



All Kids Out-of-Pocket Costs Vary by Monthly Income

	All Kids Premium Level 1 150 – 200% *Children	All Kids Premium Level 2 200-300%	All Kids Premium Level 3 300-400%	All Kids Premium Level 4 400-500%	All Kids Premium Level 5 500-600%	All Kids Premium Level 6 600-700%	All Kids Premium Level 7 700-800%	All Kids Premium Level 8 Over 800%
Monthly Premium	•\$15 for 1 •\$25 for 2 •\$30 for 3 •\$35 for 4	\$40 per child	\$70 per child	\$100 per child	\$150 per child	\$200 per child	\$250 per child	\$300 per child
Max Monthly Premium	•\$40 for 5 or more persons	\$80 for 2 or more children	\$140 for 2 or more children	\$200 for 2 or more children	No-Cap	No-Cap	No-Cap	No-Cap
Each Visit to a Doctor	\$5	\$10	\$15	\$20	\$25	\$25	\$25	\$25
Each Name Brand or Generic Prescription	\$5 or \$3	\$7 or \$3	\$14 or \$6	\$21 or \$9	\$28 or \$12	\$28 or \$12	\$28 or \$12	\$28 or \$12
Each Emergency Room Visit	\$25 for non-emergency	\$30	\$50	\$75	\$100	\$100	\$100	\$100
Each Hospital Admission	\$5 per admission	\$100 per admission	\$150 per admission	\$200 per admission	10% of HFS rate per admission	10% of HFS rate per admission	10% of HFS rate per admission	25% of HFS rate per admission
Percentage of HFS rate for each Outpatient Service	-	5%	10%	15%	20%	20%	20%	25%
Max per Child per Year Co-Payments for Hospital Services	-	\$500 per child	\$750 per child	\$1,000 per child	\$5,000 per child	\$5,000 per child	\$5,000 per child	No Max

*Note: Parents and caretaker relatives whose household income is between **150% - 185% of the FPL** may also be found eligible for FamilyCare Premium. The same co-payments apply.

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