

**Your Texas Benefits screens for potential eligibility for Medicaid & other programs provided by Texas state agencies.**  
**Your Texas Benefits may be accessed at: [www.yourtexasbenefits.com](http://www.yourtexasbenefits.com)**

## 2014 MONTHLY GROSS INCOME SCREENING TABLE

(This table is for screening purposes only, not for eligibility determination.)

Form 222

F A M I L Y	S I Z E	MEDICAID								CIHCP		Title V - MCH WIC	PHC EPHC CHIP BCCS CSHCN EPILEPSY	FP
		Medically Needy		Children under 1 / Pregnant Females 185% FPL		Children 1 thru 5 133% FPL		Children 6 thru 18 133% FPL		21% FPL Min. Income Standard		185% FPL	200% FPL	250% FPL
		No Job	W/Job	No Job	W/Job	No Job	W/Job	No Job	W/Job	No Job	W/Job			
1		\$104	\$224	\$1,800	\$1,920	\$1,294	\$1,414	\$1,294	\$1,414	\$205	\$428	\$1,800	\$1,945	\$2,432
2		216	336	2,426	2,546	1,744	1,864	1,744	1,864	276	534	2,426	2,622	3,277
3		275	395	3,051	3,171	2,194	2,314	2,194	2,314	347	641	3,051	3,299	4,125
4		308	428	3,677	3,797	2,644	2,764	2,644	2,764	418	747	3,677	3,975	4,970
5		357	477	4,303	4,423	3,094	3,214	3,094	3,214	489	854	4,303	4,652	5,815
6		392	512	4,929	5,049	3,544	3,664	3,544	3,664	560	960	4,929	5,329	6,662
7		440	560	5,555	5,675	3,994	4,114	3,994	4,114	631	1,067	5,555	6,005	7,507
8		475	595	6,181	6,301	4,444	4,564	4,444	4,564	702	1,173	6,181	6,682	8,352
9		532	652	6,807	6,927	4,894	5,014	4,894	5,014	773	1,280	6,807	7,359	9,200
10		567	687	7,433	7,553	5,344	5,464	5,344	5,464	844	1,386	7,433	8,035	10,045
For each additional Member add:		57		611		439		439				611	660	825

Based on 2014 Federal Poverty Guideline (FPG)

**Effective April 1, 2014**

○ **Family Composition Section** – Enter the total number of family members in each category listed. Total should include a person living alone or two or more persons living together where legal responsibility for support exists, excluding disqualified persons. Legal responsibility for support exists between: Persons who are legally married (including common-law marriage), a legal parent and a minor child (including unborn children), or a managing conservator and a minor child.  
 Program counts the unborn child(ren) in the family size if the pregnant woman receives or is potentially eligible to receive benefits under the program.

○ **Income Section** – W/Job figure amounts are based on one person working and no dependent care or adult with disabilities care expense deductions. If two people are working, add an additional \$120.  
 Income may be either earned or unearned. If actual or projected income is not received monthly, convert it to a monthly amount using one of the following methods:

- Weekly income x 4.33
- Every two weeks x 2.17
- Twice a month x 2.0

Dependent childcare expenses, adult with disabilities care expenses and child support payments being made shall be deducted from total income in determining eligibility. Allowable dependent childcare deductions are actual expenses up to \$200 per child per month for children under age 2 and \$175 per child per month for children age 2 or older. And \$175 per month for each adult with disabilities.