

**Family Copayment for Subsidized Child Care**  
Income Eligibility and Copay Calculation Table  
Effective April 1, 2024

	\$0 Copay (0%-20% SMI)	\$65 Copay (20%-36% SMI)	\$90 Copay (36%-50% SMI)	\$165 Copay (50%-60% SMI)	\$215 Copay (60%-65% SMI)	Income Limit (85% SMI)
<b>Family Size</b>	<b>Countable Monthly Income</b>					
1	\$0 to \$1,043	\$1,044 to \$1,878	\$1,879 to \$2,609	\$2,610 to \$3,130	\$3,131 to \$3,391	\$4,435
2	\$0 to \$1,364	\$1,365 to \$2,456	\$2,457 to \$3,411	\$3,412 to \$4,094	\$4,095 to \$4,435	\$5,799
3	\$0 to \$1,685	\$1,686 to \$3,034	\$3,035 to \$4,214	\$4,215 to \$5,057	\$5,058 to \$5,478	\$7,164
4	\$0 to \$2,006	\$2,007 to \$3,612	\$3,613 to \$5,017	\$5,018 to \$6,020	\$6,021 to \$6,522	\$8,529
5	\$0 to \$2,328	\$2,329 to \$4,190	\$4,191 to \$5,820	\$5,821 to \$6,984	\$6,985 to \$7,566	\$9,894
6	\$0 to \$2,649	\$2,650 to \$4,768	\$4,769 to \$6,622	\$6,623 to \$7,947	\$7,948 to \$8,609	\$11,258
7	\$0 to \$2,709	\$2,710 to \$4,876	\$4,877 to \$6,773	\$6,774 to \$8,128	\$8,129 to \$8,805	\$11,514
8	\$0 to \$2,769	\$2,770 to \$4,985	\$4,986 to \$6,923	\$6,924 to \$8,308	\$8,309 to \$9,001	\$11,770
9	\$0 to \$2,829	\$2,830 to \$5,093	\$5,094 to \$7,074	\$7,075 to \$8,489	\$8,490 to \$9,196	\$12,026
10	\$0 to \$2,889	\$2,890 to \$5,201	\$5,202 to \$7,224	\$7,225 to \$8,669	\$8,670 to \$9,392	\$12,282
11	\$0 to \$2,950	\$2,951 to \$5,310	\$5,311 to \$7,375	\$7,376 to \$8,850	\$8,851 to \$9,588	\$12,538
12	\$0 to \$3,010	\$3,011 to \$5,418	\$5,419 to \$7,526	\$7,527 to \$9,031	\$9,032 to \$9,783	\$12,794
13	\$0 to \$3,070	\$3,071 to \$5,527	\$5,528 to \$7,676	\$7,677 to \$9,211	\$9,212 to \$9,979	\$13,050
14	\$0 to \$3,130	\$3,131 to \$5,635	\$5,636 to \$7,827	\$7,828 to \$9,392	\$9,393 to \$10,175	\$13,305
15	\$0 to \$3,191	\$3,192 to \$5,743	\$5,744 to \$7,977	\$7,978 to \$9,573	\$9,574 to \$10,370	\$13,561
16	\$0 to \$3,251	\$3,252 to \$5,852	\$5,853 to \$8,128	\$8,129 to \$9,753	\$9,754 to \$10,566	\$13,817
17	\$0 to \$3,311	\$3,312 to \$5,960	\$5,961 to \$8,278	\$8,279 to \$9,934	\$9,935 to \$10,762	\$14,073
18	\$0 to \$3,371	\$3,372 to \$6,068	\$6,069 to \$8,429	\$8,430 to \$10,114	\$10,115 to \$10,957	\$14,329
19	\$0 to \$3,431	\$3,432 to \$6,177	\$6,178 to \$8,579	\$8,580 to \$10,295	\$10,296 to \$11,153	\$14,585
20	\$0 to \$3,492	\$3,493 to \$6,285	\$6,286 to \$8,730	\$8,731 to \$10,476	\$10,477 to \$11,349	\$14,841

<sup>1</sup>The program uses State Median Income (SMI) to determine copay categories and income limits. The \$215 copay level is reserved for reapplications only; new applications with income over 60% SMI would be considered to be over income and be denied.

<sup>2</sup>The income limit column is not used to determine eligibility at application; it is used to determine the point at which a consumer's income would warrant case termination during their eligibility period.