

**Financial Assistance Discount Levels and Qualifications**

<b>Discount Level</b>	<b>Description</b>	<b>Income % of FPL</b>
HCAP*	100% Discount Free Care	100% or less
Tier 1*	100% Discount Free Care	101 – 138%
Tier 2	75% Discount	139 – 225%
Tier 3	60% Discount	226 – 300%
Uninsured	40% Discount	301% or more

**Maximum Income Levels for Discounts by Tier**  
Effective January 12th, 2024

<b>Family Size</b>	<b>HCAP*</b>	<b>Tier 1*</b>	<b>Tier 2</b>	<b>Tier 3</b>
<b>Discount %</b>	100%	100%	75%	60%
1	\$ 15,060.00	\$ 20,782.80	\$ 33,885.00	\$ 45,180.00
2	\$ 20,440.00	\$ 28,207.20	\$ 45,990.00	\$ 61,320.00
3	\$ 25,820.00	\$ 35,631.60	\$ 58,095.00	\$ 77,460.00
4	\$ 31,200.00	\$ 43,056.00	\$ 70,200.00	\$ 93,600.00
5	\$ 36,580.00	\$ 50,480.40	\$ 82,305.00	\$ 109,740.00
6	\$ 41,960.00	\$ 57,904.80	\$ 94,410.00	\$ 125,880.00
7	\$ 47,340.00	\$ 65,329.20	\$ 106,515.00	\$ 142,020.00
8	\$ 52,720.00	\$ 72,753.60	\$ 118,620.00	\$ 158,160.00
<b>Each Additional Family Member Add</b>	\$ 5,380.00	\$ 7,424.40	\$ 12,105.00	\$ 16,140.00

\*Applicants qualifying for HCAP or Tier 1 discounts are required to apply for Medicaid coverage and must present denial documentation in order to be eligible for HCAP or Tier 1 discounts. Applicants may elect to not apply for Medicaid and in doing so will qualify for Tier 2 discounts regardless of income % less than 226%.

<sup>a</sup> Federal Poverty Level guidelines in current publication (in the Federal Register) on the date of admission or service shall be used to determine eligibility for assistance.