



## ACA/FAMILY MEDICAID 006

### Table of Standards: Breast & Cervical Cancer Treatment-Income

**Supersedes:** FMA 006 (04/01/2022)

**Reference:** ARM 37.82.101 & .701 and FR Vol. 80, No. 14 (01/22/15)

**Overview:** To qualify for Medicaid coverage under the Montana Breast and Cervical Cancer Treatment Program (MBCCTP), the household's countable gross earned, and unearned income cannot exceed 250 percent of the federal poverty level (FPL) standard.

#### **COMPUTATION:**

The following standards are effective April 1, 2023.

#### **Income Standards for MBCCTP Medicaid (250% FPL)**

<u>Family Size</u>	<u>Monthly Income Standard</u>
1	\$3,038
2	\$4,108
3	\$5,179
4	\$6,250
5	\$7,321
6	\$8,392
7	\$9,463
8	\$10,533
9	\$11,604
10	\$12,675
11	\$13,746
12	\$14,817
13	\$15,888
14	\$16,958
15	\$18,029
16	\$19,100

**Effective Date:** April 01, 2023