

Quick Guide to Income Eligibility (effective March 1, 2016)

Hospitals - Refer to the following table when making Hospital Presumptive Eligibility determinations based on the information required in Part 1 of the [OHP 7260 form](#).

- Determine the family size for each applicant.
- Count the monthly gross income (before taxes) of everyone included in the family size for the specific program.
- If the applicant's income is equal to or under the income limit for a program, the applicant is considered financially eligible for that program.

NOTE: Income standards for HPE are not the same as the income standards for regular OHP eligibility. The 5% disregard is not added, and other distinctions may apply, as well. Please use this table exclusively for Hospital Presumptive Eligibility determinations.

Group/Description	Family Size	Income Limit	Do not count
Parent or Other Caretaker Relative <ul style="list-style-type: none"> • Parents or caretaker relatives of OHP-eligible dependent children in home • Family size includes: <ul style="list-style-type: none"> ○ Applicant ○ Legal spouse of applicant ○ Applicant's children including step-children under age 19 ○ Applicant's unborn children ○ Unborn children of each pregnant member of the applicant's family size 	1	\$399	Child(ren)'s income Educational income Child support SSI
	2	515	
	3	611	
	4	747	
	5	872	
	6	998	
	7	1,114	
	8	1,230	
	9	1,321	
	10	1,456	
	Each additional person	+136	
Medicaid Adults <ul style="list-style-type: none"> • Non-pregnant adults age 19 through 64 • Not eligible for Parent/Caretaker Relative • Income limit is 133% of Federal Poverty Level (FPL) • Family size includes: <ul style="list-style-type: none"> ○ Applicant ○ Legal spouse of applicant ○ Applicant's children and step-children ○ Unborn children of each pregnant member of the applicant's family size 	1	\$1,317	Child(ren)'s income Educational income Child support SSI
	2	1,776	
	3	2,235	
	4	2,694	
	5	3,153	
	6	3,611	
	7	4,071	
	8	4,532	
	9	4,994	
	10	5,455	
	Each additional person	+462	
Medicaid Children <ul style="list-style-type: none"> • Children under age 1 • Pregnant and under age 19 • Income limit 185% of FPL • Family size includes: <ul style="list-style-type: none"> ○ Applicant ○ Applicant's unborn children ○ Applicant's children and step-children ○ Unborn children of each pregnant member of the applicant's family size ○ Applicant's parents ○ Siblings and step-siblings that are under age 19 	1	\$1,832	Child(ren)'s income Guardian's income Educational income Child support SSI
	2	2,470	
	3	3,108	
	4	3,747	
	5	4,385	
	6	5,023	
	7	5,663	
	8	6,304	
	9	6,946	
	10	7,587	
	Each additional person	+642	

Group/Description	Family Size	Income Limit	Do not count
Pregnant Women <ul style="list-style-type: none"> Age 19 or older Pregnant during any part of the day on which eligibility is being determined Income limit 185% of FPL Family size includes: <ul style="list-style-type: none"> Applicant Legal spouse of applicant Applicant's unborn children Applicant's children including stepchildren under age 19 Unborn children of each pregnant member of the applicant's family size 	1	\$1,832	Child(ren)'s income Parents' income (if living with parents) Educational income Child support SSI
	2	2,470	
	3	3,108	
	4	3,747	
	5	4,385	
	6	5,023	
	7	5,663	
	8	6,304	
	9	6,946	
	10	7,587	
		Each additional person	
Breast and Cervical Cancer Treatment Program (BCCTP) - Criteria is based on 2015 FPL guidelines and was last updated September 2015 on the BCCTP website . <ul style="list-style-type: none"> Less than 65 years old Diagnosed as needing treatment for breast or cervical cancer or specific precancerous conditions Not eligible for any of the programs listed above Income limit 250% FPL Family size includes: <ul style="list-style-type: none"> Applicant Legal spouse of applicant Applicant's children and step-children Unborn children of each pregnant member of the applicant's family size 	1	\$2,452	Child(ren)'s income Educational income Child support SSI
	2	3,319	
	3	4,185	
	4	5,052	
	5	5,919	
	6	6,785	
	7	7,652	
	8	8,519	
		Each additional person	
CHIP Children <ul style="list-style-type: none"> Age 0 through 18 Not eligible for any of the programs listed above Income limit 300% FPL 	1	\$2,970	Child(ren)'s income Guardian's income Educational income Child support SSI
	2	4,005	
	3	5,040	
	4	6,075	
	5	7,110	
	6	8,145	
	7	9,183	
	8	10,223	
	9	11,263	
	10	12,303	
	Each additional person	+1,040	
Former Foster Care <ul style="list-style-type: none"> Aged out of foster care in Oregon on or after their 18th birthday Were in foster care with a PERC 19 on their 18th birthday Not eligible for any of the programs listed above – Do not screen for Medicaid Adult Eligibility ends at age 26 Adoptions Assistance individuals (PERC 19) and foster care individuals with a PERC "GA" should not be approved for this program. 	1	No income limit	Do not count any income for this program.