When assigning the proper Medicaid subtypes, use the following criteria:

Age	Insurance Y or N	Income	Subtype
Newborn age 0-1	With or Without Insurance	N/A - born to a woman receiving Medicaid in month of delivery	BA
Child age 0-5	With or Without Insurance	Income is equal to or less than 159% FPL	HC
Child age 0-18	With Insurance	Income is above 159% and equal to or less than 177% FPL	H1
Child age 6-18	With Insurance	Income is above 124% and equal to or less than 159% FPL	S1
Child age 6-18	With or Without Insurance	Income is equal to or less than 124% FPL	SU
Child age 6-18	Without Insurance	Income is above 124% and equal to or less than 159% FPL	S2
Child of any age under 19	Without Insurance	Income is above 159% and equal to or less than 177% FPL	H2
Child of any age under 19	Without Insurance	Income is above 177% and equal to or less than 203% FPL	CP
Pregnant Woman	With or Without Insurance	Income is equal to or less than 159% FPL	PR
Pregnant Woman	With or Without Insurance	Income is above 159% and equal to or less than 200% FPL	PX
Postpartum coverage	With or Without Insurance	Income is equal to or less than 159% FPL	PB
Postpartum coverage	With or Without Insurance	Income is above 159% and equal to or less than 200% FPL	PC

MAGI HH SIZE	FPL Standards	KIDS SUBTYPE: SU	KIDS SUBTYPE: S1 , S2, HC	KIDS SUBTYPE: H1, H2	KIDS SUBTYPE: CP	Pregnant Woman: PR, PB	Pregnant Woman: PX, PC	Caretaker Relative & Under 21
	100%	124%	159%	177%	203%	159%	200%	
1	$1,215	$1,507	$1,932	$2,151	$2,467	$1,932	$2,430	$1,487
2	$1,639	$2,032	$2,605	$2,900	$3,326	$2,605	$3,277	$2,370
3	$2,062	$2,557	$3,279	$3,650	$4,186	$3,279	$4,124	$2,904
4	$2,485	$3,082	$3,952	$4,399	$5,045	$3,952	$4,970	$3,437
5	$2,908	$3,607	$4,625	$5,148	$5,904	$4,625	$5,817	$3,972
6	$3,332	$4,132	$5,298	$5,898	$6,764	$5,298	$6,664	$4,505
7	$3,755	$4,657	$5,971	$6,647	$7,623	$5,971	$7,510	$5,038
8	$4,179	$5,182	$6,644	$7,396	$8,483	$6,644	$8,357	$5,571
Each Additional	$424	$525	$674	$750	$860	$674	$847	$534