



**COLORADO**

Department of Health Care  
Policy & Financing

## MAGI MEDICAID Monthly Maximum Income Guidelines<sup>1</sup> Effective April 1, 2018

Family Size	Parents & Caretaker Relatives 68% Poverty Level	Adults (Ages 19-65) 133% Poverty Level	Children (Ages 0-18) 142% Poverty Level	Pregnant Women 195% Poverty Level
1	688	1,346	1,437	1,973
2	933	1,825	1,948	2,675
3	1,178	2,304	2,459	3,377
4	1,423	2,782	2,971	4,079
5	1,668	3,261	3,482	4,781
6	1,912	3,740	3,993	5,483
7	2,157	4,219	4,504	6,185
8	2,402	4,698	5,015	6,887
9	2,647	5,176	5,527	7,589
10	2,892	5,655	6,038	8,291

<sup>1</sup> Co-payments may apply; no co-pays for American Indians, Alaska Natives, or for a pregnant woman and her household.

