

FEDERAL POVERTY LEVEL (FPL) GUIDELINES

You may qualify for Financial Assistance based on your income and family size for the patient responsibility portion of the bill, even if you have health insurance. Financial Assistance is awarded to a patient/guarantor whose gross family income falls within a certain range of the FPL.

• For dates of service prior to July 1, 2022:

o Full charges up to 300% of the FPL and adjusted for family size.

Federal Poverty Levels	Financial Assistance %	Patient Responsibility	
0% - 300%	100%	0%	

For dates of service on or after July 1, 2022:

- o Full charges up to 300% of the FPL and adjusted for family size.
- Partial awards 301% 400% of the FPL and adjusted for family size are based on discharge date
 July 1, 2022.

Federal Poverty Levels	Financial Assistance %	Patient Responsibility	
0% - 300%	100%	0%	
301 - 350%	75%	25%	
351 - 400%	50%	50%	

	GROSS INCOME RANGES						
Family	Monthly FPL Table		Annual FPL Table				
Size	0 – 300%	301 – 350%	351-400%	0 – 300%	301 – 350%	351-400%	
1	\$3,645	\$3,646 - \$4,253	\$4, 254 - \$4,860	\$43,740	\$43,741 - \$51,030	\$51,031 - \$58,320	
2	\$4,930	\$4,931 - \$5,752	\$5,753 - \$6,573	\$59,160	\$59,161 - \$69,020	\$69,021- \$78,880	
3	\$6,215	\$6,216 - \$7,251	\$7,252 - \$8,287	\$74,580	\$74,581 - \$87,010	\$87,011- \$99,440	
4	\$7,500	\$7,501 - \$8,750	\$8,751 - \$10,000	\$90,000	\$90,001 - \$105,000	\$105,001 - \$120,000	
5	\$8,785	\$8,786 - \$10,249	\$10, 250 - \$11,713	\$105,420	\$105,421 - \$122,990	\$122,991 - \$140,560	
6	\$10,070	\$10, 071 - \$11,748	\$11, 749 - \$13,427	\$120,840	\$120,841 - \$140,980	\$140,981 - \$161,120	
7	\$11,355	\$11, 356 - \$13,248	\$13,249 - \$15,140	\$136,260	\$136,261 - \$158,970	\$158,971 - \$181,680	
8	\$12,640	\$12,641 - \$14,747	\$14, 748 - \$16,853	\$151,680	\$151,681 - \$176,960	\$176,961 - \$202,240	
9	\$13,925	\$13,926 - \$16,246	\$16, 247 - \$18,567	\$167,100	\$167,101 - \$194,950	\$194,951 - \$222,800	
10	\$15,210	\$15, 211 - \$17,745	\$17, 746 - \$20,280	\$182,520	\$182,521 - \$212,940	\$212,941 - \$243,360	

A family size greater than one person refers to persons related by birth, marriage, or adoption who live together; all such related persons are considered members of one family. Information to support inclusion of family members will be requested when completing the Financial Assistance application.

For help, contact Fred Hutchinson Cancer Center Financial Counseling Department noted on the Financial Assistance Application or Plain Language Summary.

Effective: 2/1/2023