

## Financial Assistance/ Hospital Care Assurance Program (HCAP) Applicable for applications received beginning 1/11/19

2/19/2018 EXHIBIT A

DISCOUNT	100%	Charity
	Federal	
No. of Members in	Poverty	
Household	Level	300%
1	12,490	37,470
2	16,910	50,730
3	21,330	63,990
4	25,750	77,250
5	30,170	90,510
6	34,590	103,770
7	39,010	117,030
8	43,430	130,290
For each additional		
household member	4,420	13,260