

2009 - 2010 FEDERAL POVERTY LEVEL CHART FOR PRESUMPTIVE ELIGIBILITY (PE) AND INSTRUCTIONS

Federal Poverty Level Chart – Effective April 1, 2009 through March 31, 2010		
Number of Persons In The Family	200 Percent Monthly Income	200 Percent Annual Income
2	\$ 2,429	\$ 29,140
3	\$ 3,052	\$ 36,620
4	\$ 3,675	\$ 44,100
5	\$ 4,299	\$ 51,580
6	\$ 4,922	\$ 59,060
7	\$ 5,545	\$ 66,540
8	\$ 6,169	\$ 74,020
9	\$ 6,792	\$ 81,500
10	\$ 7,415	\$ 88,980
For each additional family member add:	\$ 624	\$ 7,480

INSTRUCTIONS TO DETERMINE IF APPLICANT QUALIFIES FOR PE SERVICES

Remember: the pregnant woman is counted as a family size of two (2).

1. Find the PE applicant's *total family income* and *family size* as it is stated on the *Provider Use Only* section of the *MC 263 PREMED 1 - Application For Presumptive Eligibility Only*.
2. Compare the applicant's income and family size to the *2009-2010 Federal Poverty Level Chart* above.

EXAMPLES

- A.** A pregnant woman who lives alone requests PE services. Her monthly income is \$2,000. The pregnant woman would be counted as a family size of 2 in the household. Comparing her income of \$2,000 to the chart's income for a family size of 2 (\$2,429), **she would qualify for PE services.**
- B.** A pregnant woman with two children requests PE services. Her annual income is \$45,000. The pregnant woman and her two children would be counted as a four-person (4) family household. Comparing her annual income of \$45,000 to the chart's annual income for a family of four (\$44,100), **she would not qualify for PE services.** The provider should help the patient complete a Medi-Cal application, and encourage her to submit the application to her local county welfare office.

If you have questions regarding this chart or the program, contact the PE Support Unit, Department of Health Care Services, 1501 Capitol Avenue, Bldg 171, MS 4607, Sacramento, CA 95899-7417, 1-800-824-0088, Fax 1-800-409-1498.