

**GREENE COUNTY GENERAL HOSPITAL
FINANCIAL ASSISTANCE GUIDELINES
2016**

Number in Family	Discount 100%	Discount 80%	Discount 70%	Discount 60%	Discount 40%	Discount 20%
1	\$11,880	\$14,256	\$16,632	\$19,008	\$21,384	\$23,760
2	16,020	\$19,224	\$22,428	\$25,632	\$28,836	\$32,040
3	20,160	\$24,192	\$28,224	\$32,256	\$36,288	\$40,320
4	24,300	\$29,160	\$34,020	\$38,880	\$43,740	\$48,600
5	28,440	\$34,128	\$39,816	\$45,504	\$51,192	\$56,880
6	32,580	\$39,096	\$45,612	\$52,128	\$58,644	\$65,160
7	36,730	\$44,076	\$51,422	\$58,768	\$66,114	\$73,460
8	40,890	\$49,068	\$57,246	\$65,424	\$73,602	\$81,780
% OF POVERTY	100%	120%	140%	160%	180%	200%

For families/households with more than 8 persons, add \$4,160 for each additional person.

Data Source: HHS 2016 Poverty Guidelines
48 Contiguous States and the District of Columbia