Your State Match

You are looking for a place where three adults can find destination-dependent work in the same labor market, two children can move through elementary, middle, and high school successfully, important healthcare remains accessible, and the location can still make sense as retirement approaches. District of Columbia, New Jersey, Maryland, and the unscored Wyoming Wildcard are worth a closer look, but each has important facts that must be shown to be true before you proceed.

Executive summary

District of Columbia leads because its exceptional medical depth is especially valuable for your household, while the Washington regional labor market can plausibly support the plumber, lawyer, and dentist in one metro. New Jersey follows closely because the New York–Newark–Jersey City labor market provides the strongest shared work opportunity among the featured choices and offers more than one viable metro. Maryland adds major medical systems, several workable labor markets, and better potential to combine small-town living with strong schools, although Baltimore itself requires careful neighborhood and school research.

The central tradeoff is that the three scored recommendations concentrate opportunity and medical care in expensive, densely developed corridors that do not naturally match your preference for a small town or rural setting. All three also conflict substantially with your stated hurricane or coastal-hazard preferences. Wyoming tests the opposite idea: much lower statewide housing pressure, small-town living, and favorable statewide crime figures, but with far thinner healthcare, a geographically narrow job solution, and potentially long emergency-care trips.

Because you plan to retire within the next five years, the recommendations also need to work beyond the first job. That makes healthcare access, aging in place, transportation, and the ability to reach daily services increasingly important. None of these states should be treated as ready for a move until jobs, medical networks, schools, housing, insurance, hazards, and the large-dog rules for the exact location are checked. The ratings describe fit for your household; they are not judgments about the overall quality of any state.

How to interpret the results

The three ratings combine the parts of relocation that matter specifically to you. They are not universal state rankings. A 3.9 out of 5 result means the state has a promising overall case, not that every city or every important need has been confirmed.

Your household also has a strict shared-labor-market test: all three adults who need local work must have realistic job paths in the same metro. Strong careers scattered across different cities do not solve the move. At present, the adult child's dentistry career is the work bottleneck in the leading metros. By “bottleneck, ” we mean the career that most limits where everyone can live and work together, not that the person is unemployable.

The Wildcard is intentionally outside the scored Top 3. It has no customer-facing score, rank, or fit label. Its purpose is to test whether lower housing pressure and a small-town setting could outweigh much thinner medical and employment depth.

District of Columbia: the strongest healthcare-centered option

PERSONALIZED STATE FIT

3.9 out of 5 stars

Promising fit with meaningful watchpoints — key points must be shown to be true before proceeding

Place to investigate: Washington, D.C.

HEALTH WATCH

4.0 out of 5 stars — Favorable

Health Watch is StateMatcher's universal statewide healthcare rating. This rating contributes to Personalized State Fit. Your personalized healthcare analysis separately tests the care needs you disclosed in the questionnaire.

Hospital quality	**About average**	**Hospital access**	**Very good**
3.1 out of 5 stars vs. U.S. 3.2 out of 5 stars		5 min vs. U.S. 12.92 min	
Doctor availability	**Very good**	**Hospital capacity**	**Very good**
928 vs. U.S. 296 physicians per 100,000		3.96 vs. U.S. 2.32 beds per 1,000	

Why this fits you

District of Columbia rises because healthcare is important to your household and Washington offers exceptional specialist, academic-medical, hospital, and emergency-care depth. Health Watch rates the District's statewide healthcare environment 4.0 out of 5 stars. The Washington–Arlington–Alexandria labor market also supports plausible paths for the plumber, lawyer, and dentist, although it is the District's only evaluated shared labor market.

This is an urban choice rather than the small-town or rural setting you said you prefer. It asks you to accept severe housing pressure and a substantial hurricane-hazard conflict in exchange for concentrated employment, transit, medical care, and educational options. As retirement approaches, the large in-home-care workforce is useful, but home-health quality indicators are weaker than the national middle and actual provider availability still needs confirmation.

Why it could work

Exceptional specialist and major-hospital depth centered in Washington, with generally quick access to a hospital in populated areas.

One regional labor market can plausibly support all three essential workers, and the supplied wage evidence clears each stated minimum.

Strong in-home-care workforce availability is relevant because you plan to retire within the next five years.

Several supplied school options show strong or improving results across stages relevant to children likely entering around grades 2 and 8–10.

What worries me

Housing and transportation pressure are substantial, and the District is an urban setting rather than the small-town or rural environment you prefer.

The household's work plan depends on one regional labor market, with dentistry currently limiting geographic flexibility.

Elevated hurricane evidence reaches most of the District's population, creating a major conflict with your stated hazard preferences even though elevated coastal-flood evidence covers comparatively little of the population.

Before you decide

Confirm that an affordable health plan includes every required hospital, specialist, pharmacy, and treatment, and measure actual travel time from any candidate address to the right emergency department.

Price the exact home and insurance coverage, including deductibles, exclusions, replacement cost, flood or wind needs, roof restrictions, and nonrenewal terms. Residual-market access remains unresolved.

Because you are moving with a large or possibly restricted-breed dog, check current District rules, the property's pet policy, association rules, and insurer underwriting before relying on a home.

Continue your investigation

Explore this state further with a **StateMatcher Deep Dive**, or compare it with another state using **StateMatcher Compare**.

New Jersey: the strongest shared job-market case

PERSONALIZED STATE FIT

3.8 out of 5 stars

Promising fit with meaningful watchpoints — key points must be shown to be true before proceeding

Place to investigate: Newark–Jersey City corridor

HEALTH WATCH

3.1 out of 5 stars — Mixed

Health Watch is StateMatcher's universal statewide healthcare rating. This rating contributes to Personalized State Fit. Your personalized healthcare analysis separately tests the care needs you disclosed in the questionnaire.

Hospital quality — About average 3.2 out of 5 stars vs. U.S. 3.2 out of 5 stars	**Hospital access** — Very good 9 min vs. U.S. 12.92 min
Doctor availability — Good 311 vs. U.S. 296 physicians per 100,000	**Hospital capacity** — About average 2.42 vs. U.S. 2.32 beds per 1,000

Why this fits you

New Jersey is the clearest employment choice among the four featured jurisdictions. Two evaluated metros can support all three adults who need local work, and New York–Newark–Jersey City is the strongest shared labor-market option. That matters because a household move only works if the plumber, lawyer, and dentist can all find realistic paths in the same commuting region. The state also has major medical depth through the New York and Philadelphia corridors.

The tradeoff is an expensive, congested corridor with demanding taxes and sharp municipality-to-municipality differences. New Jersey's aging-in-place evidence is encouraging: its in-home-care workforce and home-health quality indicators are both comparatively strong. That is useful as retirement approaches, but it does not prove that a particular agency has capacity or accepts your coverage.

Why it could work

- The strongest shared labor market among the featured choices, with two evaluated metros meeting the household's three-worker test.
- The supplied metro wage evidence clears each worker's stated minimum, with particularly deep legal employment and meaningful plumbing and dentistry options.
- Major specialist and hospital access through New Jersey systems and the New York and Philadelphia medical corridors.
- Comparatively strong in-home-care workforce availability and home-health quality for later-life planning.

What worries me

- Housing, taxes, congestion, and municipal differences make the exact residential choice unusually important.
- Dentistry remains the work bottleneck, and the lawyer's exact specialty is not established by the broader occupational data.
- Hurricane evidence reaches most of the population, coastal-flood evidence reaches a broad share, and earthquake evidence is also elevated across much of the state, creating a major hazard conflict.

Before you decide

- Confirm all three job paths in the same commuting area, including the lawyer's specialty, dental licensing and employer options, and realistic commutes from candidate homes.
- Check the exact medical network, specialist appointment availability, emergency travel time, housing cost, local taxes, flood or wind exposure, and property insurance quote.
- New Jersey restricts at least some local breed-specific dog rules, but dangerous-dog rules, landlord or association restrictions, and insurer exclusions can still apply. Verify them for the actual property.

Continue your investigation

Explore this state further with a **StateMatcher Deep Dive**, or compare it with another state using **StateMatcher Compare**.

Maryland: major healthcare with more room to test small-town alternatives

PERSONALIZED STATE FIT

3.8 out of 5 stars

Promising fit with meaningful watchpoints — key points must be shown to be true before proceeding

Place to investigate: Baltimore

HEALTH WATCH

3.3 out of 5 stars — Favorable

Health Watch is StateMatcher's universal statewide healthcare rating. This rating contributes to Personalized State Fit. Your personalized healthcare analysis separately tests the care needs you disclosed in the questionnaire.

Hospital quality	**About average**	**Hospital access**	**About average**
3.3 out of 5 stars vs. U.S. 3.2 out of 5 stars		11 min vs. U.S. 12.92 min	
Doctor availability	**Very good**	**Hospital capacity**	**Weak**
360 vs. U.S. 296 physicians per 100,000		1.83 vs. U.S. 2.32 beds per 1,000	

Why this fits you

Maryland combines nationally significant healthcare around Baltimore, Bethesda, and the Washington suburbs with three evaluated metros that can support all essential workers. The strongest shared labor-market evidence points to Washington–Arlington–Alexandria, while Baltimore is the strongest initial medical clue. This creates more geographic choice than the District, although the best job and medical locations may not be the same place.

Maryland is also the featured state with the clearest supplied school alternatives matching your small-town or rural preference. That could matter for children likely entering around grades 2 and 8–10, but those stronger statewide school clues are not automatically convenient to the Baltimore or Washington job centers. Because retirement is within five years, Maryland's limited in-home-care workforce is a meaningful concern despite its strong major medical systems. Ellicott City also merits separate investigation as a retirement-oriented candidate, but current local conditions—not its appearance in a broader list—must carry the decision.

Why it could work

- Exceptional specialist and academic-medical depth centered in Baltimore and the Washington region.
- Three evaluated metros can support all essential workers, providing more geographic flexibility than the District.
- Supplied small-town and rural school options show strong results across elementary, middle, and high-school stages.
- Statewide housing and transportation signals compare more favorably with the Colorado baseline than the other scored recommendations, although exact local costs still control.

What worries me

- The strongest work market and the strongest initial medical clue may pull the household toward different parts of the state.
- Maryland's in-home-care workforce is comparatively limited, which matters as you approach retirement.
- Elevated hurricane evidence reaches most residents and coastal-flood exposure varies substantially, creating a major conflict with your hazard preferences.

Before you decide

- Map all three jobs, the required medical system, schools, and emergency travel times together before choosing between the Baltimore and Washington-oriented parts of the state.
- In Baltimore, check neighborhood safety, housing condition, taxes, school assignment, and insurance address by address. Statewide and citywide averages are not enough.
- Maryland may permit local breed-specific dog rules. Verify the current municipal ordinance, dangerous-dog rules, landlord or association policy, and insurer treatment for the exact property.

Continue your investigation

Explore this state further with a **StateMatcher Deep Dive**, or compare it with another state using **StateMatcher Compare**.

Wyoming: a lower-housing, small-town test with serious access limits

WILDCARD STATE

A different possibility worth investigating

Place to investigate: Laramie–Cheyenne corridor

HEALTH WATCH

1.4 out of 5 stars — Unfavorable

Health Watch is StateMatcher's universal statewide healthcare rating. This Wildcard is unscored, so the rating is shown for comparison rather than added to a ranked Wildcard score.

Hospital quality — About average 3.3 out of 5 stars vs. U.S. 3.2 out of 5 stars	**Hospital access** — Weak 23 min vs. U.S. 12.92 min
Doctor availability — Weak 163 vs. U.S. 296 physicians per 100,000	**Hospital capacity** — Good 2.49 vs. U.S. 2.32 beds per 1,000

Why this fits you

Wyoming tests whether your preference for a small-town or rural setting and much lower statewide housing pressure could outweigh thinner employment and healthcare systems. Casper is the only evaluated metro that currently supports all three essential workers, while the Laramie–Cheyenne corridor is the strongest supplied medical and community starting point. Those are different geographic clues, which is a major practical problem rather than a minor detail.

The state also has school options that fit your preferred setting and favorable statewide crime figures. However, healthcare access is highly sparse, specialist depth is limited, out-of-state referrals are common, and the in-home-care workforce is comparatively limited and expensive. Those weaknesses become more important because you plan to retire within the next five years.

Why it could work

A small-town or rural lifestyle is much easier to test here than in the three scored recommendations.

The statewide housing benchmark is substantially lower than Colorado's, while groceries, healthcare, and discretionary cost signals are broadly similar.

Casper is one evaluated metro where all three workers have plausible paths, although two income tests remain unresolved.

Several supplied town and rural school systems show favorable results across the stages relevant to both children.

What worries me

The employment case is geographically narrow: Casper is the only evaluated shared labor market, and the plumber's and lawyer's minimum-income tests remain unresolved.

The Laramie–Cheyenne corridor has only moderate healthcare depth, while specialist care, transit, community depth, and winter travel are limited.

Earthquake evidence is elevated across a broad share of the population, creating a material conflict with your hazard preferences.

> **The thing I would check first**
>
> Rapid emergency access needs make rural and remote parts of this state poor candidates without property-level travel-time verification.

Before you decide

Do not rely on Wyoming unless an exact address has acceptable travel times to the appropriate emergency department, advanced emergency care, required specialists, and a workable backup system.

Confirm whether Casper can actually support the plumber, lawyer, and dentist at the required pay levels, and reconcile that employment location with the Laramie–Cheyenne healthcare clue.

Check local breed and dangerous-dog rules, property restrictions, insurer underwriting, winter road access, wildfire or earthquake exposure, and current property coverage before relying on a home.

Continue your investigation

Explore this state further with a **StateMatcher Deep Dive**, or compare it with another state using **StateMatcher Compare**.

Finalist differences at a glance

These are household-relevant differences among the locked finalists. They help you decide what deserves deeper investigation; they do not create a second ranking or silently change the recommendation order. Statewide and metro signals remain screening evidence—provider, property, employer, school-boundary, and local-law questions still require exact verification when applicable.

What differs	District of Columbia	New Jersey	Maryland	Wyoming
Public safety	More caution warranted; violent 803, property 3,132, homicide 16.7 per 100k	Favorable; violent 194, property 1,250, homicide 1.9 per 100k	Mixed; violent 358, property 1,820, homicide 5.3 per 100k	Favorable; violent 180, property 1,038, homicide 2.7 per 100k
Property insurance	Lower pressure	Lower pressure	Lower pressure	Lower pressure
Adult postsecondary / retraining	Breadth Limited; 2-year tuition Unavailable; 4-year Much Lower	Breadth Broad; 2-year tuition Much Higher; 4-year Much Higher	Breadth Moderate; 2-year tuition Much Higher; 4-year Near Middle	Breadth Limited; 2-year tuition Lower; 4-year Much Lower
Pet relocation	breed rules: Local Breed Rules May Exist	breed rules: State Restricts Local Breed Rules	breed rules: Local Breed Rules May Exist	breed rules: Local Breed Rules May Exist
K-12 school-district planning	1 supported region with district evidence	1 supported region with district evidence	1 supported region with district evidence	1 supported region with district evidence

Pet housing note: Federal fair-housing assistance-animal rules are a common baseline, not a state advantage, and do not establish that a particular animal qualifies or may be possessed where otherwise unlawful. Verify the actual property, local rules, and accommodation process when relevant.

Cross-state tradeoffs

The three scored recommendations offer far deeper work and medical systems than Wyoming, but they also bring more housing pressure, denser living, and major hurricane-related conflicts. District of Columbia is the healthcare-first choice; New Jersey is the strongest three-worker choice; Maryland offers the most promising bridge between major systems and your small-town school preference. Wyoming tests whether lifestyle and lower housing pressure matter enough to accept a much narrower work plan and weaker medical safety net.

Safety Watch provides useful statewide context, but it cannot identify a safe neighborhood. Using the same 2025 FBI measures, District of Columbia scores 0.6 on the 0–10 Safety Watch scale, rated “More caution warranted, ” with 803 violent crimes, 3,132.3 property crimes, and 16.7 homicides per 100,000 residents. All three rates are well above the corresponding national figures of 327.6, 1,534.8, and 4.1. New Jersey scores 7.5, rated “Favorable, ” with 193.8 violent crimes, 1,249.6 property crimes, and 1.9 homicides per 100,000—all below the national figures. Maryland scores 5.3, rated “Mixed, ” with 358 violent crimes, 1,819.7 property crimes, and 5.3 homicides per 100,000, each somewhat above the national figures. Wyoming scores 7.6, rated “Favorable, ” with 179.9 violent crimes, 1,038 property crimes, and 2.7 homicides per 100,000, all below the national figures. These are separate crime measures, not one precise local-risk ranking, and conditions can change sharply by city and neighborhood.

Retraining is another tradeoff rather than a single winner. New Jersey has the broadest statewide program selection of the four, but its published public two-year and four-year tuition signals are both well above the middle of states with usable data. Maryland has moderate program breadth; its two-year signal is also well above the middle, while its four-year signal is near the middle. District of Columbia and Wyoming have more limited statewide program breadth. District public four-year published tuition is well below the middle, while a sound two-year comparison is unavailable; Wyoming’s published two-year tuition is below the middle and its four-year tuition is well below it. Published tuition is not net price, a program quote, or proof of in-state eligibility, so exact program availability, fees, aid, residency rules, scheduling, transfer paths, and licensing alignment still control.

Promising regions to investigate

Washington, D.C. is the best initial clue for medical access, transit, and concentrated professional opportunity, but it is a very-high-cost urban setting rather than the small-town or rural environment you prefer. For school planning from roughly grade 2 through grade 12, the supplied city-overlap list begins with BASIS DC PCS, where past results are very strong and improving across elementary, middle, and high school. Washington Yu Ying PCS follows, with very strong and fairly steady elementary results but too little middle- and high-school history for a confident trend. Sela PCS has very strong and improving elementary results, with similarly thin later-stage history. These are urban and often choice-based options; availability, admissions, transportation, and eligibility must be confirmed.

The Newark–Jersey City corridor offers major healthcare, transit, and the strongest shared labor market, but it is very expensive and does not match your preferred setting. The first entry in the supplied regional school list is the Office of Education Juvenile Justice Commission, a specialized system that is not established here as an ordinary residential enrollment option and should not be treated as one. The next clues are Jersey City Global Charter School, with very strong and improving elementary results and strong middle-school results but thin trend history, followed by Gray Charter School, where elementary results are very strong and improving and middle-school results are above average and improving. A separate statewide list contains rural or small-town possibilities, but those locations have not been shown to work with the corridor's three-worker commute.

Baltimore is Maryland's strongest initial medical clue, with high costs and large block-by-block differences in housing, safety, and school conditions. Within the supplied Baltimore-overlap list, Baltimore County Public Schools comes first, but past districtwide results have generally been below the state benchmark across the relevant stages and fairly steady. SEED School of Maryland follows, with below-benchmark middle and high-school results; middle results have improved, while recent high-school results appear to have slipped. Baltimore City Public Schools is third, with below-benchmark results across the relevant stages, although middle-school direction has improved. Maryland's statewide shortlist offers stronger small-town alternatives such as Carroll County Public Schools, but those options still need a practical job-and-healthcare travel test. Ellicott City is also worth examining for later-life planning, without assuming that it automatically solves housing, healthcare, taxes, transportation, safety, or community needs.

The Laramie–Cheyenne corridor is the Wyoming starting point for moderate healthcare depth, university resources, and visible community infrastructure. Albany County School District #1 is the first ordinary school option in the supplied corridor list: elementary and high-school results have been above the state benchmark, high-school direction has improved, and middle-school results have been around the benchmark and steady. The next listed entities have no useful performance history or current enrollment evidence here and should not be treated as ordinary residential school choices without direct confirmation. The larger problem is that Casper—not this corridor—is the only evaluated Wyoming labor market that currently supports all three workers.

District-level evidence never guarantees a particular school, program, teacher, or address assignment. Enrollment cutoffs may also shift the children's starting grades. Confirm current performance, admissions or transfer rules, transportation, exact boundaries, and the assigned school before signing a lease or purchase contract.

Household economic fit

> **Everyday Spending Comparison:** Five familiar recurring categories, not your full household budget.
> **Why these numbers differ:** The Financial Outlook uses a broader recurring-cost estimate to test household sustainability, so its total will usually be higher.

The Everyday Spending Comparison uses Colorado as your current-state planning baseline and looks at five recurring areas: housing and utilities, groceries, transportation, healthcare, and discretionary spending. It is not the full household budget, and it does not include every tax, debt, childcare, insurance, professional, or other household expense used in the separate Financial Outlook.

District of Columbia shows the greatest pressure in this comparison. Its statewide housing benchmark is about 15% higher than Colorado's, groceries about 8% higher, and transportation about 21% higher. New Jersey's housing benchmark is about 5% higher and groceries about 8% higher, while its statewide transportation signal is about 20% lower. Maryland is closest to Colorado on housing, groceries, healthcare, and discretionary

spending, while its transportation signal is about 22% lower. Wyoming stands apart: its statewide housing benchmark is about 43% lower, transportation about 7% higher, and the other three nonhousing areas broadly similar.

Those figures describe statewide patterns, not what your family will pay in Washington, Newark, Baltimore, Cheyenne, or any particular neighborhood. They also do not establish whether a destination works financially. The primary economic path remains local earning because three household members need destination-dependent work. New Jersey has the strongest and most flexible shared job-market case; District of Columbia and Maryland also have plausible three-worker markets; Wyoming's case depends heavily on Casper and still has unresolved minimum-income questions for the plumber and lawyer. Portable income should be kept separate from wages that would change with the destination.

The result is especially sensitive to the exact home, commute, medical plan, job offers, taxes, and insurance quotes. A lower statewide housing benchmark can lose much of its advantage if it requires long drives, out-of-state medical travel, or a second employment location. Conversely, a high-cost metro can only justify itself if attainable earnings, benefits, and medical access hold up in the same place. The Financial Outlook is the source for the household affordability figures and final economic conclusion. One-time moving and setup costs should remain separate from recurring expenses.

Location Advantage: Your Financial Outlook

> **What Location Advantage means:** Location Advantage is the opportunity to improve your standard of living while reducing the cost burden required to support it. Cost of living tells you what a place costs. Location Advantage asks what kind of life those costs buy you—and how much financial room your household has left. Location Advantage is financial evidence, not the overall relocation verdict. A financial advantage cannot override healthcare, legal, safety, family, work, climate, environmental, or other household must-haves.

> **How to read all four state estimates:** State Match counts each paycheck once. Income already included in the household total is not added again; additional shared income uses supported destination wage evidence; income marked separate stays outside the shared-expense budget. “Estimated” means a planning range, not a job offer or exact bill. These broader recurring-cost estimates are intentionally different from the five-category Everyday Spending Comparison above. Premium reports go further with destination-specific personal-income-tax estimates.

BEST FIT #1

District of Columbia

PERSONALIZED STATE FIT **3.9 out of 5 stars**

Promising fit with meaningful watchpoints — key points must be shown to be true before proceeding

Estimated amount left after recurring costs: $91,239–$263,819 left over per year

Money at a glance

The longer bar is the bigger number. This compares the household income counted in this analysis with the broader estimate of recurring household costs used for this first-pass budget.

Household income used in this analysis **$243,470–$391,140**

Estimated full recurring household costs **$127,321–$152,231**

Estimated annual balance: $91,239–$263,819 left over per year

Household income used in this analysis	$243,470–$391,140
Estimated full recurring household costs	$127,321–$152,231
Income-to-Cost Ratio	**1.60×–3.07×** A ratio of 1.60×–3.07× means about $1.60 to $3.07 of household income for every $1.00 of estimated recurring household costs. Put another way, income is estimated to be comfortably higher than recurring costs in this first-pass budget, although taxes and actual expenses can narrow that cushion.
Estimated amount left after recurring costs	**$91,239–$263,819 left over per year**

How we counted your household income

Income source	Estimated destination pay	Amount counted toward shared household income
Household income reported earlier		**$82,000** (reported with a mix of before-tax and after-tax amounts)
Principal · plumber Already included	$55,780–$94,050	**$0 added** Not added again because the questionnaire says this worker's income is already included in the household income reported earlier.
Spouse/partner Add this income	$161,470–$309,140	**$161,470–$309,140** Added to the shared household-income calculation because the questionnaire says this income is additional.
Adult child · dentist Keep separate	$156,460–$229,130	**$0 added** Kept out of the shared household-income calculation because the questionnaire says this worker's income will remain separate from shared household expenses.
Total household income used in this State Match		**$243,470–$391,140**

What this first-pass budget includes

Income included: customer-entered continuing income with mixed or unresolved tax basis, destination-dependent gross earnings

Recurring cost categories: Housing, Utilities, Food, Transportation, Healthcare and insurance, Childcare when applicable, Taxes not already reflected in take-home income, Professional licensing and necessary work costs, Other household-specific recurring expenses supported by the questionnaire

> **Verify before relying on the estimate:** Separate the continuing-income sources into gross-before-tax and after-tax amounts before relying on a narrower tax or surplus estimate; State-specific credits, phaseouts, additions, subtractions, source-specific exclusions, and other special tax rules may change the final result and should be confirmed before relying on the estimate; Separate gross and after-tax income sources before relying on the estimated tax and annual-balance result; Confirm actual housing, utility, grocery, transportation, healthcare, insurance, childcare, debt, tax, and other recurring household costs before relying on the modeled result; Use a local housing quote and local insurance quote because statewide ratios cannot represent neighborhood, property, household, or plan-specific variation

BEST FIT #2

New Jersey

PERSONALIZED STATE FIT **3.8 out of 5 stars**

Promising fit with meaningful watchpoints — key points must be shown to be true before proceeding

Estimated amount left after recurring costs: $68,744–$285,459 left over per year

Money at a glance

The longer bar is the bigger number. This compares the household income counted in this analysis with the broader estimate of recurring household costs used for this first-pass budget.

Household income used in this analysis **$213,240–$406,310**

Estimated full recurring household costs **$120,851–$144,496**

Estimated annual balance: $68,744–$285,459 left over per year

Household income used in this analysis	$213,240–$406,310
Estimated full recurring household costs	$120,851–$144,496
Income-to-Cost Ratio	**1.48×–3.36×** A ratio of 1.48×–3.36× means about $1.48 to $3.36 of household income for every $1.00 of estimated recurring household costs. Put another way, income is estimated to be comfortably higher than recurring costs in this first-pass budget, although taxes and actual expenses can narrow that cushion.
Estimated amount left after recurring costs	**$68,744–$285,459 left over per year**

How we counted your household income

Income source	Estimated destination pay	Amount counted toward shared household income
Household income reported earlier		**$82,000** (reported with a mix of before-tax and after-tax amounts)
Principal · plumber Already included	$61,900– $107,970	**$0 added** Not added again because the questionnaire says this worker's income is already included in the household income reported earlier.
Spouse/partner Add this income	$131,240– $324,310	**$131,240–$324,310** Added to the shared household-income calculation because the questionnaire says this income is additional.
Adult child · dentist Keep separate	$104,110– $224,280	**$0 added** Kept out of the shared household-income calculation because the questionnaire says this worker's income will remain separate from shared household expenses.
Total household income used in this State Match		**$213,240–$406,310**

What this first-pass budget includes

Income included: customer-entered continuing income with mixed or unresolved tax basis, destination-dependent gross earnings

Recurring cost categories: Housing, Utilities, Food, Transportation, Healthcare and insurance, Childcare when applicable, Taxes not already reflected in take-home income, Professional licensing and necessary work costs, Other household-specific recurring expenses supported by the questionnaire

> **Verify before relying on the estimate:** Separate the continuing-income sources into gross-before-tax and after-tax amounts before relying on a narrower tax or surplus estimate; State-specific credits, phaseouts, additions, subtractions, source-specific exclusions, and other special tax rules may change the final result and should be confirmed before relying on the estimate; Local wage, payroll, occupational, or other locality-specific taxes may apply but cannot be priced statewide without a locality; Separate gross and after-tax income sources before relying on the estimated tax and annual-balance result; Confirm actual housing, utility, grocery, transportation, healthcare, insurance, childcare, debt, tax, and other recurring household costs before relying on the modeled result

BEST FIT #3

Maryland

PERSONALIZED STATE FIT **3.8 out of 5 stars**

Promising fit with meaningful watchpoints — key points must be shown to be true before proceeding

Estimated amount left after recurring costs: $103,799–$274,325 left over per year

Money at a glance

The longer bar is the bigger number. This compares the household income counted in this analysis with the broader estimate of recurring household costs used for this first-pass budget.

Household income used in this analysis **$243,470–$391,140**

Estimated full recurring household costs **$116,815–$139,671**

Estimated annual balance: $103,799–$274,325 left over per year

Household income used in this analysis	$243,470–$391,140
Estimated full recurring household costs	$116,815–$139,671
Income-to-Cost Ratio	**1.74×–3.35×** A ratio of 1.74×–3.35× means about $1.74 to $3.35 of household income for every $1.00 of estimated recurring household costs. Put another way, income is estimated to be comfortably higher than recurring costs in this first-pass budget, although taxes and actual expenses can narrow that cushion.
Estimated amount left after recurring costs	**$103,799–$274,325 left over per year**

How we counted your household income

Income source	Estimated destination pay	Amount counted toward shared household income
Household income reported earlier		**$82,000** (reported with a mix of before-tax and after-tax amounts)
Principal · plumber Already included	$55,780–$94,050	**$0 added** Not added again because the questionnaire says this worker's income is already included in the household income reported earlier.
Spouse/partner Add this income	$161,470–$309,140	**$161,470–$309,140** Added to the shared household-income calculation because the questionnaire says this income is additional.
Adult child · dentist Keep separate	$156,460–$229,130	**$0 added** Kept out of the shared household-income calculation because the questionnaire says this worker's income will remain separate from shared household expenses.
Total household income used in this State Match		**$243,470–$391,140**

What this first-pass budget includes

Income included: customer-entered continuing income with mixed or unresolved tax basis, destination-dependent gross earnings

Recurring cost categories: Housing, Utilities, Food, Transportation, Healthcare and insurance, Childcare when applicable, Taxes not already reflected in take-home income, Professional licensing and necessary work costs, Other household-specific recurring expenses supported by the questionnaire

> **Verify before relying on the estimate:** Separate the continuing-income sources into gross-before-tax and after-tax amounts before relying on a narrower tax or surplus estimate; State-specific credits, phaseouts, additions, subtractions, source-specific exclusions, and other special tax rules may change the final result and should be confirmed before relying on the estimate; Separate gross and after-tax income sources before relying on the estimated tax and annual-balance result; Confirm actual housing, utility, grocery, transportation, healthcare, insurance, childcare, debt, tax, and other recurring household costs before relying on the modeled result; Use a local housing quote and local insurance quote because statewide ratios cannot represent neighborhood, property, household, or plan-specific variation

WILDCARD STATE

Wyoming

Estimated amount left after recurring costs: $29,367–$117,182 left over per year

Money at a glance

The longer bar is the bigger number. This compares the household income counted in this analysis with the broader estimate of recurring household costs used for this first-pass budget.

Household income used in this analysis **$160,670–$227,000**

Estimated full recurring household costs **$109,818–$131,303**

Estimated annual balance: $29,367–$117,182 left over per year

Household income used in this analysis	$160,670–$227,000
Estimated full recurring household costs	$109,818–$131,303
Income-to-Cost Ratio	**1.22×–2.07×** A ratio of 1.22×–2.07× means about $1.22 to $2.07 of household income for every $1.00 of estimated recurring household costs. Put another way, income is estimated to be comfortably higher than recurring costs in this first-pass budget, although taxes and actual expenses can narrow that cushion.
Estimated amount left after recurring costs	**$29,367–$117,182 left over per year**

How we counted your household income

Income source	Estimated destination pay	Amount counted toward shared household income
Household income reported earlier		**$82,000** (reported with a mix of before-tax and after-tax amounts)
Principal · plumber Already included	$50,440–$70,400	**$0 added** Not added again because the questionnaire says this worker's income is already included in the household income reported earlier.
Spouse/partner Add this income	$78,670–$145,000	**$78,670–$145,000** Added to the shared household-income calculation because the questionnaire says this income is additional.
Adult child · dentist Keep separate	$101,280–$225,360	**$0 added** Kept out of the shared household-income calculation because the questionnaire says this worker's income will remain separate from shared household expenses.
Total household income used in this State Match		**$160,670–$227,000**

What this first-pass budget includes

Income included: customer-entered continuing income with mixed or unresolved tax basis, destination-dependent gross earnings

Recurring cost categories: Housing, Utilities, Food, Transportation, Healthcare and insurance, Childcare when applicable, Taxes not already reflected in take-home income, Professional licensing and necessary work costs, Other household-specific recurring expenses supported by the questionnaire

> **Verify before relying on the estimate:** Separate the continuing-income sources into gross-before-tax and after-tax amounts before relying on a narrower tax or surplus estimate; plumber: the minimum-income test remains unresolved because the current BLS wage evidence does not establish a clear result; spouse/partner: the minimum-income test remains unresolved because the current BLS wage evidence does not establish a clear result; Separate gross and after-tax income sources before relying on the estimated tax and annual-balance result; Confirm actual housing, utility, grocery, transportation, healthcare, insurance, childcare, debt, tax, and other recurring household costs before relying on the modeled result

Federal benefits milestones on your horizon

Because at least one relocating adult is 60 or older, a few federal benefit dates are close enough to matter to the move. These are age-based planning milestones calculated from the dates of birth in your questionnaire; they do not establish actual entitlement, benefit amounts, enrollment status, or the best claiming strategy.

Ages 62 and 65

You	Your partner
Age 62 Social Security: earliest retirement claiming age You are 6 years and 26 days away from age 62. Social Security retirement benefits can generally begin at this age if you meet the work-credit requirement—40 Social Security work credits for retirement, usually earned over at least about 10 years of work covered by Social Security because no more than four credits can be earned per year. You may want to confirm your Social Security earnings record; the credits establish eligibility, not the benefit amount.	**Age 62** Social Security: earliest retirement claiming age Your partner is 9 months and 5 days away from age 62. Social Security retirement benefits can generally begin at this age if they meet the work-credit requirement—40 Social Security work credits for retirement, usually earned over at least about 10 years of work covered by Social Security because no more than four credits can be earned per year. They may want to confirm their Social Security earnings record; the credits establish eligibility, not the benefit amount.
Age 65 Medicare You are 9 years and 26 days away from age 65. Medicare eligibility generally begins at this age. The Initial Enrollment Period generally lasts seven months, beginning three months before the month you turn 65 and ending three months after it.	**Age 65** Medicare Your partner is 3 years, 9 months, and 5 days away from age 65. Medicare eligibility generally begins at this age. The Initial Enrollment Period generally lasts seven months, beginning three months before the month they turn 65 and ending three months after it.

Later Social Security milestones

Full retirement age and age 70 are later claiming milestones that can affect the household's retirement-income timing and planning.

You

Age 67

Social Security: full retirement age

You are 11 years and 26 days away from age 67. This is your Social Security full retirement age under the general birth-year rules. Starting retirement benefits before full retirement age generally reduces the monthly amount; delaying after full retirement age can increase it until age 70.

Age 70

Social Security: delayed-claiming ceiling

You are 14 years and 26 days away from age 70. Social Security retirement benefits generally stop increasing because of delayed claiming after this age.

Your partner

Age 67

Social Security: full retirement age

Your partner is 5 years, 9 months, and 5 days away from age 67. This is their Social Security full retirement age under the general birth-year rules. Starting retirement benefits before full retirement age generally reduces the monthly amount; delaying after full retirement age can increase it until age 70.

Age 70

Social Security: delayed-claiming ceiling

Your partner is 8 years, 9 months, and 5 days away from age 70. Social Security retirement benefits generally stop increasing because of delayed claiming after this age.

> **Household timing:** Your Medicare age-65 milestones are 5 years, 3 months, and 21 days apart, so the household may need to plan two separate healthcare transitions rather than assume Medicare begins for both adults at the same time.

Why these dates matter to your State Match

Social Security and Medicare are federal programs, but the relocation consequences are not identical from state to state. State taxation of retirement income, pre-Medicare healthcare costs, Medicare-plan and provider availability, and local healthcare access can materially change how comfortable a recommendation feels at ages 62, 65, full retirement age, and 70.

District of Columbia: Confirm current state taxation of Social Security and retirement income, Medicare-plan availability, provider participation, and any pre-Medicare coverage needs in the exact area you are considering.

New Jersey: Local wage, payroll, occupational, or other locality-specific taxes may apply but cannot be priced statewide without a locality

Maryland: Confirm current state taxation of Social Security and retirement income, Medicare-plan availability, provider participation, and any pre-Medicare coverage needs in the exact area you are considering.

Wyoming: Confirm current state taxation of Social Security and retirement income, Medicare-plan availability, provider participation, and any pre-Medicare coverage needs in the exact area you are considering.

Check each adult's Social Security earnings record and benefit estimates, then review claiming and Medicare timing with Social Security, Medicare, a benefits counselor, or financial professional. Health, work, longevity, taxes, household coordination, existing coverage, and cash-flow needs can change the best timing decision.

Retirement lens

Retirement considerations across your matches

Because you plan to retire within the next five years, the four states below should be compared not only for how they work during your remaining working years, but also for the taxes, healthcare geography, and climate burdens that may matter more after retirement.

Retirement issue	District of Columbia	New Jersey	Maryland	Wyoming
State income tax	Broad individual income tax	Broad individual income tax	Broad individual income tax	No broad individual income tax
Social Security	Not taxed by the state	Not taxed by the state	Not taxed by the state	Not taxed by the state
Other retirement income	Less favorable statewide treatment	Favorable statewide treatment	Mixed or source-specific treatment	Very favorable statewide treatment
State estate tax	State estate tax applies (exemption $4.87 million; rate 11.2%–16%)	No separate state estate tax	State estate tax applies (exemption $5 million; rate 0.8%–16%)	No separate state estate tax
State inheritance tax	No separate state inheritance tax	State inheritance tax applies (exemption $25,000; rate 0%–16%)	State inheritance tax applies (exemption $1,000; rate 0%–10%)	No separate state inheritance tax
Property-tax relief	Targeted relief pathways; 8 statewide/local program records in the current atlas (Circuit Breaker, Credit, Deferral)	Targeted relief pathways; 6 statewide/local program records in the current atlas (Circuit Breaker, Credit, Deferral)	Targeted relief pathways; 13 statewide/local program records in the current atlas (Circuit Breaker, Credit, Deferral)	Targeted relief pathways; 4 statewide/local program records in the current atlas (Deferral, Exemption, Other)
Winter / snow-and-ice burden	Minimal burden; limited pattern; good in-state relief potential	Moderate burden; regional pattern; some in-state relief potential	Minimal burden; limited pattern; good in-state relief potential	Lower burden; limited pattern; limited in-state relief potential
Extreme-heat burden	Minimal burden; limited pattern; good in-state relief potential	Minimal burden; limited pattern; good in-state relief potential	Minimal burden; limited pattern; good in-state relief potential	Minimal burden; limited pattern; good in-state relief potential

Retirement issue	District of Columbia	New Jersey	Maryland	Wyoming
Healthcare depth	Strong major-system and specialist depth; high geographic variation	Strong major-system and specialist depth; high geographic variation	Strong major-system and specialist depth; high geographic variation	More limited major-system and specialist depth; very high geographic variation
Rural / regional healthcare access	Relatively strong rural/regional access	Mixed rural/regional access	Mixed rural/regional access	Substantial rural/remote access constraint

> **District of Columbia:** District of Columbia has exceptional major-system and specialist depth centered in Washington and the surrounding regional medical corridor. Regional access is comparatively broader, although locality still matters.
>
> **New Jersey:** New Jersey has exceptional major-system and specialist depth centered in the New York and Philadelphia corridors plus statewide systems. Regional access is comparatively broader, although locality still matters.
>
> **Maryland:** Maryland has exceptional major-system and specialist depth centered in Baltimore, Bethesda, and the Washington suburbs. Regional access is comparatively broader, although locality still matters.
>
> **Wyoming:** Wyoming has a narrower healthcare ecosystem centered in Cheyenne and Casper, with frequent out-of-state referral needs, and complex care may require travel. Rural and remote access constraints are substantial.

These items are decision gates, not extra ranking points. StateMatcher does not silently rerank the four matches here. Estate and inheritance taxes can deserve extra attention for households with substantial assets. Winter and heat rows are statewide directional screens rather than promises about a particular community, and healthcare rows describe broad system and specialist geography rather than Medicare-plan acceptance or a specific provider network. Long-term-care availability and cost, in-home care, and long-term-care insurance are important retirement questions, but the current nationwide evidence does not support a responsible four-state comparison here; verify them locally once a destination becomes serious.

Verification checklist

Confirm one realistic metro where the plumber, lawyer, and dentist can all work at acceptable pay. Check current openings, employer locations, licensing or credential transfer, benefits, schedules, and commuting time.

Verify each required hospital, specialist, primary-care practice, pharmacy, medication, and service against the exact insurance plan. Ask about new-patient availability, prior authorization, wait times, and backup providers.

Measure ordinary and bad-weather travel time from each candidate address to the appropriate emergency department and any advanced emergency capability your household may need.

Obtain an exact housing quote and property-specific insurance quotes from multiple carriers or an independent agent. Review deductibles, exclusions, replacement cost, roof rules, catastrophe coverage, and nonrenewal terms.

Check current hazard information for the county and property, including hurricane wind, coastal or inland flooding, earthquake exposure, drainage, evacuation, building condition, and any separate flood or wind coverage.

Verify current school assignment, enrollment eligibility, charter or transfer rules, transportation, programs, and the newest academic results for both children's likely grade levels.

For the large or possibly restricted-breed dog, check current municipal animal rules, landlord or association restrictions, and insurer underwriting. If a qualifying disability-related assistance-animal need exists, federal fair-housing law may require consideration of an accommodation, but qualification and the property's actual process must be confirmed.

Separate income by source and identify whether each amount is before or after tax. Confirm state and local taxes, special exclusions or credits, benefits, professional costs, and all recurring household expenses before relying on the Financial Outlook.

Because retirement is within five years, review the official Social Security earnings record and benefit estimates. Most workers generally need 40 credits, and benefits can generally begin at 62 at a reduced amount before full retirement age. Continued wages or net self-employment before full retirement age can affect benefits and should be checked directly with the Social Security Administration.

After choosing a likely region, verify the exact retraining campus and program, current tuition and fees, residency requirements, aid, transfer path, schedule, accreditation or licensing alignment, outcomes, and travel from the actual home.

Practical next steps

Start with three paired location tests: Washington for District of Columbia, the Newark–Jersey City corridor for New Jersey, and Baltimore plus a Maryland small-town alternative that remains within reach of the required jobs and medical system.

Ask all three workers to identify real employers in the same metro and collect several representative openings. Do not sign housing until the shared job plan works as a whole.

Create a healthcare call sheet for each finalist and contact the insurer, hospital system, specialists, and pharmacy separately. Written network confirmation is preferable to a general provider-directory result.

Request sample housing and insurance quotes for at least two realistic properties in each finalist area, then add the actual commute, utilities, pet restrictions, taxes, and likely medical costs.

Visit finalist areas on ordinary weekdays. Test rush-hour commutes, emergency travel, school transportation, grocery and pharmacy access, winter or storm conditions where possible, and the daily feel of the community.

Keep Wyoming as a deliberate comparison rather than a fallback. It should stay in consideration only if Casper’s shared job market and the household’s emergency and specialist-care requirements can be reconciled with an acceptable residential location.