

## INCOME GUIDELINES

### FOR MO HealthNet for Kids (MHK), MO HealthNet for Families (MHF) AND TEMPORARY ASSISTANCE

NUMBER OF PERSONS	TEMPORARY ASSISTANCE		MO HEALTHNET FOR FAMILIES		NON-CHIP MO HEALTHNET FOR KIDS AGES 6-18	NON-CHIP MO HEALTHNET FOR KIDS AGES 1 - 5	NON-CHIP MO HEALTHNET FOR KIDS UNDER AGE 1 & MO HEALTHNET FOR PREGNANT WOMEN	MO HEALTHNET FOR KIDS CHIP GROUPS (UNINSURED CHILDREN) THROUGH AGE 18			
	Gross Max.	Eligibility Test (Full Need Std)	Net Income Limit/Max. (% of Need Std)	NET INCOME MAX	NET INCOME MAX	NET INCOME MAX	NET INCOME MAX	GROSS INCOME MAX			
	185% of Cons Std	Cons. Std.	Grant Amt		100% of Federal Poverty Level	133 % of Federal Poverty Level	185% of Federal Poverty Level	FEDERAL POVERTY LEVEL			
								NO-COST 150%	PREM 185%	PREM 225%	PREM 300%
1	727	393	136	136	908	1207	1679	1362	1679	2042	2723
2	1254	678	234	234	1226	1631	2268	1839	2268	2759	3678
3	1565	846	292	292	1545	2054	2857	2317	2857	3475	4633
4	1832	990	342	342	1863	2478	3446	2794	3446	4191	5588
5	2078	1123	388	388	2181	2901	4035	3272	4035	4907	6543
6	2307	1247	431	431	2500	3324	4623	3749	4623	5624	7498
7	2538	1372	474	474	2818	3748	5213	4227	5213	6340	8453
8	2755	1489	514	514	3136	4171	5802	4704	5802	7056	9408
9	2971	1606	554	554	3455	4595	6391	5182	6391	7772	10363
10	3186	1722	595	595	3773	5018	6980	5659	6980	8489	11318
11	3402	1839	635	635	4091	5441	7569	6137	7569	9205	12273
12	3619	1956	675	675	4410	5865	8157	6614	8157	9921	13228

#### Temporary Assistance:

If under gross income limit, deduct child care expenses and \$90 work standard and compare to consolidated standard.  
 If under the consolidated standard, income after allowable deductions, must be under the net income limit to be eligible.

#### MO HealthNet for Pregnant Women and Non-CHIP Children :

Deduct childcare expenses and \$90 for each wage earner from gross income-compare to poverty level.

#### MO HealthNet for Families:

Gross income, minus the first \$50 of child support, must be under the Temporary Assistance gross income maximum.

If under the gross income limit, deduct child care expenses, the first \$50 of child support and \$90 for each wage earner from gross income - must be under MHF Net Income Max to be eligible.

CHIP groups: Gross income must be under maximum. There are no deductions.

Premiums for families with gross income above 150% FPL up to and including 185% FPL are 4% of monthly income for the family size. Premiums for families with gross income above 185% up to and including 225% of FPL are 4% of monthly income between 150% and 185% of FPL plus 8% of monthly income between 185% and 225% FPL for the family size. Premiums for families with gross income above 225% up to and including 300% of FPL are 4% of monthly income between 150% and 185% of FPL plus 8% of monthly income between 185% and 225% of FPL plus 14% of monthly income between 225% and 300% of FPL for the family size, but the total monthly premium is not to exceed 5% of the family's gross income.

\*\* Transitional MO HealthNet eligibility (for the second six-month period of eligibility) is determined by subtracting childcare expenses from earned income and comparing the result to 185% of the current federal poverty level.

Effective Date 4/1/2011