

CHIP Income Guidelines Chart

How to use this chart:

Step 1: Locate the number of people in your household.

Step 2: Find the box that matches your household's annual gross income and age of your children.

Step 3: Look down the row to the COST BOX to see your appropriate, average monthly cost per child and the co-payments per child, per visit.

Example: A four-person household with an annual income of \$69,840 will have an average monthly premium of \$60 per child, plus any co-pays for services.

INCOME* (Effective March 1, 2025)

HOUSEHOLD SIZE	Free				Low Cost								Full Cost ages 0-18
	ages 1-5		ages 6-18		ages 0-1		ages 1-18		ages 0-18		ages 0-18		
1	\$ 24,571 - \$	32,552	\$ 20,815 - \$	32,552	\$ 33,648 - \$	41,003	\$ 32,552 - \$	41,003	\$ 41,003 - \$	45,072	\$ 45,072 - \$	49,141	\$ 49,141 - No Limit
2	\$ 33,206 - \$	43,992	\$ 28,130 - \$	43,992	\$ 45,473 - \$	55,413	\$ 43,992 - \$	55,413	\$ 55,413 - \$	60,912	\$ 60,912 - \$	66,411	\$ 66,411 - No Limit
3	\$ 41,841 - \$	55,432	\$ 35,445 - \$	55,432	\$ 57,298 - \$	69,823	\$ 55,432 - \$	69,823	\$ 69,823 - \$	76,752	\$ 76,752 - \$	83,681	\$ 83,681 - No Limit
4	\$ 50,476 - \$	66,872	\$ 42,760 - \$	66,872	\$ 69,123 - \$	84,233	\$ 66,872 - \$	84,233	\$ 84,233 - \$	92,592	\$ 92,592 - \$	100,951	\$ 100,951 - No Limit
5	\$ 59,111 - \$	78,312	\$ 50,075 - \$	78,312	\$ 80,948 - \$	98,643	\$ 78,312 - \$	98,643	\$ 98,643 - \$	108,432	\$ 108,432 - \$	118,221	\$ 118,221 - No Limit
6	\$ 67,746 - \$	89,752	\$ 57,390 - \$	89,752	\$ 92,773 - \$	113,053	\$ 89,752 - \$	113,053	\$ 113,053 - \$	124,272	\$ 124,272 - \$	135,491	\$ 135,491 - No Limit
7	\$ 76,381 - \$	101,192	\$ 64,705 - \$	101,192	\$ 104,598 - \$	127,463	\$ 101,192 - \$	127,463	\$ 127,463 - \$	140,112	\$ 140,112 - \$	152,761	\$ 152,761 - No Limit
8	\$ 85,016 - \$	112,632	\$ 72,020 - \$	112,632	\$ 116,423 - \$	141,873	\$ 112,632 - \$	141,873	\$ 141,873 - \$	155,952	\$ 155,952 - \$	170,031	\$ 170,031 - No Limit
9	\$ 93,651 - \$	124,072	\$ 79,335 - \$	124,072	\$ 128,248 - \$	156,283	\$ 124,072 - \$	156,283	\$ 156,283 - \$	171,792	\$ 171,792 - \$	187,301	\$ 187,301 - No Limit
10	\$ 102,286 - \$	135,512	\$ 86,650 - \$	135,512	\$ 140,073 - \$	170,693	\$ 135,512 - \$	170,693	\$ 170,693 - \$	187,632	\$ 187,632 - \$	204,571	\$ 204,571 - No Limit

COST

Average monthly premium per child (Effective July 1, 2025)	Free		Low Cost				Full Cost
	\$0	\$0	\$60	\$60	\$84	\$96	
							\$253

CO-PAYMENTS (PER CHILD, PER VISIT)

Doctor visit	\$ 0	\$ 0	\$ 5	\$ 5	\$ 5	\$ 5	\$ 15
Brand name prescription	\$ 0	\$ 0	\$ 9	\$ 9	\$ 9	\$ 9	\$ 18
Generic prescription	\$ 0	\$ 0	\$ 6	\$ 6	\$ 6	\$ 6	\$ 10
Specialist visit	\$ 0	\$ 0	\$ 10	\$ 10	\$ 10	\$ 10	\$ 25
Emergency room visits**	\$ 0	\$ 0	\$ 25	\$ 25	\$ 25	\$ 25	\$ 50

*If your income is below any amount listed, your family could be eligible for Medical Assistance. For more details, please call 1-800-986-KIDS.

**Emergency room visit co-pay applies if the child is not admitted for a hospital stay.

(Updated 6/13/25)