

Discounted Financial Assistance Guidelines for the Uninsured Effective with Financial Assistance Determinations on or after Jan. 11, 2019

Persons in Family or	2019 HHS Poverty	150% of Poverty	151%-400% of
Household	Guidelines	Level	Poverty Level*
1	\$12,490	\$18,735	\$49,960
2	\$16,910	\$25,365	\$67,640
3	\$21,330	\$31,995	\$85,320
4	\$25,750	\$38,625	\$103,000
5	\$30,170	\$45,255	\$120,680
6	\$34,590	\$51,885	\$138,360
7	\$39,010	\$58,515	\$156,040
8	\$43,430	\$65,145	\$173,720
each additional person	\$4,420	\$6,630	\$17,680
Discount/Write-off		100%	65%

^{*}Discount does not apply to account balances after insurance pays.

Source: https://aspe.hhs.gov/poverty-quidelines