

West Virginia



Children's Health Insurance Program

CALL OUR HELPLINE: 1-877-982-2447
www.wvchip.org

Income Guidelines To Qualify For CHIP*

Free Health Care Coverage*

Family Size	Maximum Monthly Income	Maximum Yearly Income
2	\$1,562	\$18,735
3	\$1,959	\$23,505
4	\$2,357	\$28,275
5	\$2,754	\$33,045
6	\$3,152	\$37,815
7	\$3,549	\$42,585

Low-Cost Health Care Coverage*

Family Size	Maximum Monthly Income	Maximum Yearly Income
2	\$2,082	\$24,980
3	\$2,612	\$31,340
4	\$3,142	\$37,700
5	\$3,672	\$44,060
6	\$4,202	\$50,420
7	\$4,732	\$56,780

*Several income disregards may be subtracted from applicant's gross income, call the CHIP toll-free helpline for the complete guide on qualifying for CHIP.

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