

**COVERAGE YEAR 2018**

**FEDERAL POVERTY GUIDELINES (COVERAGE YEAR 2018)**

# in Household	100% FPL	138% FPL	200% FPL	250% FPL	300% FPL	400% FPL
1	\$12,060	\$16,643	\$24,120	\$30,150	\$36,180	\$48,240
2	\$16,240	\$22,411	\$32,480	\$40,600	\$48,720	\$64,960
3	\$20,420	\$28,180	\$40,840	\$51,050	\$61,260	\$81,680
4	\$24,600	\$33,948	\$49,200	\$61,500	\$73,800	\$98,400
5	\$28,780	\$39,716	\$57,560	\$71,950	\$86,340	\$115,120
6	\$32,960	\$45,485	\$65,920	\$82,400	\$98,880	\$131,840
7	\$37,140	\$51,253	\$74,280	\$92,850	\$111,420	\$148,560
8	\$41,320	\$57,022	\$82,640	\$103,300	\$123,960	\$165,280

For households with more than 8, add \$4,180 for each additional person.

Note: Eligibility for premium tax credits in coverage year 2018 is based on poverty guidelines for 2017. FPL = federal poverty line.

Source (plus Hawai'i and Alaska guidelines): [aspe.hhs.gov/poverty-guidelines](http://aspe.hhs.gov/poverty-guidelines)

**EXPECTED PREMIUM CONTRIBUTION (COVERAGE YEAR 2018)**

Annual Household Income (% of FPL)	Less than 133% FPL	133% FPL	138% FPL	150% FPL	200% FPL	250% FPL	300-400% FPL	More than 400% FPL
Expected Premium Contribution (% of Income)	2.01%	3.02%	3.32%	4.03%	6.34%	8.10%	9.56%	n/a

Source: [www.irs.gov/pub/irs-drop/rp-17-36.pdf](http://www.irs.gov/pub/irs-drop/rp-17-36.pdf)

**EMPLOYER-SPONSORED INSURANCE AFFORDABILITY THRESHOLDS (COVERAGE YEAR 2018)**

	Eligibility for Premium Tax Credits <i>Despite offer of employer-sponsored coverage</i>	Eligibility for Affordability Exemption <i>In the Marketplace or on the tax return</i>
Considered unaffordable if over:	9.56% of household income	8.05% of household income
Household income:	Includes non-taxed social security income	Does <b>not</b> include non-taxed social security income
Family coverage determined by cost of:	Employee-only coverage	Covering all family members

Note: For 2017 coverage year exemptions (i.e. tax year 2017), the affordability threshold is 8.16% of household income.

Source: [www.irs.gov/pub/irs-drop/rp-17-36.pdf](http://www.irs.gov/pub/irs-drop/rp-17-36.pdf)

**OUT-OF-POCKET MAXIMUM (COVERAGE YEAR 2018)**

Plan Type	Income Level	Out-of-Pocket Maximum	
		Individual	Family
All plans <sup>1</sup>	All income levels	\$7,350	\$14,700
CSR Silver Plan 73% AV <sup>2</sup>	Between 201%-250% FPL	\$5,850	\$11,700
CSR Silver Plan 87% AV <sup>2</sup>	Between 151%-200% FPL	\$2,450	\$4,900
CSR Silver Plan 94% AV <sup>2</sup>	Up to 150% FPL	\$2,450	\$4,900

<sup>1</sup>Applies to all plans in the individual and group market. <sup>2</sup>Applies only to silver plans eligible for CSR sold in the Marketplace.

Note: CSR = cost-sharing reductions. AV = actuarial value.

Source: [www.federalregister.gov/documents/2016/12/22/2016-30433/patient-protection-and-affordable-care-act-hhs-notice-of-benefit-and-payment-parameters-for-2018](http://www.federalregister.gov/documents/2016/12/22/2016-30433/patient-protection-and-affordable-care-act-hhs-notice-of-benefit-and-payment-parameters-for-2018)