

Advance Premium Tax Credit Eligibility Income Limits for Plan-Year 2019

Household Size	Monthly Limit		Annual Limit	
	Minimum Income	Maximum Income	Minimum Income	Maximum Income
	(100% FPL)	(400% FPL)	(100% FPL)	(400% FPL)
1	\$1,012	\$4,047	\$12,140	\$48,560
2	\$1,372	\$5,487	\$16,460	\$65,840
3	\$1,732	\$6,927	\$20,780	\$83,120
4	\$2,092	\$8,367	\$25,100	\$100,400
5	\$2,452	\$9,807	\$29,420	\$117,680
6	\$2,812	\$11,247	\$33,740	\$134,960
7	\$3,172	\$12,687	\$38,060	\$152,240
8	\$3,532	\$14,127	\$42,380	\$169,520
each additional person, add	\$360	\$1,440	\$4,320	\$17,280

Advance Premium Tax Credit (APTC) eligibility is determined by the Idaho Department of Health and Welfare.

To receive APTC, you must meet the following eligibility criteria:

- Tax filer (if married, must file a joint tax return)
- Have income between 100-400% of the Federal Poverty Level
- Not eligible for any other Federally assisted health care program (Medicare, VA, Medicaid)
- Have Legally Present immigration status
- Not be eligible or receiving employer sponsored insurance

All questions regarding APTC and other program eligibility (Medicaid, CHIP, etc.) should be directed to the Department of Health and welfare.

- Phone: 1-877-456-1233
- Email: MyBenefits@dhw.idaho.gov