CULLMAN REGIONAL MEDICAL CENTER
FY 2016 Charity Care & Financial Assistance
Income Eligibility Guidelines
Revised 01-28-19

% 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	$ 24,980.00	$ 31,225.00	$ 37,470.00	$ 43,715.00	$ 43,716.00
2	$ 33,820.00	$ 42,275.00	$ 50,730.00	$ 59,185.00	$ 59,186.00
3	$ 42,660.00	$ 53,325.00	$ 63,990.00	$ 74,655.00	$ 74,656.00
4	$ 51,500.00	$ 64,375.00	$ 77,250.00	$ 90,125.00	$ 90,126.00
5	$ 60,340.00	$ 75,425.00	$ 90,510.00	$ 105,595.00	$105,596.00
6	$ 69,180.00	$ 86,475.00	$ 103,770.00	$ 121,065.00	$121,066.00
7	$ 78,020.00	$ 97,525.00	$ 117,030.00	$ 136,535.00	$136,536.00
8	$ 86,860.00	$ 108,575.00	$ 130,290.00	$ 152,005.00	$152,006.00
For family size greater than 8, add $4,420.00 for each additional person					
Source FPL Calculations: https://aspe.hhs.gov/poverty-guidelines					

Updated 01-28-19

See P&P PFS 141-003.003