



AGED, BLIND, AND DISABLED MEDICAID 014 Table of Standards: Poverty Guidelines

Supersedes: ABD014 (04/01/2023)

Reference: Federal Register Vol. 89, No. 11 (1/17/2024)

Overview: Use the following table to determine eligibility for coverage groups that have income eligibility based on poverty guidelines.

2024 Monthly Poverty Guidelines

Household Size	100%	120%	135%	150%	200%	250%
1 person	\$1255	\$1506	\$1694	\$1883	\$2510	\$3138
2 persons	\$1703	\$2044	\$2300	\$2555	\$3407	\$4258

Effective Date: April 01, 2024