

Michigan Department  
of Community Health



John Engler, Governor  
James K. Haveman, Jr., Director

State of Michigan

# MIChild

Health Insurance You Can Afford

## BULLETIN

### MIChild Eligibility 02-01

**Distribution:** *MIChild* Manual Holders

**Issue Date:** January 1, 2002

**Subject:** Update of Federal Poverty Level chart to reflect the federal increase for 2002

**Effective Date:** February 1, 2002

**Program Affected:** *MIChild*

This is the annual update of Federal Poverty Level chart to reflect the federal increase for 2002.

#### Manual Maintenance

Replaces Appendix C, Page 1, of *MIChild* Eligibility Manual.

#### Questions

Any questions regarding this bulletin should be directed to: Eligibility Policy Section, Medical Services Administration, P.O. Box 30479, Lansing, Michigan 48909-7979. Questions and policy clarifications should be directed to (517) 241-7187.

Approved

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Director

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The following monthly income limits should be used in determining *MiChild* eligibility. They must be used for Medicaid coverage determinations. These limits are applied after allowable deductions from gross income figures.

**Effective February 2002:**

Number in Family Group	MONTHLY INCOME		
	Maximum Monthly Amount for HEALTHY KIDS 150% of Federal Poverty Level	Maximum Monthly Amount for HEALTHY KIDS for Ages 0 < 1 185% of Federal Poverty Level	Maximum Monthly Amount for <i>MiChild</i> 200% of Federal Poverty Level I
1	\$1,114	\$1,374	\$1,485
2	1,499	1,849	1,999
3	1,884	2,324	2,512
4	2,269	2,799	3,025
5	2,654	3,273	3,539
6	3,039	3,748	4,052
7	3,424	4,223	4,565
8	3,809	4,698	5,079
9	4,194	5,173	5,592
10	4,579	5,648	6,105
For each additional person add	\$385	\$475	514

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