



**Medicaid Eligibility Procedure Letter No. 123**

**Effective Date:** April 1, 2017

**OAC Rules:** 5160:1-4-02, 5160:1-4-03, 5160:1-4-04, and 5160:1-4-05

**To:** All Medicaid Eligibility Manual Holders

**From:** Barbara R. Sears, Director

**Subject:** Medicaid: 2017 Federal Poverty Level Income Guidelines for MAGI-Based Medicaid

**Reason for Change:** On January 26, 2017, the United States Department of Health and Human Services updated the federal poverty level (FPL) income guidelines.

**New Policy:** The FPL income guidelines for the MAGI-Based Medicaid programs will be changed effective April 1, 2017.

**Action Required:**

Beginning April 1, 2017, the CDJFS must determine initial and ongoing eligibility for MAGI-Based Medicaid using the following FPL income guidelines:

<b>2017 Monthly Federal Poverty Level Income Guidelines</b>						
<b>Family Size</b>	<b>Individuals Age 19 or 20 44%</b>	<b>Parent or Caretaker Relative 90%</b>	<b>MAGI Adults 133%</b>	<b>Coverage for Children 156%*</b>	<b>Pregnant Women 200%</b>	<b>Coverage for Children 206%**</b>
<b>1</b>	<b>\$443</b>	<b>\$905</b>	<b>\$1,337</b>	<b>\$1,568</b>	<b>\$2,010</b>	<b>\$2,071</b>
<b>2</b>	<b>\$596</b>	<b>\$1,218</b>	<b>\$1,800</b>	<b>\$2,112</b>	<b>\$2,707</b>	<b>\$2,788</b>
<b>3</b>	<b>\$749</b>	<b>\$1,532</b>	<b>\$2,264</b>	<b>\$2,655</b>	<b>\$3,404</b>	<b>\$3,506</b>
<b>4</b>	<b>\$902</b>	<b>\$1,845</b>	<b>\$2,727</b>	<b>\$3,198</b>	<b>\$4,100</b>	<b>\$4,223</b>
<b>5</b>	<b>\$1,056</b>	<b>\$2,159</b>	<b>\$3,190</b>	<b>\$3,742</b>	<b>\$4,797</b>	<b>\$4,941</b>
<b>6</b>	<b>\$1,209</b>	<b>\$2,472</b>	<b>\$3,654</b>	<b>\$4,285</b>	<b>\$5,494</b>	<b>\$5,659</b>

\*This standard is used for children **with** creditable insurance.

\*\*This standard is used for children **without** creditable insurance.

The tables in Ohio Benefits will be updated with the 2017 FPL Income Guidelines effective April 1, 2017. A list of all individuals who were denied or discontinued since February 10, 2017 at 5:00pm will be provided to the CDJFS to rerun eligibility determination using the updated FPL income guidelines.

MEPL #123

Medicaid Eligibility Policy Letter No. 109 is obsolete upon the effective date of this MEPL.

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