

Program Eligibility by Federal Poverty Level for 2024

Your financial help and whether you qualify for various Covered California or Medi-Cal programs depends on your income, based on the Federal Poverty Level (FPL).

		Federal Premium Tax Credit*										
		SEE NOTE BELOW FOR INCOMES IN THIS RANGE			American Indian / Alaska Native (AIAN) Zero Cost Sharing (100%-300%)					AIAN Limited Cost Sharing (over 300%)		
		Silver 94 (100%-150%)			Silver 87 (>150%-200%)		Silver 73 (>200%-250%)					
% FPL		0%	100%	138%	150%	200%	213%	250%	266%	300%	322%	400%*
Household Size	1	\$0	\$14,580	\$20,783	\$21,870	\$29,160	\$32,078	\$36,450	\$40,060	\$43,740	\$48,494	\$58,320
	2	\$0	\$19,720	\$28,208	\$29,580	\$39,440	\$43,538	\$49,300	\$54,371	\$59,160	\$65,817	\$78,880
	3	\$0	\$24,860	\$35,632	\$37,290	\$49,720	\$54,997	\$62,150	\$68,682	\$74,580	\$83,141	\$99,440
	4	\$0	\$30,000	\$43,056	\$45,000	\$60,000	\$66,456	\$75,000	\$82,992	\$90,000	\$100,464	\$120,000
	5	\$0	\$35,140	\$50,481	\$52,710	\$70,280	\$77,916	\$87,850	\$97,303	\$105,420	\$117,788	\$140,560
	6	\$0	\$40,280	\$57,905	\$60,420	\$80,560	\$89,375	\$100,700	\$111,614	\$120,840	\$135,112	\$161,120
	7	\$0	\$45,420	\$65,330	\$68,130	\$90,840	\$100,835	\$113,550	\$125,925	\$136,260	\$152,435	\$181,680
	8	\$0	\$50,560	\$72,754	\$75,840	\$101,120	\$112,294	\$126,400	\$140,236	\$151,680	\$169,759	\$202,240
	add'l, add	\$0	\$5,140	\$7,425	\$7,710	\$10,280	\$11,460	\$12,850	\$14,311	\$15,420	\$17,324	\$20,560
		Medi-Cal for Adults			Medi-Cal for Pregnant Individuals			Medi-Cal Access Program (for Pregnant Individuals)				
Medi-Cal		Medi-Cal for Kids (0-18 Yrs.)					CCHIP (San Francisco, San Mateo, and Santa Clara county residents)					

Note: Most consumers up to 138% FPL will be eligible for Medi-Cal. If ineligible for Medi-Cal, consumers may qualify for a Covered California health plan with financial help including: federal premium tax credit, Silver (94, 87, 73) plans and Zero Cost Sharing and Limited Cost Sharing AIAN plans.

Silver 94, 87 and 73 plans have no deductibles, and lower co-pays and out-of-pocket maximum costs.

* Consumers at 400% FPL or higher may receive a federal premium tax credit to lower their premium to a maximum of 8.5 percent of their income based on the second-lowest-cost Silver plan in their area. See the chart on page 2 for more information.

The cost of your Covered California premium is based on your household's Federal Poverty Level percentage and the cost of the plans available where you live.

Percentage of income paid for premiums, based on household FPL <i>Based on second-lowest-cost Silver plan</i>	
Household FPL Percentage	Percent of Income
0-150% FPL	0% household income
150-200% FPL	0-2% household income
200-250% FPL	2-4% household income
250-300% FPL	4-6% household income
300-400% FPL	6-8.5% household income
400+% FPL	8.5% household income

Covered California Programs



The unshaded column headings are associated with eligibility ranges for Covered California programs and financial help:

Covered California uses FPL limits from the previous year to determine eligibility for its programs.

Federal Premium Tax Credit	100%–400%+ FPL
Silver 94	100%–150% FPL
Silver 87	over 150%–200% FPL
Silver 73	over 200%–250% FPL
AIAN Zero Cost Sharing	100%–300% FPL
AIAN Limited Cost Sharing	over 300% FPL

Medi-Cal Programs



The column headings shaded in orange are associated with eligibility ranges for Medi-Cal programs:

Medi-Cal uses FPL limits for the current year, [as calculated by the Department of Health Care Services](#), to determine eligibility for its programs.

Medi-Cal for Adults	up to 138% FPL
Medi-Cal for Children	up to 266% FPL
Medi-Cal for Pregnant Individuals	up to 213% FPL
MCAP (for Pregnant Individuals)	over 213%–322% FPL
CCHIP (for Children in San Mateo, San Francisco, and Santa Clara counties)	over 266%–322% FPL