



Financial Assistance Policy
Attachment A

FEDERAL POVERTY LEVEL GUIDELINES for the 48 contiguous states and the District of Columbia.
Effective February 1, 2022

Family Size	100% FPL	125% FPL	150% FPL	175% FPL	200% FPL
1	\$13,590	\$16,988	\$20,385	\$23,783	\$27,180
2	\$18,310	\$22,888	\$27,465	\$32,043	\$36,620
3	\$23,030	\$28,788	\$34,545	\$40,303	\$46,060
4	\$27,750	\$34,688	\$41,625	\$48,563	\$55,500
5	\$32,470	\$40,588	\$48,705	\$56,823	\$64,940
6	\$37,190	\$46,488	\$55,785	\$65,083	\$74,380
7	\$41,910	\$52,388	\$62,865	\$73,343	\$83,820
8	\$46,630	\$58,288	\$69,945	\$81,603	\$93,260
9	\$51,350	\$64,188	\$77,025	\$89,863	\$102,700
10	\$56,070	\$70,088	\$84,105	\$98,123	\$112,140
Each additional person	\$4,720	\$5,900	\$7,080	\$8,260	\$9,440

MHLC DISCOUNT TABLE
% discount determined by size of balance outstanding, using ratio of patient adjusted annual income over 200% Federal Poverty Level

Adjusted Income Ratio	\$1 - \$1000 Outstanding	\$1,001 - \$3,500 Outstanding	\$3,501 - \$5,000 Outstanding	\$5,000 - \$10,000 Outstanding	> \$ 10,000 Outstanding
.01-.10	5%	7%	9%	11%	13%
.11-.20	15%	17%	19%	21%	23%
.21-.30	25%	27%	29%	31%	33%
.31-.40	35%	37%	39%	41%	43%
.41-.50	45%	47%	49%	51%	53%
.51-.60	55%	57%	59%	61%	63%
.61-.70	65%	67%	69%	71%	73%
.71-.80	75%	77%	79%	81%	83%
.81-.90	85%	87%	89%	91%	93%
.91-.99	95%	97%	99%	99%	99%
1.00	100%	100%	100%	100%	100%