



The MetroHealth System

Financial Assistance Plan Income Levels

Family Size	Up to 100% of Poverty	Up to 200% of Poverty	Up to 300% of Poverty	Up to 400% of Poverty
1	\$ 14,580	\$ 29,160	\$ 43,740	\$ 58,320
2	\$ 19,720	\$ 39,440	\$ 59,160	\$ 78,880
3	\$ 24,860	\$ 49,720	\$ 74,580	\$ 99,440
4	\$ 30,000	\$ 60,000	\$ 90,000	\$ 120,000
5	\$ 35,140	\$ 70,280	\$ 105,420	\$ 140,560
6	\$ 40,280	\$ 80,560	\$ 120,840	\$ 161,120
7	\$ 45,420	\$ 90,840	\$ 136,260	\$ 181,680
8	\$ 50,560	\$ 101,120	\$ 151,680	\$ 202,240
9	\$ 55,700	\$ 111,400	\$ 167,100	\$ 222,800
10	\$ 60,840	\$ 121,680	\$ 182,520	\$ 243,360

Federal Poverty Guidelines published in the Federal Register dated January 16, 2023. Eligibility for Ohio Hospital Care Assurance Program (HCAP) is up to 100% FPL.