

Eligibility for Benefits Determined in Relation to 2024 Federal Poverty Level (FPL)

| Upper FPL% and <i>monthly</i> income limits for: | Medicaid for Adults | Pregnant Women | Children under 19 |
|--|----------------------------|----------------------------|----------------------------|
| Household Size* | 133% of FPL + 5% disregard | 208% of FPL + 5% disregard | 312% of FPL + 5% disregard |
| 1 | \$1,732.75 | N/A | \$3,978.75 |
| 2 | \$2,351.20 | \$3,628.20 | \$5,400.20 |
| 3 | \$2,969.60 | \$4,583.60 | \$6,821.60 |
| 4 | \$3,588.00 | \$5,538.00 | \$8,242.00 |
| 5 | \$4,207.45 | \$6,493.45 | \$9,663.45 |
| 6 | \$4,825.85 | \$7,274.85 | \$11,084.85 |
| 7 | \$5,444.25 | \$8,403.25 | \$12,506.25 |
| 8 | \$6,063.70 | \$9,358.70 | \$13,927.70 |

*Effective 1/1/14, Medicaid for Children and Adults (MCA) has no resource test. The FPL% limits listed above include the program threshold plus a 5% income disregard.

Eligibility requirements for the Aged, Blind and Disabled (MABD) can be found at
<http://dvha.vermont.gov/members/medicaid/medicaid-aged-blind-or-disabled-mabd>