

Federal Poverty Guidelines Explained

- The federal poverty level (FPL), also known as the "poverty line," is the amount of annualized income earned by a household, below which they would be eligible to receive certain welfare benefits.
- Laws require the Secretary of the Department of Health and Human Services to update the poverty guidelines at least annually, adjusting them on the basis of the Consumer Price Index for All Urban Consumers (CPI-U).
- The poverty guidelines are used as an eligibility criterion by Medicaid and a number of other Federal programs.
- The poverty guidelines issued here are a simplified version of the poverty thresholds that the Census Bureau uses to prepare its estimates of the number of individuals and families in poverty.



2024 Federal Guidelines

<u>Family Size</u>	<u>Income Threshold</u>
1	\$15,050
2	\$20,440
3	\$25,820
4	\$31,200
5	\$36,530
6	\$41,960
7	\$47,340
8	\$52,720

* For family units with more than 8 persons, add \$5,380 for each additional person

How does the Sliding Fee Discount Program work at CHCFC?

- Call our Insurance Navigator directly at 413-325-8500 ext. 146 or ask reception to schedule an appointment.
- CHCFC charges a **nominal fee** of \$20 for medical, behavioral health and dental visits if patients fall below 100% of the Federal Poverty Guideline income thresholds.
- CHCFC offers **discounts** for visits if patients fall between 100%-200% of the Federal Poverty Guideline income thresholds
- You will need some documents to complete an eligibility assessment. Please see back side of this brochure for a list of acceptable documents.

Notice of Financial Assistance

The Community Health Center of Franklin County is a Federally Qualified Health Center (FQHC). Federal and State funding provide services through the Health Safety Net and a Sliding Fee Scale. All forms of insurance accepted, including; Mass Health, Medicare, and private insurance. Assistance is available in applying for these programs.

Sliding Fee Discount Program Verification Documents

1. Proof of income

- Two (2) paycheck stubs
- Income Tax Forms with W-2
- Social Security Statement
- Bank Statements (for pension)
- Employer pay statements
- Child support & alimony
- Federal tax return with Schedule-C

2. Proof of Residency

- Federal income tax return
- Lease or mortgage
- Real estate bill
- Rent receipt
- Current Utility Bill
- Notarized Landlord Affidavit

3. Copies of Any Insurance

4. Completed and signed intake calculation sheet (done with Navigator or Community Health Worker)

Sliding Fee Discount Program

No one will be denied access to services due to inability to pay. Discounts are available to all services based on your income and family size.

