

Basic Health Care Program for Defined Contra Costa Residents

2024/2025 FEDERAL HHS POVERTY GUIDELINES [48 States]

Family Size	Annual Income	Monthly FPL 100%	Percentage Multiples of Monthly Poverty Level				
			133%	150%	200%	250%	300%
1	\$15,060	\$1,255	\$1,670	\$1,883	\$2,510	\$3,138	\$3,765
2	\$20,440	\$1,704	\$2,267	\$2,556	\$3,408	\$4,260	\$5,112
3	\$25,820	\$2,152	\$2,863	\$3,228	\$4,304	\$5,380	\$6,456
4	\$31,200	\$2,600	\$3,458	\$3,900	\$5,200	\$6,500	\$7,800
5	\$36,580	\$3,049	\$4,056	\$4,574	\$6,098	\$7,623	\$9,147
6	\$41,960	\$3,497	\$4,652	\$5,246	\$6,994	\$8,743	\$10,491
7	\$47,340	\$3,945	\$5,247	\$5,918	\$7,890	\$9,863	\$11,835
8	\$52,720	\$4,394	\$5,845	\$6,591	\$8,788	\$10,985	\$13,182

Reference: Federal Register, January 17, 2024.

[Federal Register :: Annual Update of the HHS Poverty Guidelines](#)