FINANCIAL ASSISTANCE ELIGIBILITY GUIDELINES

Based on Federal Poverty Guidelines Effective January 15, 2020

Schedule A (shaded) Financially Indigent

Schedule B (unshaded) Medically Indigent

| Number in Household | 100% | 200% | 300% | 400% | 500% |
|-------------------------------------|--------|--------|---------|---------|---------|
| 1 | 12,760 | 25,520 | 38,280 | 51,040 | 63,800 |
| 2 | 17,240 | 34,480 | 51,720 | 68,960 | 86,200 |
| 3 | 21,720 | 43,440 | 65,160 | 86,880 | 108,600 |
| 4 | 26,200 | 52,400 | 78,600 | 104,800 | 131,000 |
| 5 | 30,680 | 61,360 | 92,040 | 122,720 | 153,400 |
| 6 | 35,160 | 70,320 | 105,480 | 140,640 | 175,800 |
| 7 | 39,640 | 79,280 | 118,920 | 158,560 | 198,200 |
| 8 | 44,120 | 88,240 | 132,360 | 176,480 | 220,600 |
| For each additional person | 4,480 | | | | |
| Discount | | 100% | 80% | 60% | 40% |
| Financially Indigent Classification | | | | | |

Schedule C

Catastrophic Eligibility as Medically Indigent

Only applicable if patients income exceeds 500% of Federal Poverty Guidelines

| Discount |
|----------|
| 80% |
| 60% |
| 40% |
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