



County Indigent Health Care Program

Monthly Income Standard Based on 2023 Federal Poverty Level (FPL)

Household	21% FPL Minimum Income Standard	50% FPL Maximum Income Standard
1	\$255	\$608
2	\$345	\$822
3	\$435	\$1,036
4	\$525	\$1,250
5	\$615	\$1,464
6	\$705	\$1,678
7	\$795	\$1,893
8	\$885	\$2,107
9	\$975	\$2,321
10	\$1,065	\$2,535

A household is eligible if its monthly net income, after rounding down cents, does not exceed the monthly income standard for the CIHCP household's size. The FPL is calculated and published each calendar year at <https://aspe.hhs.gov/poverty-guidelines>.