

This document is an attachment to MHHS Financial Assistance Policy.

**Exhibit B – Federal Poverty Guidelines**

The Gross Monthly Income Financial Assistance Eligibility Table is revised when changes are made to the Federal Poverty Guidelines. The table is updated yearly.

The Gross Monthly Income Financial Assistance Eligibility Table means the current income table that MHHS uses in determining Financial Assistance eligibility under this FAP.

The Gross Monthly Family Income Financial Assistance Eligibility Table is based upon the Federal Poverty Guidelines and the Harris County Hospital District Eligibility Table, as amended from time to time by those respective governmental agencies and said table is available for review.

Please see table below:

<b>Memorial Hermann Health System</b>						
<b>Gross Income Financial Assistance Eligibility Table</b>						
2019 Federal Poverty Guidelines (FPG)						
Gross annual or monthly income to be eligible for financial assistance based on Family size.						
	100% of FPG		200% of FPG		400% FPG	
Family Size	Annual Income	Monthly Income	Annual Income	Monthly Income	Annual Income	Monthly Income
1	\$12,490	\$1,041	\$24,980	\$2,082	\$49,960	\$4,163
2	\$16,910	\$1,409	\$33,820	\$2,818	\$67,640	\$5,637
3	\$21,330	\$1,778	\$42,660	\$3,555	\$85,320	\$7,110
4	\$25,750	\$2,146	\$51,500	\$4,292	\$103,000	\$8,583
5	\$30,170	\$2,514	\$60,340	\$5,028	\$120,680	\$10,057
6	\$34,590	\$2,883	\$69,180	\$5,765	\$138,360	\$11,530
7	\$39,010	\$3,251	\$78,020	\$6,502	\$156,040	\$13,003
8	\$43,430	\$3,619	\$86,860	\$7,238	\$173,720	\$14,477
<i>For Family units of more than 8 persons, add \$4,420 for each additional person to determine Federal Poverty Guideline.</i>						