



Financial Assistance Income Guidelines 2021

Good Samaritan Hospital Medical Center

Mercy Medical Center

St. Catherine of Siena Medical Center

St. Charles Hospital

St. Francis Hospital

St. Joseph Hospital

Eligibility Percentage	100%	80%	60%	40%	20%
% of Poverty Level	0% - 300%	301% - 325%	326% - 350%	351% - 375%	376% - 400%
Family Size					
1	\$ 12,880 - 38,640	\$ 38,641 - 41,860	\$ 41,861 - 45,080	\$ 45,081 - 48,300	\$48,301 - 51,520
2	17,420 - 52,260	52,261 - 56,615	56,616 - 60,970	60,971 - 65,325	65,326 - 69,680
3	21,960 - 65,880	65,881 - 71,370	71,371 - 76,860	76,861 - 82,350	82,351 - 87,840
4	26,500 - 79,500	79,501 - 86,125	86,126 - 92,750	92,751 - 99,375	99,376 - 106,000
5	31,040 - 93,120	93,121 - 100,880	100,881 - 108,640	108,641 - 116,400	116,401 - 124,160
6	35,580 - 106,740	106,741 - 115,635	115,636 - 124,530	124,531 - 133,425	133,426 - 142,320
7	40,120 - 120,360	120,361 - 130,390	130,391 - 140,420	140,421 - 150,450	150,451 - 160,480
8	44,660 - 133,980	133,981 - 145,145	145,146 - 156,310	156,311 - 167,475	167,476 - 178,640
9	49,200 - 147,600	147,601 - 159,900	159,901 - 172,200	172,201 - 184,500	184,501 - 196,800
10	53,740 - 161,220	161,221 - 174,655	174,656 - 188,090	188,091 - 201,525	201,526 - 214,960
11	58,280 - 174,840	174,841 - 189,410	189,411 - 203,980	203,981 - 218,550	218,551 - 233,120
12	62,820 - 188,460	188,461 - 204,165	204,166 - 219,870	219,871 - 235,575	235,576 - 251,280
For each additional person, add	\$4,540				

The above income levels refer to family income. Family income includes earnings, unemployment compensation, workers' compensation, Social Security, supplemental security income, public assistance, veteran payments, survivor benefits, pension or retirement income, interest, dividends, rents, royalties, income from estates, trusts, educational assistance, alimony, child support, assistance from outside the household, and other miscellaneous sources. Non-cash benefits (such as food stamps and housing subsidies) do not count. Family income is calculated before taxes and excludes unrealized capital gains or losses.

Other Asset Exemptions: Available assets shall be converted to income for comparison to poverty guidelines, on a dollar for dollar basis, but will exclude from consideration the following assets in considering whether the patient meets the financial assistance criteria: savings accounts and other liquid assets with balances of less than six months of income; assets held in a tax-deferred or comparable retirement savings account; college savings accounts; all personal property, including, but not limited to, household goods, wedding/engagement rings and medical equipment; available business equity below \$50,000; automobiles used regularly by a patient or immediate family members; and other assets at our discretion that we may believe are in the patient's best interest to exempt.