

**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	59% Discount	226 – 300%
Uninsured	40% Discount	301% or more

**Maximum Income Levels for Discounts by Tier**  
*Effective March 1, 2022*

<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%	59%
1	\$13,590.00	\$18,754.20	\$30,577.50	\$40,770.00
2	\$18,310.00	\$25,267.80	\$41,197.50	\$54,930.00
3	\$23,030.00	\$31,781.40	\$51,817.50	\$69,090.00
4	\$27,750.00	\$38,295.00	\$62,437.50	\$83,250.00
5	\$32,470.00	\$44,808.60	\$73,057.50	\$97,410.00
6	\$37,190.00	\$51,322.20	\$83,677.50	\$111,750.00
7	\$41,910.00	\$57,835.80	\$94,297.50	\$125,730.00
8	\$46,630.00	\$64,349.40	\$104,917.50	\$139,890.00
<i>Each Additional Family Member Add</i>	\$4,720.00	\$6,513.60	\$10,620.00	\$14,160.00

\*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.

