



Missouri Department of Health and Senior Services

P.O. Box 570, Jefferson City, MO 65102-0570 Phone: 573-751-6400 FAX: 573-751-6010
RELAY MISSOURI for Hearing and Speech Impaired 1-800-735-2966 VOICE 1-800-735-2466

Gail Vasterling
Acting Director



Jeremiah W. (Jay) Nixon
Governor

January 2013 through January 2014

Financial Eligibility guidelines are based on the U.S. Department of Health and Human Services Poverty Income Guidelines at or below, 185% of poverty. All third party payors must be utilized before DHSS will consider reimbursement.

Congress has taken action to keep the 2013 poverty guidelines in effect beginning January 24, 2013.

FAMILY SIZE	ANNUAL (Maximum)	MONTHLY (Maximum)	WEEKLY (Maximum)
1	\$21,256	\$1,771.33	\$408.77
2	\$28,693	\$2,391.08	\$551.79
3	\$36,130	\$3,010.83	\$694.81
4	\$43,567	\$3630.58	\$837.83
5	\$51,004	\$4,250.00	\$980.85
6	\$58,441	\$4,870.08	\$1,123.87
7	\$65,878	\$5,489.83	\$1,266.88
8	\$73,315	\$6,109.58	\$1,409.90

(For families that exceed 8 members, add \$7,437.00 for each additional family member to the annual guideline.)

Note: Financial eligibility for the Missouri Department of Health and Senior Services, Adult Genetics Programs (Cystic Fibrosis – Hemophilia – Sickle Cell) is 1.85 times the Federal 2013 HHS Poverty Guidelines*

*Reference <http://aspe.hhs.gov/poverty/13poverty.cfm#guidelines>

www.health.mo.gov

Healthy Missourians for life.

The Missouri Department of Health and Senior Services will be the leader in promoting, protecting and partnering for health.

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER: Services provided on a nondiscriminatory basis.