

How Much Tax Credit Do I Get?

Example		Your Family
A. Cost of an Efficient Plan for this Family		
Second Lowest Cost Silver Plan	Silver Lo Plan	
Yearly Cost of this Plan	\$8,400	
B. Expected Family Contribution		
Family Size	2	
Yearly Income	\$48,000	
Expected Family Contribution	as a percentage from Income Table	9.5%
	in dollars	\$4,560
C. Tax Credit Amount		
Yearly Tax Credit (A – B = C)	\$3,840	
Monthly Tax Credit	\$320	

Whether you take the tax credit now or later, you pay the same amount for your health plan by the time you file your taxes.

How Does the Tax Credit Affect My Premium?

If You Take It Now		Plan 1	Plan 2	Plan 3
Monthly Health Plan Cost	\$ 700			
Minus Monthly Tax Credit <i>This amount is the same for any plan you choose</i>	– \$ 320			
Your Monthly Payment	\$ 380			
Yearly Cost of Coverage <i>Monthly Payment x 12</i>	\$ 4,560			
If You Take It Later		Plan 1	Plan 2	Plan 3
Monthly Health Plan Cost	\$ 700			
Full Cost of Yearly Coverage <i>Monthly Cost x 12</i>	\$ 8,400			
Minus Yearly Tax Credit <i>This amount is the same for any plan you choose</i>	– \$ 3,840			
Yearly Cost of Coverage	\$ 4,560			

Ready to enroll? Call or visit your state's Health Insurance Marketplace.

Income Table

Family Size = 1							
If your income is	<i>Less than</i> \$15,280	<i>More than</i> \$15,280 <i>but less than</i> \$17,240	<i>More than</i> \$17,240 <i>but less than</i> \$22,980	<i>More than</i> \$22,980 <i>but less than</i> \$28,730	<i>More than</i> \$28,730 <i>but less than</i> \$34,470	<i>More than</i> \$34,470 <i>but less than</i> \$45,960	<i>More than</i> \$45,960
Expected Family Contribution as a percent of income is	2.0%	3.0%	4.0%	6.3%	8.1%	9.5%	You pay full amount of premium

Family Size = 2							
If your income is	<i>Less than</i> \$20,630	<i>More than</i> \$20,630 <i>but less than</i> \$23,270	<i>More than</i> \$23,270 <i>but less than</i> \$31,020	<i>More than</i> \$31,020 <i>but less than</i> \$38,780	<i>More than</i> \$38,780 <i>but less than</i> \$46,530	<i>More than</i> \$46,530 <i>but less than</i> \$62,040	<i>More than</i> \$62,040
Expected Family Contribution as a percent of income is	2.0%	3.0%	4.0%	6.3%	8.1%	9.5%	You pay full amount of premium

Family Size = 3							
If your income is	<i>Less than</i> \$25,970	<i>More than</i> \$25,970 <i>but less than</i> \$29,300	<i>More than</i> \$29,300 <i>but less than</i> \$39,060	<i>More than</i> \$39,060 <i>but less than</i> \$48,830	<i>More than</i> \$48,830 <i>but less than</i> \$58,590	<i>More than</i> \$58,590 <i>but less than</i> \$78,120	<i>More than</i> \$78,120
Expected Family Contribution as a percent of income is	2.0%	3.0%	4.0%	6.3%	8.1%	9.5%	You pay full amount of premium

Family Size = 4							
If your income is	<i>Less than</i> \$31,320	<i>More than</i> \$31,320 <i>but less than</i> \$35,330	<i>More than</i> \$35,330 <i>but less than</i> \$47,100	<i>More than</i> \$47,100 <i>but less than</i> \$58,880	<i>More than</i> \$58,880 <i>but less than</i> \$70,650	<i>More than</i> \$70,650 <i>but less than</i> \$94,200	<i>More than</i> \$94,200
Expected Family Contribution as a percent of income is	2.0%	3.0%	4.0%	6.3%	8.1%	9.5%	You pay full amount of premium

Family Size = 5							
If your income is	<i>Less than</i> \$36,670	<i>More than</i> \$36,670 <i>but less than</i> \$41,360	<i>More than</i> \$41,360 <i>but less than</i> \$55,140	<i>More than</i> \$55,140 <i>but less than</i> \$68,930	<i>More than</i> \$68,930 <i>but less than</i> \$82,710	<i>More than</i> \$82,710 <i>but less than</i> \$110,280	<i>More than</i> \$110,280
Expected Family Contribution as a percent of income is	2.0%	3.0%	4.0%	6.3%	8.1%	9.5%	You pay full amount of premium

Larger families may qualify for larger tax credits. Call or visit your health plan marketplace to learn more.

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