St Francis Healthcare
Charity Thresholds Based on HHS Poverty Guidelines
2018

ATTACHMENT D

	Adjust 100%	*Adjust 78%**	
Family Size	**Family Income up to 200% HHS Povery Guidelines by Family Size**	**Family Income between 201% and 400% HHS Povery Guidelines by Family Size (range)**	
1	$ 24,280	24,281	48,560
2	$ 32,920	32,921	65,840
3	$ 41,560	41,561	83,120
4	$ 50,200	50,201	100,400
5	$ 58,840	58,841	117,680
6	$ 67,480	67,481	134,960
7	$ 76,120	76,121	152,240
8	$ 84,760	84,761	169,520
9	$ 93,400	93,401	186,800
10	$ 102,040	102,041	204,080
11	$ 110,680	110,681	221,360
12	$ 119,320	119,321	238,640
Per Added Person	$ 8,640	$	17,280

http://aspe.hhs.gov/poverty/index.shtml

*Percentage adjustment for family income levels between 201% and 400% of poverty guidelines = Medicare acute contractual % for services billed between 6/1/2016-5/31/2017