



Discounted Financial Assistance Guidelines for the **Uninsured**

Effective with Financial Assistance Determinations on or after January 26, 2021

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

Persons in Family or Household	2021 HHS Poverty Guidelines (PG)	150% OF POVERTY LEVEL	151%-400% OF POVERTY LEVEL *
1	\$ 12,880	\$ 19,320	\$ 51,520
2	\$ 17,420	\$ 26,130	\$ 69,680
3	\$ 21,960	\$ 32,940	\$ 87,840
4	\$ 26,500	\$ 39,750	\$ 106,000
5	\$ 31,040	\$ 46,560	\$ 124,160
6	\$ 35,580	\$ 53,370	\$ 142,320
7	\$ 40,120	\$ 60,180	\$ 160,480
8	\$ 44,660	\$ 66,990	\$ 178,640
each additional person	\$ 4,540	\$ 6,810	\$ 18,160
DISCOUNT/WRITE-OFF		100%	68%

* 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 January 26, 2021

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

Persons in Family or Household	2021 HHS Poverty Guidelines (PG)	150% OF POVERTY LEVEL	151%-300% OF POVERTY LEVEL *	301% - 400% OF POVERTY LEVEL *
1	\$ 12,880	\$ 19,320	\$ 38,640	\$ 51,520
2	\$ 17,420	\$ 26,130	\$ 52,260	\$ 69,680
3	\$ 21,960	\$ 32,940	\$ 65,880	\$ 87,840
4	\$ 26,500	\$ 39,750	\$ 79,500	\$ 106,000
5	\$ 31,040	\$ 46,560	\$ 93,120	\$ 124,160
6	\$ 35,580	\$ 53,370	\$ 106,740	\$ 142,320
7	\$ 40,120	\$ 60,180	\$ 120,360	\$ 160,480
8	\$ 44,660	\$ 66,990	\$ 133,980	\$ 178,640
each additional person	\$ 4,540	\$ 6,810	\$ 13,620	\$ 18,160
DISCOUNT/WRITE-OFF		100%	30%	15%

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