Affordable Care Act - Federal Poverty Level Chart 2015

PROGRAM									
	MAGI Infant (0 through month of 1st birthday) 0 - 266%							MAP-Linked* 0-2 years old >213-266%	MAP-Linked* 0-2 years old Premium Payment >266-322%
	MAGI/TLICP Child (1 year through month of 6th birthday) 0 - 160%					TLICP Child Premium-Payment (1 year through month of 19th birthday) 160-266%			Advanced Premium Tax Credit (APTC) >138-400%
	MAGI Child (6 year through month of 19th birthday) 0 - 133%			TLICP Child (6 year through month of 19th birthday) > 133 - 160%					
	MAGI Adult (age 19 through month prior to 65th birthday) 0-138%			Enhanced Silver Benefits Cost Saving Reduction (CSR)					
				94% AV** >138-150%	87% AV** >150-200%		73% AV** >200-250%		
Household Size	**100%**	**133%**	**138%**	**150%**	**160%**	**200%**	**250%**	**266%**	**400%**
1	$981	$1305	$1354	$1472	$1570	$1962	$2453	$2610	$3923
2	$1328	$1766	$1832	$1992	$2124	$2655	$3319	$3532	$5310
3	$1675	$2227	$2311	$2512	$2679	$3349	$4186	$4454	$6697
4	$2021	$2688	$2789	$3032	$3234	$4042	$5053	$5376	$8083
5	$2368	$3149	$3268	$3552	$3788	$4735	$5919	$6298	$9470
6	$2715	$3610	$3746	$4072	$4343	$5429	$6786	$7220	$10,857
7	$3061	$4071	$4224	$4592	$4898	$6122	$7653	$8142	$12,243
8	$3408	$4532	$4703	$5112	$5452	$6815	$8519	$9064	$13,630
For each additional person, add	$347	$462	$479	$520	$555	$694	$867	$923	$1388

*More information to follow on the Medi-Cal Access Program (MAP), formerly known as AIM

**Actuarial value (AV) percentages represent the total average cost for covered benefits that a plan will cover

Coverage for Pregnant Women - Federal Poverty Level Chart 2015

PROGRAM	1ST, 2ND, 3RD Trimester 0-60% Full Scope or Pregnancy Only Based on Immigration Status	1st or 2nd Trimester > 60%-213% (Pregnancy Services Only)	
		3rd Trimester >60%-109% Full Scope or Pregnancy Only Based on Immigration Status	3rd Trimester >109%-213% (Pregnancy Services Only)
Household Size	**60%**	**109%**	**213%**
1	$589	$1070	$2090
2	$797	$1447	$2828
3	$1005	$1825	$3566
4	$1213	$2203	$4305
5	$1421	$2581	$5043
6	$1629	$2959	$5782
7	$1837	$3337	$6520
8	$2045	$3715	$7258
For each additional person, add	$208	$378	$739

Beneficiary Rule: Women who become pregnant while receiving Medi-Cal under the “MAGI Adult” category should not be transferred to the “Pregnant Women” category.