

2019 Federal Poverty Level								
Household Size	100%		<125%		150%		175%	
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly
1	\$ 12,490.00	\$ 1,040.83	\$ 15,612.50	\$ 1,301.04	\$ 18,735.00	\$ 1,561.25	\$ 21,857.50	\$ 1,821.46
2	\$ 16,910.00	\$ 1,409.17	\$ 21,137.50	\$ 1,761.46	\$ 25,365.00	\$ 2,113.75	\$ 29,592.50	\$ 2,466.04
3	\$ 21,330.00	\$ 1,777.50	\$ 26,662.50	\$ 2,221.88	\$ 31,995.00	\$ 2,666.25	\$ 37,327.50	\$ 3,110.63
4	\$ 25,750.00	\$ 2,145.83	\$ 32,187.50	\$ 2,682.29	\$ 38,625.00	\$ 3,218.75	\$ 45,062.50	\$ 3,755.21
5	\$ 30,170.00	\$ 2,514.17	\$ 37,712.50	\$ 3,142.71	\$ 45,255.00	\$ 3,771.25	\$ 52,797.50	\$ 4,399.79
6	\$ 34,590.00	\$ 2,882.50	\$ 43,237.50	\$ 3,603.13	\$ 51,885.00	\$ 4,323.75	\$ 60,532.50	\$ 5,044.38
7	\$ 39,010.00	\$ 3,250.83	\$ 48,762.50	\$ 4,063.54	\$ 58,515.00	\$ 4,876.25	\$ 68,267.50	\$ 5,688.96
8	\$ 43,430.00	\$ 3,619.17	\$ 54,287.50	\$ 4,523.96	\$ 65,145.00	\$ 5,428.75	\$ 76,002.50	\$ 6,333.54
*	\$ 4,420.00	\$ 368.33	\$ 5,525.00	\$ 460.42	\$ 6,630.00	\$ 552.50	\$ 7,735.00	\$ 644.58

	Hopital Write-Off	Patient Liability	Hopital Write-Off	Patient Liability	Hopital Write-Off	Patient Liability	Hopital Write-Off	Patient Liability
Indigent	100%	0%	100%	0%				
Charity					90%	10%	85%	15%

Household Size	200%		225%		250%		275%	
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly
1	\$ 24,980.00	\$ 2,081.67	\$ 28,102.50	\$ 2,341.88	\$ 31,225.00	\$ 2,602.08	\$ 34,347.50	\$ 2,862.29
2	\$ 33,820.00	\$ 2,818.33	\$ 38,047.50	\$ 3,170.63	\$ 42,275.00	\$ 3,522.92	\$ 46,502.50	\$ 3,875.21
3	\$ 42,660.00	\$ 3,555.00	\$ 47,992.50	\$ 3,999.38	\$ 53,325.00	\$ 4,443.75	\$ 58,657.50	\$ 4,888.13
4	\$ 51,500.00	\$ 4,291.67	\$ 57,937.50	\$ 4,828.13	\$ 64,375.00	\$ 5,364.58	\$ 70,812.50	\$ 5,901.04
5	\$ 60,340.00	\$ 5,028.33	\$ 67,882.50	\$ 5,656.88	\$ 75,425.00	\$ 6,285.42	\$ 82,967.50	\$ 6,913.96
6	\$ 69,180.00	\$ 5,765.00	\$ 77,827.50	\$ 6,485.63	\$ 86,475.00	\$ 7,206.25	\$ 95,122.50	\$ 7,926.88
7	\$ 78,020.00	\$ 6,501.67	\$ 87,772.50	\$ 7,314.38	\$ 97,525.00	\$ 8,127.08	\$ 107,277.50	\$ 8,939.79
8	\$ 86,860.00	\$ 7,238.33	\$ 97,717.50	\$ 8,143.13	\$ 108,575.00	\$ 9,047.92	\$ 119,432.50	\$ 9,952.71
*	\$ 8,320.00	\$ 693.33	\$ 9,945.00	\$ 828.75	\$ 11,050.00	\$ 920.83	\$ 12,155.00	\$ 1,012.92

	Hopital Write-Off	Patient Liability	Hopital Write-Off	Patient Liability	Hopital Write-Off	Patient Liability	Hopital Write-Off	Patient Liability
Indigent								
Charity	80%	20%	75%	25%	70%	30%	60%	40%

Household Size	300%		325%		350%		375%	
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly
1	\$ 37,470.00	\$ 3,122.50	\$ 40,592.50	\$ 3,382.71	\$ 43,715.00	\$ 3,642.92	\$ 46,837.50	\$ 3,903.13
2	\$ 50,730.00	\$ 4,227.50	\$ 54,957.50	\$ 4,579.79	\$ 59,185.00	\$ 4,932.08	\$ 63,412.50	\$ 5,284.38
3	\$ 63,990.00	\$ 5,332.50	\$ 69,322.50	\$ 5,776.88	\$ 74,655.00	\$ 6,221.25	\$ 79,987.50	\$ 6,665.63
4	\$ 77,250.00	\$ 6,437.50	\$ 83,687.50	\$ 6,973.96	\$ 90,125.00	\$ 7,510.42	\$ 96,562.50	\$ 8,046.88
5	\$ 90,510.00	\$ 7,542.50	\$ 98,052.50	\$ 8,171.04	\$ 105,595.00	\$ 8,799.58	\$ 113,137.50	\$ 9,428.13
6	\$ 103,770.00	\$ 8,647.50	\$ 112,417.50	\$ 9,368.13	\$ 121,065.00	\$ 10,088.75	\$ 129,712.50	\$ 10,809.38
7	\$ 117,030.00	\$ 9,752.50	\$ 126,782.50	\$ 10,565.21	\$ 136,535.00	\$ 11,377.92	\$ 146,287.50	\$ 12,190.63
8	\$ 130,290.00	\$ 10,857.50	\$ 141,147.50	\$ 11,762.29	\$ 152,005.00	\$ 12,667.08	\$ 162,862.50	\$ 13,571.88
*	\$ 13,260.00	\$ 1,105.00	\$ 14,365.00	\$ 1,197.08	\$ 15,470.00	\$ 1,289.17	\$ 16,575.00	\$ 1,381.25

	Hopital Write-Off	Patient Liability	Hopital Write-Off	Patient Liability	Hopital Write-Off	Patient Liability	Hopital Write-Off	Patient Liability
Indigent								
Charity	50%	50%	40%	60%	30%	70%	20%	80%

Household Size	400%	
	Annual	Monthly
1	\$ 49,960.00	\$ 4,163.33
2	\$ 67,640.00	\$ 5,636.67
3	\$ 85,320.00	\$ 7,110.00
4	\$ 103,000.00	\$ 8,583.33
5	\$ 120,680.00	\$ 10,056.67
6	\$ 138,360.00	\$ 11,530.00
7	\$ 156,040.00	\$ 13,003.33
8	\$ 173,720.00	\$ 14,476.67
*	\$ 17,680.00	\$ 1,473.33

	Hopital Write-Off	Patient Liability

Indigent		
Charity	10%	90%