

CULLMAN REGIONAL MEDICAL CENTER
 FY 2016 Charity Care & Financial Assistance
 Income Eligibility Guidelines
 Revised 01-25-18

% Liability of Medicare Payor Rates

	0%	25%	50%	75%	100%
Number of Exemptions	0-200% FPL Income To Amount	201-250% FPL Income To Amount	251-300% FPL Income To Amount	301-350% FPL Income To Amount	351+% FPL Income To Amount
# 1	\$ 25,480.00	\$ 31,850.00	\$ 38,220.00	\$ 44,590.00	\$ 44,591.00
# 2	\$ 32,920.00	\$ 41,150.00	\$ 49,380.00	\$ 57,610.00	\$ 57,611.00
# 3	\$ 41,560.00	\$ 51,950.00	\$ 62,340.00	\$ 72,730.00	\$ 72,731.00
# 4	\$ 50,200.00	\$ 62,750.00	\$ 75,300.00	\$ 87,850.00	\$ 87,851.00
# 5	\$ 58,840.00	\$ 73,550.00	\$ 88,260.00	\$ 102,970.00	\$102,971.00
# 6	\$ 67,480.00	\$ 84,350.00	\$ 101,220.00	\$ 118,090.00	\$118,091.00
# 7	\$ 76,120.00	\$ 95,150.00	\$ 114,180.00	\$ 133,210.00	\$133,211.00
# 8	\$ 84,760.00	\$ 105,950.00	\$ 127,140.00	\$ 148,330.00	\$148,331.00
For family size greater than 8, add \$4,320.00 for each additional person					
Source FPL Calculations: https://aspe.hhs.gov/poverty-guidelines					

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See P&P PFS 141-003.003

Poverty Guidelines

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