



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

**Supersedes:** ABD 014 (04/01/2020)

**Reference:** Federal Register Vol. 82, No. 19 (01/31/17)

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

### 2020 Monthly Poverty Guidelines

Household Size	100%	120%	135%	150%	200%	250%
1 person	\$1074	\$1288	\$1449	\$1610	\$2147	\$2684
2 persons	\$1452	\$1742	\$1960	\$2178	\$2904	\$3630

**Effective Date:** April 01, 2021