2025 Child Health Plus Monthly Income Eligibility and Premiums

Family Size	Free Insurance up to 222% FPL	$15/ Child Max. $45/ Family up to 250% FPL	$30/ Child Max. $90/ Family up to 300% FPL	$45/ Child Max. $135/ Family up to 350% FPL	$60/ Child Max. $180/ Family up to 400% FPL	Full Premium Per Child Per Month; premiums vary by health plan greater than 400% FPL
1	$2,896	$3,261	$3,913	$4,565	$5,217	over $5,217
2	$3,913	$4,407	$5,288	$6,169	$7,050	over $7,050
3	$4,931	$5,553	$6,663	$7,773	$8,884	over $8,884
4	$5,948	$6,698	$8,038	$9,378	$10,717	over $10,717
5	$6,966	$7,844	$9,413	$10,982	$12,550	over $12,550
6	$7,983	$8,990	$10,788	$12,586	$14,384	over $14,384
7	$9,001	$10,136	$12,163	$14,190	$16,217	over $16,217
8	$10,018	$11,282	$13,538	$15,794	$18,050	over $18,050
each additional person, add	$1,018	$1,146	$1,375	$1,605	$1,834	$1,834

Subject to annual income updates.

Source: https://www.health.ny.gov/health_care/child_health_plus/eligibility_and_cost.htm

2025 Child Health Plus Annual Income Eligibility and Premiums

Family Size	Free Insurance up to 222% FPL	$15/ Child Max. $45/ Family up to 250% FPL	$30/ Child Max. $90/ Family up to 300% FPL	$45/ Child Max. $135/ Family up to 350% FPL	$60/ Child Max. $180/ Family up to 400% FPL	Full Premium Per Child Per Month; premiums vary by health plan greater than 400% FPL
1	$34,743	$39,125	$46,950	$54,775	$62,600	over $62,600
2	$46,953	$52,875	$63,450	$74,025	$84,600	over $84,600
3	$59,163	$66,625	$79,950	$93,275	$106,600	over $106,600
4	$71,373	$80,375	$96,450	$112,525	$128,600	over $128,600
5	$83,583	$94,125	$112,950	$131,775	$150,600	over $150,600
6	$95,793	$107,875	$129,450	$151,025	$172,600	over $172,600
7	$108,003	$121,625	$145,950	$170,275	$194,600	over $194,600
8	$120,213	$135,375	$162,450	$189,525	$216,600	$216,600
each additional person, add	$12,265	$13,750	$16,500	$19,250	$22,000	$22,000

Subject to annual income updates.

Source: https://www.health.ny.gov/health_care/child_health_plus/eligibility_and_cost.htm