

# WIC Income Calculation Reference Sheet - Updated 07/2016



**Medicaid Provider ID  
(WIC) 3020016  
Provider Type 98**

**For Participant:  
Medicaid #  
or  
SS#/Birthdate**

## 2016-2017 WIC Annual Income Guidelines

### 185% Federal Poverty Level

Federal Register: Vol. 81, FR14826/March 18, 2016 (2016 USDA Federal Poverty Guidelines)  
WIC Final Policy Memorandum: #2016-3 (Publication of New WIC Income Eligibility Guidelines)

Family Size*	Hourly 2080 Hours	Weekly 52 weeks	Biweekly 26 weeks	Monthly 12 months	Annual
1	\$10.56	\$423	\$846	\$1,832	\$21,978
2	\$14.24	\$570	\$1,140	\$2,470	\$29,637
3	\$17.93	\$718	\$1,435	\$3,108	\$37,296
4	\$21.61	\$865	\$1,730	\$3,747	\$44,955
5	\$25.29	\$1,012	\$2,024	\$4,385	\$52,614
6	\$28.97	\$1,160	\$2,319	\$5,023	\$60,273
7	\$32.66	\$1,307	\$2,614	\$5,663	\$67,951
8	\$36.36	\$1,455	\$2,910	\$6,304	\$75,647
9	\$40.06	\$1,603	\$3,206	\$6,946	\$83,343
10	\$43.76	\$1,751	\$3,502	\$7,587	\$91,039
11	\$47.46	\$1,899	\$3,798	\$8,228	\$98,735
12	\$51.16	\$2,047	\$4,094	\$8,870	\$106,431
13	\$54.86	\$2,195	\$4,390	\$9,511	\$114,127
14	\$58.56	\$2,343	\$4,686	\$10,152	\$121,823
15	\$62.26	\$2,491	\$4,982	\$10,794	\$129,519
16	\$65.96	\$2,639	\$5,278	\$11,435	\$137,215

\*Pregnant woman is counted as one + the number of Infants expected when determining income eligibility for the Total Economic Unit  
\*\* New #s for 2016

Medicaid (MA) Verify active Medicaid number (CHAMPS, MI-Benefit)

Food Stamps (SNAP) Verify Bridge Card current month deposit

Family Independence Program (FIP) Verify Bridge Card current month deposit

Xerox Customer Service  
1-888-678-8914

### Ways to Calculate Total Annual Income

Use past month (30 days) checkstubs for income verification

**Gross Income:** Most recent IRS 1040  
(Net Income for Farm and Self-Employed workers)

**YTD:** Divided by # weeks paid x 52 weeks

**Weekly** x 52 weeks

**Every 2 weeks** x 26 weeks

**2 Checks per month** x 24

**Monthly** x 12 months

**No Income:** Review "No Income" questions to determine if part of another family. If not, record \$0 annual income. Record Self Declared/Verification.

**Adjunct Eligibility** (Medicaid, Food Stamps or FIP): Verify current eligibility. Then client can self declare income.

**Sudden Change in Income: Today's Income** x 52 weeks

**Remember!** You can use 1040 tax forms until the next one is filed for documentation.

For complete information about Income Eligibility Determination, please refer to MI-WIC Policies:

- 2.04 Income Determination
- 2.05 Income Guidelines
- 2.06 Adjunct Income Eligibility
- 2.07 Declaration of No Income
- 2.08 Family Size
- 2.12 Migrant Family Eligibility

**Michigan Department of Health and Human Services  
2016-2017 Income Guidelines**

	Healthy Michigan Plan † Adults 19-64	Healthy Kids/Medicaid † age one up to age 19	WIC Pregnant & Breast feeding women, non-lactating women, infants and children up to age 5.	Healthy Kids and Moms Program † Infants and Pregnant women	MiChild † Infants & Children up to age 19 who don't qualify for Healthy Kids
<b>Number in Family</b>	<b>133% MAGI</b>	<b>160% MAGI</b>	<b>185% FPL</b>	<b>195% MAGI</b>	<b>212% MAGI</b>
1	\$15,800	\$19,008	\$21,978	\$23,166	\$25,185
2	\$21,306	\$25,632	\$29,637	\$31,239	\$33,962
3	\$26,812	\$32,256	\$37,296	\$39,312	\$42,739
4	\$32,319	\$38,880	\$44,955	\$47,385	\$51,516
5	\$37,825	\$45,504	\$52,614	\$55,458	\$60,292
6	\$43,331	\$52,128	\$60,273	\$63,531	\$69,069
7	\$48,850	\$58,768	\$67,951	\$71,623	\$77,867
8	\$54,383	\$65,424	\$75,647	\$79,735	\$86,686

† = Adjunct Eligibility for WIC

Modified Adjusted Gross Income (MAGI)=Adjusted Gross Income compared to Federal Poverty Level Guidelines  
Federal Poverty Level (FPL)

<b>Michigan Department of Health and Human Services &amp; WIC Program Eligibility</b>				
<b>† = Adjunct Eligibility for WIC</b>				
133% MAGI	160% MAGI	185% FPL	195% MAGI	212% MAGI
		<b>MI-Child †</b> Health Insurance for Infants & Children 0-19 years old who don't qualify for Healthy Kids Program		
<b>Healthy Kids Program †</b> Insurance for Infants & Pregnant Women				
<b>MOMs Program/PE (Presumptive Eligibility) †</b> Insurance for Pregnant Women not eligible for or not currently enrolled on Medicaid				
<b>WIC Supplemental Nutrition</b> Pregnant & Breast feeding women, non-lactating women, infants and children up to age 5.				
<b>Healthy Kids †</b> Insurance for Children 1 to 19 years old				
<b>Healthy Michigan Plan †</b> Adults 19-64 years of age				
<p align="center">Apply for Healthy Michigan Plan, Healthy Kid Program, MiChild:  <a href="https://www.mibridges.michigan.gov/access/">https://www.mibridges.michigan.gov/access/</a>            Request appointment for WIC: <a href="https://wiccp.state.mi.us/clientportal/">https://wiccp.state.mi.us/clientportal/</a></p>				