

Medicaid Buy-In Program for Working Adults with Disabilities: Income Chart and Premium Guide

Adult Buy-In Eligibility Overview:

The Medicaid Buy-In Program for Working Adults with Disabilities (Adult Buy-In) is an Adult Medical Assistance program that provides Medicaid benefits for working individuals with disabilities, ages 16 through 64, whose adjusted individual income is at or below 450% of the Federal Poverty Level (FPL).

Eligible individuals receive Medicaid benefits by paying a monthly premium on a sliding scale based on their adjusted income.

Estimation Calculation for Financial Eligibility and Premium Payment:

To qualify financially for the Adult Buy-In, individuals must have an adjusted income at or below 450% FPL. In general, both income from a job and all other sources of income are used to determine eligibility for the Adult Buy-In program; however, about half of your income from a job is excluded in determining eligibility and monthly premium.

The guide below is provided to help estimate income and premium level for the Adult Buy-In program. Please note that there are further income adjustments that may be made at the time of application.

To **estimate** financial eligibility and monthly premium, use the following steps:

A. Family Size:

- a. All eligible individuals are a family size of one for the Adult Buy-In. In the following steps, only the individual applicant's information should be used. If more than one person in your home is applying, complete the following steps for each person.

B. Income Adjustment Information:

- a. Earned Income (income from a job):
 - i. Subtract \$65 from the total amount of monthly income from a job before taxes (Earned Income - 65 = \$\$)
 - ii. Then, divide the remaining amount by 2 ($$$ \div 2 = \text{Estimated Monthly Earned Income}$)
- b. Unearned Income (any income received that is not from a job):
 - i. Subtract \$20 from the total amount of monthly income received that is not from a job ($$$ - 20 = \text{Estimated Monthly Unearned Income}$)

C. Estimate of Total Monthly Income after Income Adjustments:

- a. Add the estimated monthly earned and unearned incomes from the previous steps (Estimated Monthly Earned Income + Estimated Monthly Unearned Income = *Estimate of Total Monthly Income*).

D. Using your *Estimate of Total Monthly Income*, refer to the Income Chart and Premium Guide below.

Income Chart and Premium Guide					
	Monthly Income After Income Adjustments				
Family Size: 1	\$0 - \$383	\$384 - \$1,273	\$1,274 - \$1,915	\$1,916 - \$2,873	\$2,874 - \$4,309
Federal Poverty Level (FPL)	0% - 40%	41% - 133%	134% - 200%	201% - 300%	301% - 450%
Monthly Premium	\$0	\$25	\$90	\$130	\$200

NOTE: This chart is based on 2013 Federal Poverty Level (FPL) guidelines

Visit the Department website at Colorado.gov/hcpf/MedicaidBuyInPrograms for additional information and resources or contact [Customer Service](#) with any questions: 303-866-3513 or 1-800-221-3943.



Improving health care access and outcomes for the people we serve
while demonstrating sound stewardship of financial resources

Colorado.gov/hcpf

December 2013