

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	\$15,060 \$1,255/mo	\$1,732/mo	Plus one per each expected baby	\$30,120 \$2,510/mo	\$2,573/mo	\$37,650 \$3,137/mo	\$45,180 \$3,765/mo	\$3,828/mo
	2	\$20,440 \$1,703/mo	\$2,351/mo	\$3,237/mo	\$40,880 \$3,407/mo	\$3,492/mo	\$51,100 \$4,258/mo	\$61,320 \$5,110/mo	\$5,196/mo
	3	\$25,820 \$2,152/mo	\$2,970/mo	\$4,089/mo	\$51,640 \$4,304/mo	\$4,411/mo	\$64,550 \$5,379/mo	\$77,460 \$6,455/mo	\$6,563/mo
	4	\$31,200 \$2,600/mo	\$3,588/mo	\$4,940/mo	\$62,400 \$5,200/mo	\$5,330/mo	\$78,000 \$6,500/mo	\$93,600 \$7,800/mo	\$7,930/mo
	5	\$36,580 \$3,049/mo	\$4,207/mo	\$5,792/mo	\$73,160 \$6,097/mo	\$6,249/mo	\$91,450 \$7,620/mo	\$109,740 \$9,145/mo	\$9,298/mo
	6	\$41,960 \$3,497/mo	\$4,826/mo	\$6,644/mo	\$83,920 \$6,994/mo	\$7,168/mo	\$104,900 \$8,741/mo	\$125,880 \$10,490/mo	\$10,665/mo
	7	\$47,340 \$3,945/mo	\$5,445/mo	\$7,496/mo	\$94,680 \$7,890/mo	\$8,087/mo	\$118,350 \$9,862/mo	\$142,020 \$11,835/mo	\$12,033/mo
	8	\$52,720 \$4,394/mo	\$6,063/mo	\$8,348/mo	\$105,440 \$8,787/mo	\$9,006/mo	\$131,800 \$10,983/mo	\$158,160 \$13,180/mo	\$13,400/mo
	9	\$58,100 \$4,842/mo	\$6,682/mo	\$9,200/mo	\$116,200 \$9,684/mo	\$9,925/mo	\$145,250 \$12,104/mo	\$174,300 \$14,525/mo	\$14,768/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 2024 federal poverty levels to consider eligibility on March 1, 2024. The Marketplace begins using 2024 federal poverty levels on Nov. 1, 2024 for the 2025 plan year. This chart is valid Nov. 1, 2024 to Feb. 28, 2025. An updated version will be available at OregonHealthCare.gov at that time.

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



我可能有资格获得什么?

在下面的图表中, 首先找到您的家庭人数, 然后顺着该行找到相应的美元金额。如果您的收入低于某一列所列的收入金额, 您可能有资格获得该保险或援助。

不符合 OHP 资格? 您可能有资格通过市场 获得经济援助		保费税收抵免额 (无收入限制)							
		费用分摊减免				联邦承认的部落成员			
		俄勒冈健康计划 (Oregon Health Plan, OHP)		适合孕妇的 OHP	OHP Bridge ¹	OHP 特别计划 ²	适合 19 岁以下儿童的 OHP		
联邦贫困线	100%	138%	190%	200%	205%	250%	300%	305%	
家庭人数	1	\$15,060 \$1,255/月	\$1,732/月	每个预产 期婴儿加一个	\$30,120 \$2,510/月	\$2,573/月	\$37,650 \$3,137/月	\$45,180 \$3,765/月	\$3,828/月
	2	\$20,440 \$1,703/月	\$2,351/月	\$3,237/月	\$40,880 \$3,407/月	\$3,492/月	\$51,100 \$4,258/月	\$61,320 \$5,110/月	\$5,196/月
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¹OHP Bridge – 基本健康计划 (Basic Health Program, BHP) 的收入限额为 200%。收入低于 205% 的美洲印第安人和阿拉斯加原住民将有资格享受 OHP Bridge – 基本 Medicaid。如需了解这些计划, 请访问 OHP.Oregon.gov/Bridge。

²OHP 特别项目包括针对有特殊医疗保健需求的青少年的 OHP (YSCHN) 和 OHP Bridge - 针对美国印第安人和阿拉斯加原住民的基本医疗补助。

俄勒冈健康计划 (Oregon Health Plan) 的资格认证基于每月总收入。市场根据预估的年总收入确定资格。此图表仅提供对个人或家庭可能资格的估算。俄勒冈健康计划于 2024 年 3 月 1 日开始使用 2024 年联邦贫困线来考虑资格。对于 2025 计划年度, 市场将于 2024 年 11 月 1 日开始使用 2024 年联邦贫困线。此图表的有效期为 2024 年 11 月 1 日至 2025 年 2 月 28 日。届时, 您可以在 OregonHealthCare.gov 网站上找到更新后的版本。

在 OregonHealthCare.gov 网站上查找免费的本地帮助。

