



# Program Eligibility by Federal Poverty Level for 2026

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).

	California State Subsidy (100%-165%)				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	100%	138%	DHCS mo 138%	150%	165%	200%	213%	DHCS mo 213%	250%	266%	DHCS mo 266%	300%	322%	DHCS mo 322%	400%*		
Household Size	1	\$15,650	\$21,597	\$1,801	\$23,475	\$25,823	\$31,300	\$33,335	\$2,780	\$39,125	\$41,629	\$3,472	\$46,950	\$50,393	\$4,203	\$62,600	
	2	\$21,150	\$29,187	\$2,433	\$31,725	\$34,898	\$42,300	\$45,050	\$3,756	\$52,875	\$56,259	\$4,690	\$63,450	\$68,103	\$5,677	\$84,600	
	3	\$26,650	\$36,777	\$3,065	\$39,975	\$43,973	\$53,300	\$56,765	\$4,731	\$66,625	\$70,889	\$5,908	\$79,950	\$85,813	\$7,152	\$106,600	
	4	\$32,150	\$44,367	\$3,699	\$48,225	\$53,048	\$64,300	\$68,480	\$5,709	\$80,375	\$85,519	\$7,129	\$96,450	\$103,523	\$8,630	\$128,600	
	5	\$37,650	\$51,957	\$4,331	\$56,475	\$62,123	\$75,300	\$80,195	\$6,684	\$94,125	\$100,149	\$8,348	\$112,950	\$121,233	\$10,105	\$150,600	
	6	\$43,150	\$59,547	\$4,963	\$64,725	\$71,198	\$86,300	\$91,910	\$7,660	\$107,875	\$114,779	\$9,566	\$129,450	\$138,943	\$11,580	\$172,600	
	7	\$48,650	\$67,137	\$5,596	\$72,975	\$80,273	\$97,300	\$103,625	\$8,638	\$121,625	\$129,409	\$10,787	\$145,950	\$156,653	\$13,058	\$194,600	
	8	\$54,150	\$74,727	\$6,228	\$81,225	\$89,348	\$108,300	\$115,340	\$9,613	\$135,375	\$144,039	\$12,005	\$162,450	\$174,363	\$14,532	\$216,600	
add'l, add	\$5,500	\$7,590	\$634	\$8,250	\$9,075	\$11,000	\$11,715	\$978	\$13,750	\$14,630	\$1,221	\$16,500	\$17,710	\$1,478	\$22,000		
	Medi-Cal for Adults				Medi-Cal for Pregnant Individuals					Medi-Cal Access Program (for Pregnant Individuals)							
	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, Enhanced Silver (94, 87, 73) plans and Zero Cost Sharing and Limited Cost Sharing AIAN plans.

**Enhanced Silver 94, 87 and 73 plans** provide lower deductibles, co-pays, and out-of-pocket maximum costs.

\*Consumers with income above 400% FPL are not eligible for a federal premium tax credit.

Medi-Cal monthly values are provided above, for reference. Source: [DHCS ACWDL 25-01](#)

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 Based on second-lowest-cost Silver plan	
Household FPL Percentage	Percent of Income
Under 138% FPL	0% household income
138%-150% FPL	0% household income
Above 150% - 165% FPL	3.19%-3.91% household income
Above 165% but under 200% FPL	4.91%-6.60% household income
200% but under 250% FPL	6.60%-8.44% household income
250% but under 300% FPL	8.44%-9.96% household income
300%-400% FPL	9.96% 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
California State Subsidy	100%-165% FPL

## Medi-Cal Programs



**Medi-Cal**

**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