

## Discounted Financial Assistance Guidelines for the Uninsured

## Effective with Financial Assistance Determinations on or after January 15, 2020

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

Persons in Family or Household	2020 HHS Poverty Guidelines (PG)			50% OF POVERTY LEVEL	151%-400% OF POVERTY LEVEL *		
1	\$	12,760	\$	19,140	\$	51,040	
2	\$	17,240	\$	25,860	\$	68,960	
3	\$	21,720	\$	32,580	\$	86,880	
4	\$	26,200	\$	39,300	\$	104,800	
5	\$	30,680	\$	46,020	\$	122,720	
6	\$	35,160	\$	52,740	\$	140,640	
7	\$	39,640	\$	59,460	\$	158,560	
8	\$	44,120	\$	66,180	\$	176,480	
each additional p \$		4,480	\$	6,720	\$	17,920	
DISCOUNT/WRITE-OFF				100%		66%	

<sup>\*</sup> Discount does not apply to account balances after insurance pays



Discounted Financial Assistance Guidelines for the INSURED Effective with Financial Assistance Determinations on or after September 1, 2020

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

Persons in Family or Household		020 HHS Poverty Guidelines (PG)	15	50% OF POVERTY LEVEL	P	151%-300% OF POVERTY LEVEL ffective Sept. 1, 2020 *	F	801% - 400% OF POVERTY LEVEL ctive Sept. 1 ,2020 *
1	\$	12,760	\$	19,140	\$	38,280	\$	51,040
2	\$	17,240	\$	25,860	\$	51,720	\$	68,960
3	\$	21,720	\$	32,580	\$	65,160	\$	86,880
4	\$	26,200	\$	39,300	\$	78,600	\$	104,800
5	\$	30,680	\$	46,020	\$	92,040	\$	122,720
6	\$	35,160	\$	52,740	\$	105,480	\$	140,640
7	\$	39,640	\$	59,460	\$	118,920	\$	158,560
8	\$	44,120	\$	66,180	\$	132,360	\$	176,480
each additional								
person	\$	4,480	\$	6,720	\$	13,440	\$	17,920
DISCOUNT/WRITE-OFF				100%		30%		15%

<sup>\*</sup> Catastrophic charity may be applied if medical bill balances exceed 30% of household income per information provided on the FAP application