

2017 Federal Poverty Guidelines

Effective 01/31/17

Members Household	FPL	300%	350%	400%
1	\$12,060.00	\$36,180.00	\$42,210.00	\$48,240.00
2	\$16,240.00	\$48,720.00	\$56,840.00	\$64,960.00
3	\$20,420.00	\$61,260.00	\$71,470.00	\$81,680.00
4	\$24,600.00	\$73,800.00	\$86,100.00	\$98,400.00
5	\$28,780.00	\$86,340.00	\$100,730.00	\$115,120.00
6	\$32,960.00	\$98,880.00	\$115,360.00	\$131,840.00
7	\$37,140.00	\$111,420.00	\$129,990.00	\$148,560.00
8	\$41,320.00	\$123,960.00	\$144,620.00	\$165,280.00
9	\$45,500.00	\$136,500.00	\$159,250.00	\$182,000.00
10	\$49,680.00	\$149,040.00	\$173,880.00	\$198,720.00
11	\$53,860.00	\$161,580.00	\$188,510.00	\$215,440.00
12	\$58,040.00	\$174,120.00	\$203,140.00	\$232,160.00
13	\$62,220.00	\$186,660.00	\$217,770.00	\$248,880.00
14	\$66,400.00	\$199,200.00	\$232,400.00	\$265,600.00
15	\$70,580.00	\$211,740.00	\$247,030.00	\$282,320.00
16	\$74,760.00	\$224,280.00	\$261,660.00	\$299,040.00
17	\$78,940.00	\$236,820.00	\$276,290.00	\$315,760.00
18	\$83,120.00	\$249,360.00	\$290,920.00	\$332,480.00
19	\$87,300.00	\$261,900.00	\$305,550.00	\$349,200.00
20	\$91,480.00	\$274,440.00	\$320,180.00	\$365,920.00

Income % FPL	Patient Responsibility as % of Medicare	Discount from billed charges equivalent for HB ED/OP	Discount from billed charges equivalent for HB IP	Discount from billed charges equivalent for PB
0-300%	0%	100.0%	100.0%	100.0%
301%-350%	50%	88.5%	85.5%	84.0%
351%-400%	100%	77.1%	71.0%	67.8%