

**Mary Free Bed Rehabilitation Hospital  
Mary Free Bed Orthotics Prosthetics  
Mary Free Bed Medical Group  
Community Financial Assistance Sliding Fee Schedule - Income Consideration\*  
Effective January 1, 2018**

Federal Poverty Level - \$**	Family Size ***	Income Below 145% of Federal Poverty Level  100% Write-Off	Below 180%  80% Write-Off	Below 215%  60% Write-Off	Below 250%  40% Write-Off	Income 250% Above Federal Poverty Level  0% Write-Off
12,140	1	0 - 17,481	17,482 - 21,730	21,731 - 25,979	25,980 - 30,228	30,229
16,460	2	0 - 23,702	23,703 - 29,463	29,464 - 35,224	35,225 - 40,985	40,986
20,780	3	0 - 29,923	29,924 - 37,196	37,197 - 44,469	44,470 - 51,742	51,743
25,100	4	0 - 36,144	36,145 - 44,929	44,930 - 53,714	53,715 - 62,499	62,500
29,420	5	0 - 42,364	42,365 - 52,661	52,662 - 62,958	62,959 - 73,255	73,256
33,740	6	0 - 48,585	48,586 - 60,394	60,395 - 72,203	72,204 - 84,012	84,013
38,060	7	0 - 54,806	54,807 - 68,127	68,128 - 81,448	81,449 - 94,769	94,770
42,380	8	0 - 61,027	61,028 - 75,860	75,861 - 90,693	90,694 - 105,526	105,527

\* - CFA income consideration includes: all sources of income, grants, assistance from others, other assets and available credit (note: credit reports may be pulled)

\*\* - Source: U.S. Department of Health & Human Services, 2017 Poverty Guidelines

\*\*\* - Add \$4,320 for each additional family member