,255 monthly income limit <hr/> \$15,060 annual income limit	\$1,255-\$5,020 monthly income range <hr/> \$15,060-\$60,240 annual income range
 <b>2 people</b>	\$542 monthly income limit <hr/> \$6,506 annual income limit	\$1,703 monthly income limit <hr/> \$20,436 annual income limit	\$1,703-\$6,813 monthly income range <hr/> \$20,440-\$81,760 annual income range
 <b>3 people</b>	\$658 monthly income limit <hr/> \$7,903 annual income limit	\$2,152 monthly income limit <hr/> \$25,824 annual income limit	\$2,152-\$8,607 monthly income range <hr/> \$25,820-\$103,280 annual income range
 <b>4 people</b>	\$783 monthly income limit <hr/> \$9,396 annual income limit	\$2,600 monthly income limit <hr/> \$31,200 annual income limit	\$2,600-\$10,400 monthly income range <hr/> \$31,200-\$124,800 annual income range
 <b>5 people</b>	\$855 monthly income limit <hr/> \$10,265 annual income limit	\$3,048 monthly income limit <hr/> \$36,576 annual income limit	\$3,071-\$12,193 monthly income range <hr/> \$36,580-\$146,320 annual income range
 <b>6 people</b>	\$928 monthly income limit <hr/> \$11,134 annual income limit	\$3,496 monthly income limit <hr/> \$41,952 annual income limit	\$3,347-\$13,987 monthly income range <hr/> \$41,960-\$167,840 annual income range
<b>How to apply</b>	Visit <a href="http://gateway.ga.gov">gateway.ga.gov</a> . You can also call directly at 877-423-4746	You may qualify for the Pathways to Coverage program if you are able to document 80 hours per month of work, school, or other qualifying activities. Visit <a href="http://gateway.ga.gov">gateway.ga.gov</a> or call 877-423-4746 to apply.	To find out if you qualify for financial assistance or to apply for coverage: <ul style="list-style-type: none"> <li>• Visit <a href="http://healthcare.gov">healthcare.gov</a></li> <li>• Call 1-800-318-2596</li> <li>• Find local, in-person help at <a href="http://localhelp.healthcare.gov">localhelp.healthcare.gov</a></li> </ul>

\* All ranges are based on 2024 FPL guidelines.