



# 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	\$ 13,590	\$ 27,180	\$ 40,770	\$ 54,360
2	\$ 18,310	\$ 36,620	\$ 54,930	\$ 73,240
3	\$ 23,030	\$ 46,060	\$ 69,090	\$ 92,120
4	\$ 27,750	\$ 55,500	\$ 83,250	\$ 111,000
5	\$ 32,470	\$ 64,940	\$ 97,410	\$ 129,880
6	\$ 37,190	\$ 74,380	\$ 111,570	\$ 148,760
7	\$ 41,910	\$ 83,820	\$ 125,730	\$ 167,640
8	\$ 46,630	\$ 93,260	\$ 139,890	\$ 186,520
9	\$ 51,350	\$ 102,700	\$ 154,050	\$ 205,400
10	\$ 56,070	\$ 112,140	\$ 168,210	\$ 224,280

Federal Poverty Guidelines published in the Federal Register dated January 12, 2022. Eligibility for Ohio Hospital Care Assurance Program (HCAP) is up to 100% FPL.