

What am I likely eligible for?

In the chart below, first find your family size and follow that row over to the dollar amounts. If you earn less than the income amount listed in one column, you may be eligible for that coverage or assistance.

Federal Poverty Level		Premium Tax Credits (no income limit)							
		Cost-Sharing Reductions					Members of federally recognized Tribes		
		Oregon Health Plan (OHP)		OHP for Pregnant People	OHP Bridge ¹	OHP Special Programs ²	OHP for Kids Under 19		
		100%	138%	190%	200%	205%	250%	300%	305%
Family Size	1	\$15,650 \$1,304/mo	\$1,800/mo	Plus one per each expected baby	\$31,300 \$2,608/mo	\$2,674/mo	\$37,650 \$3,137/mo	\$45,180 \$3,765/mo	\$3,978/mo
	2	\$21,150 \$1,763/mo	\$2,432/mo	\$3,349/mo	\$42,300 \$3,525/mo	\$3,613/mo	\$51,100 \$4,258/mo	\$61,320 \$5,110/mo	\$5,376/mo
	3	\$26,650 \$2,221/mo	\$3,065/mo	\$4,220/mo	\$53,300 \$4,442/mo	\$4,553/mo	\$64,550 \$5,379/mo	\$77,460 \$6,455/mo	\$6,774/mo
	4	\$32,150 \$2,679/mo	\$3,697/mo	\$5,090/mo	\$64,300 \$5,358/mo	\$5,492/mo	\$78,000 \$6,500/mo	\$93,600 \$7,800/mo	\$8,171/mo
	5	\$37,650 \$3,138/mo	\$4,330/mo	\$5,961/mo	\$75,300 \$6,275/mo	\$6,432/mo	\$91,450 \$7,620/mo	\$109,740 \$9,145/mo	\$9,569/mo
	6	\$43,150 \$3,596/mo	\$4,962/mo	\$6,832/mo	\$86,300 \$7,192/mo	\$7,371/mo	\$104,900 \$8,741/mo	\$125,880 \$10,490/mo	\$10,967/mo
	7	\$48,650 \$4,054/mo	\$5,595/mo	\$7,703/mo	\$97,300 \$8,103/mo	\$8,311/mo	\$118,350 \$9,862/mo	\$142,020 \$11,835/mo	\$12,365/mo
	8	\$54,150 \$4,513/mo	\$6,227/mo	\$8,574/mo	\$108,300 \$9,025/mo	\$9,251/mo	\$131,800 \$10,983/mo	\$158,160 \$13,180/mo	\$13,763/mo
	9	\$59,650 \$4,971/mo	\$6,860/mo	\$9,445/mo	\$119,300 \$9,942/mo	\$10,190/mo	\$145,250 \$12,104/mo	\$174,300 \$14,525/mo	\$15,161/mo

¹OHP Bridge - Basic Health Program (BHP) income limit is 200%. American Indians and Alaska Natives whose income is below 205% monthly will qualify for OHP Bridge - Basic Medicaid. To learn about these programs visit OHP.Oregon.gov/Bridge.

²OHP Special Programs includes OHP for Youth with Special Health Care Needs (YSCHN) and OHP Bridge - Basic Medicaid for American Indians and Alaska Natives.

Oregon Health Plan eligibility is based on gross monthly income. The Marketplace bases eligibility on estimated gross annual income. This chart provides only an estimate of an individual or family's likely eligibility. The Oregon Health Plan begins using 2025 federal poverty levels to consider eligibility on March 1, 2025. The Marketplace begins using 2025 federal poverty levels on Nov. 1, 2025 for the 2026 plan year. This chart is valid March 1, 2025 to Oct. 31, 2025. An updated version will be available at OregonHealthCare.gov at that time.

Find **free local help** on OregonHealthCare.gov.



我可能有資格獲得什麼？

在下面的圖表中，首先找到您的家庭人數，然後順著該行找到相應的美元金額。如果您的收入低於某一列所列的收入金額，您可能有資格獲得該保險或援助。

不符合 OHP 資格？ 您可能有資格透過市場 獲得經濟援助		保費稅收抵免額 (無收入限制)							
		費用分攤減免				聯邦承認的部落成員			
		奧勒岡健康計畫 (Oregon Health Plan, OHP)		適合孕婦的 OHP	OHP Bridge ¹	OHP 特別計劃 ²	適合 19 歲以下兒童的 OHP		
聯邦貧困線	100%	138%	190%	200%	205%	250%	300%	305%	
家庭人數	1	\$15,650 \$1,304/月	\$1,800/月	每個預產嬰兒加一個	\$31,300 \$2,608/月	\$2,674/月	\$37,650 \$3,137/月	\$45,180 \$3,765/月	\$3,978/月
	2	\$21,150 \$1,763/月	\$2,432/月	\$3,349/月	\$42,300 \$3,525/月	\$3,613/月	\$51,100 \$4,258/月	\$61,320 \$5,110/月	\$5,376/月
	3	\$26,650 \$2,221/月	\$3,065/月	\$4,220/月	\$53,300 \$4,442/月	\$4,553/月	\$64,550 \$5,379/月	\$77,460 \$6,455/月	\$6,774/月
	4	\$32,150 \$2,679/月	\$3,697/月	\$5,090/月	\$64,300 \$5,358/月	\$5,492/月	\$78,000 \$6,500/月	\$93,600 \$7,800/月	\$8,171/月
	5	\$37,650 \$3,138/月	\$4,330/月	\$5,961/月	\$75,300 \$6,275/月	\$6,432/月	\$91,450 \$7,620/月	\$109,740 \$9,145/月	\$9,569/月
	6	\$43,150 \$3,596/月	\$4,962/月	\$6,832/月	\$86,300 \$7,192/月	\$7,371/月	\$104,900 \$8,741/月	\$125,880 \$10,490/月	\$10,967/月
	7	\$48,650 \$4,054/月	\$5,595/月	\$7,703/月	\$97,300 \$8,103/月	\$8,311/月	\$118,350 \$9,862/月	\$142,020 \$11,835/月	\$12,365/月
	8	\$54,150 \$4,513/月	\$6,227/月	\$8,574/月	\$108,300 \$9,025/月	\$9,251/月	\$131,800 \$10,983/月	\$158,160 \$13,180/月	\$13,763/月
	9	\$59,650 \$4,971/月	\$6,860/月	\$9,445/月	\$119,300 \$9,942/月	\$10,190/月	\$145,250 \$12,104/月	\$174,300 \$14,525/月	\$15,161/月

¹OHP Bridge – 基本健康計畫 (Basic Health Program, BHP) 的收入限額為 200%。收入低於 205% 的美洲印第安人和阿拉斯加原住民將有資格享受 OHP Bridge – 基本 Medicaid。如需瞭解這些計畫，請造訪 OHP.Oregon.gov/Bridge。

²OHP 特別計劃包括 OHP for Youth with Special Health Care Needs (YSCHN) 和 OHP Bridge - 美洲印第安人和阿拉斯加原住民的基本醫療補助。

奧勒岡健康計畫 (Oregon Health Plan) 的資格認證基於每月總收入。市場根據預估的年總收入確定資格。此圖表僅提供對個人或家庭可能資格的估算。俄勒岡州健康計畫將從 2025 年 3 月 1 日開始使用 2025 年聯邦貧窮水準來確定資格。市場將於 2025 年 11 月 1 日開始使用 2025 年聯邦貧窮水準作為 2026 計畫年度的參考。此圖表有效期為 2025 年 3 月 1 日至 2025 年 10 月 31 日。

在 OregonHealthCare.gov 網站上查找免費的當地幫助

